

(Sent to every Member of the House of Representatives)

September 18, 2020

The Honorable Ralph Abraham  
U.S. House of Representatives  
Room 417 Cannon House Office Building  
Washington, DC 20515

Dear Representative Abraham:

On behalf of the 22 undersigned organizations representing surgeons across the United States, **we urge Congress to take immediate action — in the current continuing resolution (CR) or other must-pass legislation this year — to prevent steep Medicare physician payment cuts that will greatly impact our specialties.** Surgeons across the country are faced with a looming uncertainty — in the midst of the COVID-19 pandemic — about whether their Medicare payments will be significantly decreased, beginning in January. Congress must act now while there is still time to provide stability for these physicians, their practices, and their patients.

Policy changes affirmed in the Centers for Medicare & Medicaid Services (CMS) calendar year (CY) 2021 Medicare Physician Fee Schedule (MPFS) proposed rule are detrimental to surgeons and surgical patients, doubling down on policy finalized in the CY2020 MPFS that would cut payments to specialty medicine. As currently proposed, CMS is increasing those cuts for 2021, and nearly all surgical specialties will face additional reductions, for example, cardiac surgery 9%, thoracic surgery 8%, vascular surgery and neurosurgery 7%, ophthalmology 6%, and surgeons that care for women with gynecologic and breast cancer.

To prevent these cuts, the surgical community urges Congress to pass legislation that:

- 1. Increases the global codes.** The new coding system increases the payment levels for stand-alone office and outpatient evaluation and management (E/M) billing codes. However, CMS did not apply the payment adjustment to the identical E/M portion of the global codes, which creates a payment differential across medical specialties. This policy directly conflicts with the Omnibus Budget Reconciliation Act (OBRA) of 1989, which prohibits CMS from paying physicians differently for providing the same service.
- 2. Halts implementation of the new add-on code.** CMS has created an unjustified add-on code to provide an additional payment for primary care and certain specialty visits. CMS initially proposed to restructure the E/M coding system for office and outpatient E/M visits and developed an add-on code for those specialties who would experience payment cuts due to changes to the coding system. Despite the fact that CMS decided not to move forward with its original plan to restructure the coding system, it still plans to implement the add-on code even though the justification for the code no longer exists.

The combined policies will have a devastating effect on a significant portion of specialty care due to the statutory requirements for budget neutrality under the MPFS. Notwithstanding the impact of the COVID crisis, many physicians were *already* deeply concerned about the impact of these policy changes on their patients and their practices. Now, the devastating financial impact of the pandemic has greatly exacerbated these concerns.

Representatives Ami Bera, MD (D-CA) and Larry Bucshon, MD, FACS (R-IN), are leading a sign-on letter urging Congressional leadership to act this year to prevent the cuts. We would appreciate it if you would consider signing on to this letter and supporting efforts to stop the devastating cuts. To sign this letter, please contact Colleen Nguyen in Rep. Bera's office at [Colleen.Nguyen@mail.house.gov](mailto:Colleen.Nguyen@mail.house.gov) or Dylan Moore in Rep. Bucshon's office at [Dylan.Moore@mail.house.gov](mailto:Dylan.Moore@mail.house.gov).

We stand in strong opposition to the policy changes in the proposed rule, which affirms, and in some instances increases, the payment cuts CMS announced last year. Without urgent action, these flawed policies will have devastating impacts on both Medicare patients and physicians who are already struggling to keep their practices afloat. Thank you for your consideration.

Sincerely,

American College of Surgeons  
American Academy of Facial Plastic and Reconstructive Surgery  
American Academy of Ophthalmology  
American Association of Neurological Surgeons  
American Association of Orthopaedic Surgeons  
American College of Osteopathic Surgeons  
American Orthopaedic Foot & Ankle Society  
American Pediatric Surgical Association  
American Society for Metabolic and Bariatric Surgery  
American Society for Surgery of the Hand  
American Society of Breast Surgeons  
American Society of Cataract and Refractive Surgery  
American Society of Colon and Rectal Surgeons  
American Society of Plastic Surgeons  
American Society of Retina Specialists  
American Urogynecologic Society  
Congress of Neurological Surgeons  
Society for Vascular Surgery  
Society of American Gastrointestinal and Endoscopic Surgeons  
Society of Gynecologic Oncology  
Society of Surgical Oncology  
The Society of Thoracic Surgeons