

Congress passes stimulus bill with relief of radiation oncologists

Your ACRO Government Relations and Economic Committee (GREC) has been hard at work on your behalf. We are pleased to share that Congress passed [H.R.133](#), the legislative vehicle for the Consolidated Appropriations Act of 2021.

Key wins for ACRO include:

- A six-month delay in the radiation oncology APM to January 1, 2022.
- A 2/3 mitigation of the cut to the Physician Fee Schedule conversion factor in 2021 as a result of the 3.75% increase in the Physician Fee Schedule and a three-year delay in the new G2211 add-on code (more information is provided below).

The House Appropriations Website has a one-stop [webpage](#) for summaries about the bill, but below are details likely most relevant to you or your practice:

- [COVID-19 Relief \(Select Provisions\)](#)
 - **Supporting Physicians and Other Professionals In Adjusting to Medicare Payment Changes During 2021.**
 - Provides for a one-time, one-year increase in the Medicare physician fee schedule of 3.75 percent, in order to support physicians and other professionals in adjusting to changes in the Medicare physician fee schedule during 2021, and to provide relief during the COVID-19 public health emergency.
 - **Extension of Temporary Suspension of Medicare Sequestration.**
 - Provides for a three-month delay of the Medicare sequester payment reductions through March 31, 2021.
 - **Paycheck Protection Program Second Draw Loans.**
 - Creates a second loan from the Paycheck Protection Program, called a “PPP second draw” loan for smaller and harder-hit businesses, with a maximum amount of \$2 million.
 - **Additional 2020 recovery rebates for individuals.**
 - The provision provides a refundable tax credit in the amount of \$600 per eligible family member. The credit is \$600 per taxpayer (\$1,200 for married filing jointly), in addition to \$600 per qualifying child. The credit phases out starting at \$75,000 of modified adjusted gross income (\$112,500 for heads of household and \$150,000 for married filing jointly) at a rate of \$5 per \$100 of additional income.
 - **Extension and Benefit Phaseout Rule for Pandemic Unemployment Assistance.**
 - Extends Pandemic Unemployment Assistance (PUA) to March 14, 2021 and allows individuals receiving benefits as of March 14, 2021 to continue through April 5, 2021, as long as the individual has not reached the maximum number of weeks.
 - **Public Health and Social Services Emergency Fund**
 - \$25.4 billion to support testing and contact tracing to effectively monitor and suppress COVID-19, as well as to reimburse for health care related expenses or lost revenue attributable to the coronavirus, including:

- \$22.4 billion for testing, contact tracing, and other activities necessary to effectively monitor and suppress COVID-19, including \$2.5 billion for a targeted effort to improve testing capabilities and contact tracing in high-risk and underserved populations, including racial and ethnic minority populations and rural communities; and
- \$3 billion in additional grants for hospital and health care providers to be reimbursed for health care related expenses or lost revenue directly attributable to the public health emergency resulting from coronavirus, along with direction to allocate not less than 85 percent of unobligated funds in the Provider Relief Fund through an application-based portal to reimburse health care providers for financial losses incurred in 2020.
- “Authorizing Matters” (Select Medicare Provisions)
 - **Moratorium on payment under the Medicare physician fee schedule of the add-on code for inherently complex evaluation and management visits.**
 - Prohibits the Secretary of the Department of Health and Human Services (HHS) from making payments under the Physician Fee Schedule for services described by Healthcare Common Procedure Coding System (HCPCS) code G2211 (or any successor or substantially similar code) prior to January 1, 2024.
 - **No Surprises Act**
 - Requires health plans to hold patients harmless from surprise medical bills.
 - Provides for a 30-day open negotiation period for providers and payers to settle out-of-network claims.
 - States that if the parties are unable to reach a negotiated agreement, they may access a binding arbitration process – referred to as Independent Dispute Resolution (IDR) – in which one offer prevails.
 - **Extension of the work geographic index floor under the Medicare program.**
 - Increases payments for the work component of physician fees in areas where labor cost is determined to be lower than the national average through December 31, 2023.

More on this to come in the weekly ACRO email, and please help our efforts by contributing to the [ACRO PAC](#)