



Sound Policy. Quality Care.

April 24, 2026

The Honorable Greg Murphy, MD
U.S. House of Representatives
407 Cannon House Office Building
Washington, DC 20515

The Honorable Tom Suozzi
U.S. House of Representatives
203 Cannon House Office Building
Washington, DC 20515

RE: Support for H.R. 8163, *Provider Reimbursement Stability Act*

Dear Representatives Murphy and Suozzi:

As patient and physician advocates, the Alliance of Specialty Medicine (Alliance) writes in support of your legislation, H.R. 8163, the *Provider Reimbursement Stability Act*. We appreciate that it seeks to modernize and update the budget neutrality mechanism of the Medicare Physician Fee Schedule (MPFS) to improve stability for physician reimbursement and patient access.

The Alliance represents more than 100,000 specialty physicians and surgeons across 15 specialty and subspecialty societies. The Alliance is deeply committed to fostering patient access to the highest quality specialty care by advancing sound health care policy. The Alliance is supportive of Congress taking immediate steps to stabilize Medicare physician reimbursements and appreciates your leadership.

As you know, the MPFS is plagued by challenges, including requirements to maintain budget neutrality and irregularly timed updates to practice expense data used to set payments. Physicians are still experiencing the downstream effects of significant redistributions associated with the Centers for Medicare & Medicaid Services (CMS) 2021 and 2023 implementation of increased relative values for office and outpatient evaluation and management (E/M) services and inpatient and other E/M services, respectively, as well as the 2022 implementation of revised clinical labor prices (an update that lagged two decades). Compounding the issue, CMS relies on utilization assumptions when new services are added to the MPFS, but when those projections overestimate actual use - as with the complex care add-on code (HCPCS G2211) and Transitional Care Management (TCM) services - the resulting savings are not returned through the conversion factor (CF).

Medicare physician reimbursement has failed to keep pace with rising inflation, leading to inadequate reimbursement. The layers of cuts imposed on physicians due to the applicable statutes create immense challenges in maintaining solvent practices, retaining and recruiting qualified staff, and ensuring patient access to health care. Because of the year-over-year reductions in Medicare reimbursements over the

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American Academy of Facial Plastic and Reconstructive Surgery • American Academy of Otolaryngology-Head and Neck Surgery
American Association of Neurological Surgeons • American College of Mohs Surgery • American Gastroenterological Association
American Society for Dermatologic Surgery Association • American Society of Cataract & Refractive Surgery
American Society of Echocardiography • American Society of Plastic Surgeons • American Society of Retina Specialists
American Urological Association • Coalition of State Rheumatology Organizations • Congress of Neurological Surgeons
National Association of Spine Specialists • Society of Interventional Radiology

past several years, more and more physician practices have been forced to take drastic measures, such as limiting the number of Medicare patients they see, consolidating with larger hospital or health care systems, which increases costs to the Medicare program, or retiring early and permanently closing their doors.

Again, thank you for your leadership on this important issue. We look forward to working with you to strengthen the Medicare program and patient access to medical specialists.

Sincerely,

American Academy of Facial Plastic and Reconstructive Surgery
American Academy of Otolaryngology-Head and Neck Surgery
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