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The Clinical Labor Coalition—a group of national medical societies representing a broad range of physicians, health professionals and practice managers who care for Medicare beneficiaries in a community-based, office setting—released the following statement in response to Congress' failure to include targeted monies to mitigate the impact of the clinical labor pricing update policy in the year-end omnibus appropriations package.

"The Clinical Labor Coalition (CLC) is disappointed that the fiscal year 2023 Omnibus Appropriations bill not only fails to prevent the scheduled 4.5% cut to the Medicare conversation factor (CF) for 2023 in its entirety, but also omits critical policy designed to explicitly increase the non-facility/office-based practice expense relative value units (NF PE RVUs) negatively impacted by CMS' clinical labor update policy."

Despite Congress' intent to partially mitigate scheduled Medicare payment reductions for 2023, the bottom line is that physicians' payments are still being cut. The impact of these cuts is real, and disproportionately impacts those practicing in community-based, office settings, and will increasingly result in diminished access to care for Medicare patients seeking a variety of critical services. Community-based office setting specialty care is a critical part of the nation's healthcare infrastructure, and we are certain that these now annual payment reductions for CY 2022 – 2025 and beyond will result in repercussions for the future, impacting access and value.

The CLC remains concerned that 2023 payment reductions, combined with the impacts of high inflation, will result in a breaking point for many physicians. These annual payment reductions are driving providers from the field (either through retirement or career adjustment), with practices being closed or sold, and the consequence being a significant number of patients losing access to a variety of healthcare service in their communities. The 118<sup>th</sup> Congress must prioritize Medicare payment reforms designed to provide stability for physicians and the patients they serve in all sites of service.

Alliance of Wound Care Stakeholders American College of Cardiology American College of Radiation Oncology American College of Radiology American Rhinologic Society American Society for Radiation Oncology American Society of Diagnostic and Interventional Nephrology American Society of Nephrology American Urological Association American Vascular Associates American Vein & Lymphatic Society American Venous Forum Association of Freestanding Radiation Oncology Centers CardioVascular Coalition **Dialysis Vascular Access Coalition** Lifeline Vascular Care Outpatient Endovascular and Interventional Society

Radiology Business Management Association Renal Physicians Association Society for Vascular Surgery Society of Interventional Radiology The Society for Cardiovascular Angiography and Interventions The Vascular Care Group United Specialists for Patient Access