



## 2020 Proposals for Medicare Released



By Elizabeth Woodcock, MBA, FACMPE, CPC

The federal government recently issued important Medicare proposals for 2020. While you can certainly take a deep dive into the 1,704-page document if time permits, we compiled this article to highlight key proposals that may impact you.

The Quality Payment Program – in which many physicians participate in the Merit-based Incentive Payment System (MIPS) track – is being overhauled. Acknowledging complaints about the challenges associated to the program, the Centers for Medicare and Medicaid Services (CMS) is recommending:

- 1) Increasing the minimum threshold to 45 points; this would be the magic number you'd need to reach to avoid the nine percent penalty to reimbursement in 2022.
- 2) Changing the category weight for Quality to 40 percent, pushing the extra weight into the Cost category, which will be 20 percent.
- 3) Reengineering the program to focus on MIPS Value Pathways, "bundles" of care designed to integrate measures across the four categories; an example is Diabetes Prevention and Treatment.

CMS also submitted the proposed rule for the Medicare Physician Fee Schedule (PFS). The conversion factor for reimbursement is proposed to be \$36.09, a paltry increase over this year's \$36.04. In addition to this conversion factor update, the Medicare PFS proposal includes:

1) Acceptance of the AMA-proposed evaluation and management (E/M) changes, to include four levels for new patients, the performance of history and exam only as





medically appropriate, and a revision of the times that are issued as guidelines. Further, CMS is accepting the AMA-proposed relative value units for E/M codes, which are higher.

- 2) Increased payment for Transitional Care Management (TCM) and alterations to coding Chronic Care Management (CCM) services.
- 3) New telehealth services for opioid use disorders and payment for medicationassisted treatment (MAT) by opioid treatment programs.
- 4) Flexibility in physician supervision of physician assistants in the absence of state laws.
- 5) Modification of documentation requirements, so that physicians and advanced practice providers could simply sign and date notes in the medical record recorded by trainees, learners, nurses, or other members of the care team.

These changes are proposed; the final rules for 2020 will be issued by the federal government in November. To read the proposed rule, see this link.

The contents of The Sentinel are intended for educational/informational purposes only and do not constitute legal advice. Policyholders are urged to consult with their personal attorney for legal advice, as specific legal requirements may vary from state to state and/or change over time.