CMS proposed changes to E/M coding, documentation requirements and payment.

AAPM&R formally opposed CMS's proposed changes directly and through coalition work.

The Academy signed on to 2 coalition letters on this issue include 1 signed by more than 80 specialty societies and another signed by more than 150 societies.

CMS finalized a modified proposal. AAPM&R still disagreed with finalized payment and documentation changed.

The 2019 Physician Fee Schedule Final Rule included a single payment rate for level 2-4 office and outpatient E/M visits effective January 1, 2021.

AAPM&R submitted a detailed physiatry-specific comment letter to CMS.

The 2019 Medicare Physician Fee Schedule Proposed Rule included a proposal to create a single payment rate for level 2-5 office and outpatient E/M visits.

AAPM&R participated in a Joint CPT/RUC Workgroup to revise the office and outpatient E/M code set.

The proposal reflects a simplification of documentation requirements as well as an increase in RVUs for many E/M visits. In the proposed rule, CMS highlights the RUC’s “rigorous robust survey approach, including surveying over 50 specialties” as justification for the new higher RVU values. AAPM&R is proud to have been a strong participant in this process on the RUC and is thrilled for this advocacy win. Additional details on the 2021 E/M office and outpatient visit codes can be found at www.ama-assn.org/cpt-evaluation-and-management.

AAPM&R gathered member input on CMS’s proposed changes.

The AMA CPT Panel approved the joint CPT/RUC workgroup modifications to E/M coding.

The new codes, which will take effect January 1, 2021 include new documentation requirements for office and outpatient E/M codes. Information regarding these code changes was submitted to CMS as a part of their rulemaking process for future publications on the Medicare Physician Fee Schedule.

CMS released rule proposing 2021 implementation of CPT recommended modifications to E/M coding and RUC recommended RVU values.

AAPM&R participated in a Joint CPT/RUC Workgroup to revise the office and outpatient E/M code set.