

KICKING THE CAN – RIGHT OVER THE CLIFF

Congress must revamp Medicare’s physician fee structure

Physicians face mandatory cuts in Medicare reimbursement each year due to the flawed Sustainable Growth Rate (SGR) formula. Medicare has withheld physician payments several times to enable Congress to pass short-term fixes to the SGR. CAA appreciates Congressional interventions, but these “kick the can down the road” actions have resulted in a roller coaster ride of economic worries for physicians who provide care to Medicare patients.

Doctors cannot continue to absorb these cuts and maintain their current level of services. Expert panels convened by Congress and Medicare uniformly agree that the physician payment formula is flawed and have made recommendations for creating a more rational and predictable system. CAA supports a reform of Medicare’s physician payment system before it goes over the “cliff” and physicians are forced to limit access to health care services.

CAA supports:

Repeal of the Sustainable Growth Rate formula on which physician payments are based and replacing it with the Medicare Economic Index (MEI) to determine physician fee schedules.

Removal of Part B drugs from the SGR formula from the base year. The rate of growth in the cost of prescription drugs is beyond the control of physicians, and their reimbursements must not be tied to drug costs.

Pay-for-Performance standards that are based on clinical, not claims, data. Linking quality measures to reimbursement by using measures based on reasonable principles set by professional medical organizations would assure Congress that physicians are providing high-quality care to our nation’s Medicare population. Many of our members participate in Medicare’s Physician Quality Reporting Initiative.

Lab accreditation, clinical appropriateness criteria and credentialing requirements to ensure appropriate, high-quality imaging utilization. Advanced imaging procedures have enabled physicians to make great strides in the diagnosis and treatment of cardiac disease. CAA supports reasonable requirements for physicians and practices, such as those required by the Medicare Improvement for Patients and Physicians Act of 2008 and in the 2010 health care reform legislation. Lab accreditation and use of appropriateness criteria will help ensure that patients receive the right test at the right time.

THE BOTTOM LINE: CAA supports measures that stop the implementation of the flawed SGR formula and implores Congress to find a permanent resolution to reimburse physicians fairly for the care they provide to the nation’s older population.



CAA’s mission is to support the sustainability of the cardiovascular professional regardless of practice setting. CAA educates the cardiovascular community about regulatory and legislative issues that affect its ability to provide all services necessary for high-quality cardiac care. CAA represents the common interests of the cardiovascular patient and professional on such issues and encourages its members to advocate for their patients and their practices. For more information, visit our website: cardiologycaa.com.