

Senate passes Medicare bill to avert physician payment cuts July 10, 2008

The Senate passed key legislation July 9 that forestalls a 10.6% cut in Medicare physician payments following intense lobbying from patient and physician advocacy groups over the Independence Day Congressional recess. The 69-30 tally in favor of the bill makes it veto-proof.

The Medicare Improvements for Patients and Providers Act of 2008 (HR 6331) replaces the 10.6% payment cut scheduled by Medicare's Sustainable Growth Rate formula that would have become effective July 1 with a 0.5% payment raise for the remainder of 2008. HR 6331 also repeals an additional 5% cut set for Jan. 1, 2009, and provides instead a 1.1% increase.

The bill requires providers of advanced imaging services such as CT, MRI, and PET to be accredited by 2012 to receive payments. HR 6331 also establishes a two-year voluntary appropriateness criteria evaluation program.

The imaging provisions and accreditation requirements will bolster the overall quality of practice and ensure that Medicare beneficiaries receive consistent care nationwide, according to Thrall.

The approved legislation will also phase out indirect medical education subsidies that Medicare currently pays to Medicare Advantage plans run by private insurers, said Orrin Marcella, ACR director of congressional affairs. It will eliminate the ability of private fee-for-service Medicare Advantage plans to automatically deem a physician in its network without a contract in areas where more than one of these plans exist.

This an excerpt from an article published by Diagnostic imaging Online.

This article is for reference only. Neuisys bears no responsibility for statements in this article.
