

MedPAC Public Meeting – January 2019 – Recommendations

Session title: Assessing payment adequacy and updating payments: Hospital inpatient and outpatient services; and Redesigning Medicare’s hospital quality incentive programs

The Congress should:

- Replace Medicare’s current hospital quality programs with a new hospital value incentive program (HVIP) that:
 - Includes a small set of population-based outcome, patient experience and value measures;
 - Scores all hospitals based on the same absolute and prospectively set performance targets;
 - Accounts for differences in patient’s social risk factors by distributing payment adjustments through peer grouping, and
- For 2020, update the 2019 base payment rates for acute care hospitals by 2 percent. The difference between the update recommendation and the amount specified in current law should be used to increase payments in a new HVIP.

Session title: Assessing payment adequacy and updating payments: Physicians and other health professional services; and Medicare payment policies for advanced practice registered nurses and physician assistants

Physician update:

For calendar year 2020, the Congress should increase the calendar year 2019 Medicare payment rates for physician and other health professional services by the amount specified in current law.

APRN and PA:

- The Congress should require APRNs and PAs to bill the Medicare program directly, eliminating “incident to” billing for services they provide.
- The Secretary should refine Medicare’s specialty designations for APRNs and PAs.

Session title: Assessing payment adequacy and updating payments: Ambulatory surgical centers and hospice

Ambulatory surgical centers #1:

The Congress should eliminate the calendar year 2020 update to the Medicare conversion factor for ambulatory surgical centers.

Ambulatory surgical centers #2:

The Secretary should require ambulatory surgical centers to report cost data.

Hospice:

For 2020, Congress should reduce the fiscal year 2019 Medicare base payment rates for hospice providers by 2 percent.

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Session title: Assessing payment adequacy and updating payments for post-acute care providers: Skilled nursing facilities; home health agencies; and inpatient rehabilitation facilities

Skilled nursing facilities #1:

The Secretary should proceed to revise the skilled nursing facility prospective payment system in fiscal year 2020, and should annually recalibrate the relative weights of the case mix groups to maintain alignment of payments and costs.

Skilled nursing facilities #2:

The Congress should eliminate the fiscal year 2020 update to the Medicare base payment rates for skilled nursing facilities.

Home health agencies:

For 2020, the Congress should reduce the calendar year 2019 Medicare base payment rate for home health agencies by five percent.

Inpatient rehabilitation facilities:

For 2020, Congress should reduce the fiscal year 2019 Medicare base payment rate for inpatient rehabilitation facilities by 5 percent.

Session title: Assessing payment adequacy and updating payments: Long-term care hospital services

For 2020, the Secretary should increase the fiscal year 2019 Medicare base payment rates for long-term care hospitals by 2 percent.

Session title: Assessing payment adequacy and updating payments: Outpatient dialysis services

For CY 2020, the Congress should update the CY 2019 Medicare ESRD PPS base rate by the amount determined in current law.