

AAFP issues summary of 2018 final medicare fee schedule

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(HealthDay)—A four-page executive summary of the 2018 final

Medicare physician fee schedule that was released by the Centers for Medicare & Medicaid Services (CMS) has been published by the American Academy of Family Physicians.

The report highlights the key provisions, including a 0.3 percent increase in the 2018 conversion factor, to \$35.999; however, physicians will not receive the full positive 0.5 percent update in 2018 called for in the Medicare Access and CHIP Reauthorization Act since CMS was not able to fully meet the misvalued code target required by law.

Changes have been made to the value-based payment modifier and its physician feedback program. The final [rule](#) decreases the downward payment adjustment physicians will receive for not meeting Physician Quality Reporting System criteria. The CMS will begin the appropriate use criteria for advanced diagnostic imaging services with an educational and operations testing year in 2020; from mid-2018 through 2019, a voluntary [physician](#) participation period will run. The Medicare Diabetes Prevention Program (MDPP) is also addressed in the final rule, with addition of policies necessary to start furnishing MDPP services in 2018.

Other issues covered by the final rule include establishment of payment rates for nonexcepted items and services, changes to the clinical quality measure reporting requirements, and finalization of new policies for the Medicare Shared Savings Program.

More information: [More Information](#)

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