**CMS Releases Proposed Rule that Would Improve PA Practice and Increase Patient Access to Care**

On July 29 the Centers for Medicare and Medicaid Services (CMS) issued the proposed Physician Fee Schedule for 2020. This proposed [rule](https://www.govinfo.gov/content/pkg/FR-2019-08-14/pdf/2019-16041.pdf) (pages 65-66) contains important changes to the federal Medicare program which, if finalized, would substantially benefit PAs and the patients they serve beginning January 1, 2020.

The most significant proposed change for PAs is language that would modify Medicare’s existing physician supervision requirement to defer to state law regarding how PAs practice with physicians and other members of the healthcare team. Staff from AAPA’s Advocacy Department had several in-person meetings and written exchanges with senior CMS officials over the past year requesting this change in CMS policy.

As states seek to address their healthcare work force needs many are pursuing PA legislative changes to modernize PA practice. Some of the state law changes replace the term “supervision” with other terms. Other states are eliminating the need for physician supervision altogether. While not altering PA scope of practice, these state-initiated changes will ensure that PAs can practice to the top of their license and increase patient access to care. This modification in Medicare policy would be similar to Medicare’s regulatory requirements that exist for advanced practice registered nurses.

CMS has the ability to make changes to Medicare policy as it relates to the practice relationship between PAs and physicians, but changes made by CMS will not override individual state law and how those laws define the PA-physician relationship.

AAPA encourages PA state chapters and other constituent organizations, as well as practicing PAs and other supportive stakeholders, to send comments to CMS (**see sample letter**) asking the agency to finalize its proposal to modify Medicare’s PA supervision requirements and defer to PA state law to determine how PAs practice. While there are other issues in the proposed Fee Schedule of importance to PA practice, we suggest that your comments be limited to this important issue. AAPA will comment on many of the other issues contained in the proposed rule. In addition, AAPA is asking the agency to amend one aspect of the proposal related to requirements PAs would follow if state law is silent regarding the PA-physician relationship and we need your comments to reflect that request. Realizing that this issue can be complicated and nuanced, we ask that the attached sample letter language be used in comment letters submitted to CMS.

Comments on the proposed Fee Schedule rule are **due to CMS no later than September 27**. For questions about the 2020 proposed Fee Schedule or submitting a comment letter contact Michael Powe, AAPA’s vice president of Reimbursement & Professional Advocacy at [michael@aapa.org](mailto:michael@aapa.org).

A CMS fact sheet on the proposed rule’s changes can be found here: <https://www.cms.gov/newsroom/fact-sheets/proposed-policy-payment-and-quality-provisions-changes-medicare-physician-fee-schedule-calendar-year-2>.

**For informational purposes, other PA-positive proposed changes which AAPA will comment on include:**

* Increased flexibilities surrounding medical record documentation, allowing PAs to review and verify, instead of re-document, notes made in a medical record by other health professionals and students.
* Authorizing PA students’ documentation to be used in the medical record for billing purposes.
* Language permitting PAs who are “attending physicians” to order medications for non-hospice related conditions for Medicare hospice patients.
* Simplifying outpatient documentation requirements for E/M services for levels 2 through 5.
* Increased reimbursement for health professionals who provide chronic care management services.