November 3, 2020

The Honorable Michael Burgess, M.D.
2161 Rayburn House Office Building
Washington, DC 20515

The Honorable Bobby Rush
2188 Rayburn House Office Building
Washington, DC 20515

Dear Representatives Burgess and Rush:

On behalf of the American Academy of Family Physicians (AAFP), which represents more than 136,700 family physicians and medical students across the country, I write to express our support for H.R. 8505.

H.R. 8505 would provide equitable financial support for physician practices of all specialties by waiving Medicare budget neutrality requirements for all services in the Medicare Physician Fee Schedule in 2021 without creating a funding cliff or disrupting the relativity of the Fee Schedule. This is consistent with the joint principles that the AAFP and twenty other physician specialty groups developed to guide Congress as it seeks to address the impact of the budget neutrality.

In 2019, the Centers for Medicare and Medicaid Services finalized a long overdue payment increase for outpatient Evaluation and Management (E/M) services effective January 1, 2021. These increases are based on a robust survey, were agreed upon across specialties, and were finalized through the standard rulemaking process with several opportunities for public comment. E/M visits are the foundation of family medicine and the 2021 updates will begin to correct the historic undervaluation of E/M services and primary care itself. However, much of the expected payment increase for outpatient E/M services will be negated due to Medicare budget neutrality requirements. Budget neutrality requirements adversely affect physicians in every specialty, including primary care, medical specialists, and surgeons. We agree that Congress should act to mitigate the impact of budget neutrality, given the combined impact with the COVID-19 pandemic. By enacting a one-time, one-year COVID-19 percentage payment adjustment, this legislation would offset forthcoming payment reductions due to Medicare budget neutrality requirements for all physicians facing financial challenges.

Family medicine practices are facing significant financial strain due to the COVID-19 pandemic, with 43 percent of primary care practices estimating that it will take more than one year to recover financial losses. A recent study found that primary care practices will lose nearly $68,000 in revenue per full time physician in 2020, totaling $15 billion across the nation. This is particularly concerning considering about two percent of the Provider Relief Funds allocated by Congress have been distributed to primary care practices. Accordingly, it is critical that temporary relief enacted by Congress include support for primary care practices and does not disadvantage them compared to other specialties. H.R. 8505 achieves the goal of providing equitable relief. The AAFP supports utilizing unspent Provider Relief Funds to offset the cost of budget neutrality relief, so long as that relief is made available to all physicians.
Thank you for introducing this legislation. Once enacted, it will ensure that primary care services are appropriately valued while also providing temporary relief to all physician practices due to the COVID-19 pandemic. We look forward to working with you to move this legislation forward. For more information, please contact Erica Cischke, Senior Manager for Legislative and Regulatory Affairs at ecischke@aafp.org.

Sincerely,

Gary L. LeRoy, M.D., FAAFP
Board Chair

cc: House Committee on Ways and Means
House Committee on Energy and Commerce
House Committee on Appropriations
Senate Committee on Finance
Senate Committee on Appropriations

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1 Larry A. Green Center. “Quick COVID-19 Primary Care Survey.” Series 21 Fielded September 18-21, 2020.https://static1.squarespace.com/static/5d7ff8184cf0e01e4566cb02/t/5f75da37bde1f0691fc28b0d/160155907041/C19+Series+21+National+Executive+Summary.pdf