

March 13, 2023

The Honorable Chiquita Brooks-LaSure
Administrator
Centers for Medicare & Medicaid Services
Department of Health and Human Services
200 Independence Avenue S.W.
Washington, DC 20201

Re: CY 2024 Physician Fee Schedule (PFS) and Hospital Outpatient Prospective Payment System (HOPPS) Rulemaking

Dear Administrator Brooks-LaSure:

The undersigned organizations, representing providers of medical imaging services and manufacturers of medical imaging devices, are writing in advance of calendar year 2024 Physician Fee Schedule (PFS) and Hospital Outpatient Prospective Payment System (HOPPS) rulemaking, urging the Centers for Medicare & Medicaid Services (CMS) to protect access to medical imaging services.

Medical imaging plays an essential role in our nation's health care infrastructure and the care pathways of screening, staging, evaluating, managing, and effectively treating patients with cancer, heart disease, neurological degeneration, COVID-19, and numerous other medical conditions. Access to these vital medical exams is at risk if CMS does not implement policies that stabilize the PFS and guarantee appropriate reimbursement levels.

Due to budget neutrality requirements, CMS again called for significant cuts to provider payment in the CY2023 PFS Final Rule. The PFS was the only Medicare fee schedule to not receive an inflationary increase in reimbursement, with a projected cut of 4.5% to the Conversion Factor, relative to the 2022 level. Concerningly, the 2022 Conversion Factor was lower than the rate in 1998. While Congress took action to address reductions in the PFS at the end of last year by reducing the payment cut to ~-2.1% in 2023 and delaying the implementation of the -4% PAYGO sequestration cut, the rate in 2023 remains lower than the rate over 20 years ago. It is also worth noting that the -2% sequester cuts are due to continue into the next decade. Long-term solutions are needed to stabilize physician and provider payment.

While the above cuts affect all specialties, including medical imaging, payment levels for provision of medical imaging services have been under additional downward pressure in recent years. As highlighted in a recent issue of the journal *Current Problems in Diagnostic Radiology*, "There was a combined mean reduction of inflation adjusted payments of 44.4% across all included imaging studies from 2011 to 2021."¹ According to the study, vital imaging services including brain MRI, ultrasound, and DEXA have been subject to meaningfully large reimbursement cuts.

¹ <https://www.sciencedirect.com/science/article/pii/S0363018822000081?via%3Dihub>

Year over year, imaging reimbursement has been repeatedly cut:²

Mean Adjusted Total Change	Time Period
-7.0%	2011-2012
-11.0%	2012-2013
-16%	2013-2014
-11.0%	2014-2015
-1.0%	2015-2016
.2%	2016-2017
-2.0%	2017-2018
-1.0%	2018-2019
-4.0%	2019-2020
-2.0%	2020-2021

Temporary relief is welcome but fails to adequately address the serious financial pressures of sustained high inflation, escalating supply costs, a dwindling workforce, and the ongoing economic effects of the COVID-19 pandemic. The Medicare Economic Index rebase and the repayment of 340B funds also create new pressure and uncertainty for reimbursement. Coupled with annual payment cuts, these factors threaten access to medical imaging technologies that empower healthcare providers to make better-informed medical decisions that lead to overall cost savings and improved patient outcomes. Without adequate reimbursement, imaging practices will not be able to invest in new technologies, maintain existing technologies, or meet challenges such as new cybersecurity requirements. This will be especially true in underserved communities such as rural areas and inner cities.

CMS must take whatever steps it has within its authority to ensure adequate and appropriate payment for medical imaging services in CY 2024. We also urge CMS to work with Congress, imaging providers, and other stakeholders to address ongoing systemic threats to beneficiary access to medical imaging by fostering stability in the reimbursement system through such policies as mandatory inflationary adjustments, reform of budget neutrality requirements, and ensuring updated and accurate Practice Expense data.

We look forward to working with CMS, Congress, and other stakeholders to develop and implement policies that ensure ongoing access to the reasonable and necessary imaging that Medicare beneficiaries deserve.

Sincerely,

The American Society of Radiologic Technologists (ASRT)
The Medical Imaging & Technology Alliance (MITA)
The Radiology Business Management Association (RBMA)
Radiology Partners
RadNet
RAYUS Radiology
Shields Health
The Society of Nuclear Medicine and Molecular Imaging (SNMMI)
Zotec Partners

² *ibid*