

## Summary of the 2017 Proposed Medicare Physician Fee Schedule

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### Executive Summary

On July 7, the Centers for Medicare & Medicaid Services (CMS) released a [proposed rule](#) titled, “Medicare Program; Revisions to Payment Policies under the Physician Fee Schedule and Other Revisions to Part B for CY 2017; Medicare Advantage Pricing Data Release; Medicare Advantage and Part D Medical Low Ratio Data Release; Medicare Advantage Provider Network Requirements; Expansion of Medicare Diabetes Prevention Program Model.” In addition, the agency issued a related [press release](#) and [fact sheet](#). In particular, this year’s proposed rule places a specific emphasis on primary care. CMS leaders also published a [blog](#) titled, “Focusing on Primary Care for Better Health.” In this blog, CMS discusses how the agency should:

*...reinvest in what we value — primary care — as a practice, as a profession, and as an abundant resource for patients. In recent years, we have begun taking a number of meaningful steps to begin this reinvestment process. Today, we are proposing significant actions to improve how we pay primary care physicians, mental health specialists, geriatricians, and other clinicians. By better valuing primary care and care coordination, we help beneficiaries access the services they need to stay well. In addition to keeping people healthy, health care costs are lower when people have a primary care provider and team of doctors and clinicians overseeing and coordinating their care.*

CMS proposes several new physician fee schedule policies that address Medicare payment for services provided by primary care physicians for patients with multiple chronic conditions, mental and behavioral health issues, and cognitive impairment or mobility-related disabilities.