

Mandated report: Relationship between clinician services and other Medicare services

ISSUE: Section 101(a)(3) of the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) directs MedPAC to submit a report to the Congress on the relationship between use of and expenditures for services provided by physicians and other health professionals (clinicians) and total service use and expenditures under Parts A, B, and D of Medicare. MedPAC submitted an initial report in June 2017; a final report is due no later than July 1, 2021.

KEY POINTS: To fulfill the Congressional mandate for the final report, staff analyzed the program data for Medicare Part A, Part B, and Part D. The analytical approach includes regression-based methods used in our previous work on regional variation in Medicare service use.

ACTION: Commissioners will discuss the findings and provide guidance on finalizing the report.