Regulatory Affairs Update

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American College of Physicians

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CY23 Medicare Physician Fee Schedule (1/2)

Conversion Factor = \$33.89, \$-0.72 (inclusive of +2.5% congressional update)

Changes to Inpatient E/M Codes

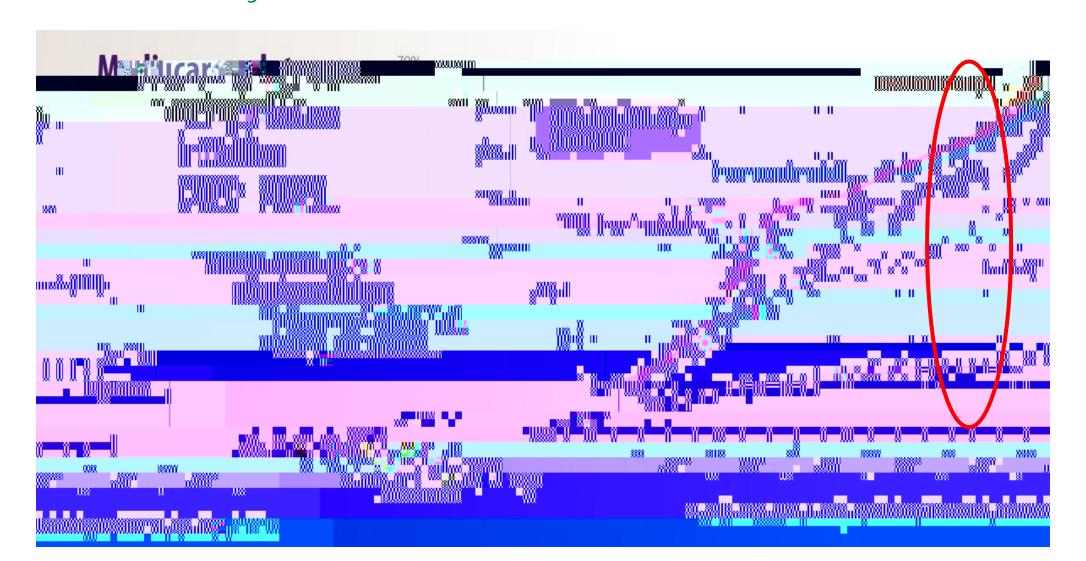
Revisions to inpt. codes are intended to track with the 2021 office E/M changes

Code	Descriptor	Total 2023 RVUs	2023 Payment Rate (CF=33.8872)	Total 2022 RVUs	2022 Payment Rate (CF=34.6062)	Percent Change
99221	Level 1, initial hospital inpt. or obs. care; 40 mins; low MDM	1.63	\$55.24 (1.63 x 33.88)	1.92 (-0.29)	\$66.44 (1.92 X 34.6062)	-16.86%
99233	Level 3 subsequent hospital inpt. or obs. care; 75 mins; high MDM	2.40	\$81.33	2.00 (+0.40)	\$69.21	+17.51%
99236	Level 3 hospital inpt. or					



Specialty Impact Analysis

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Changes to Improve Prior Authorization Processes

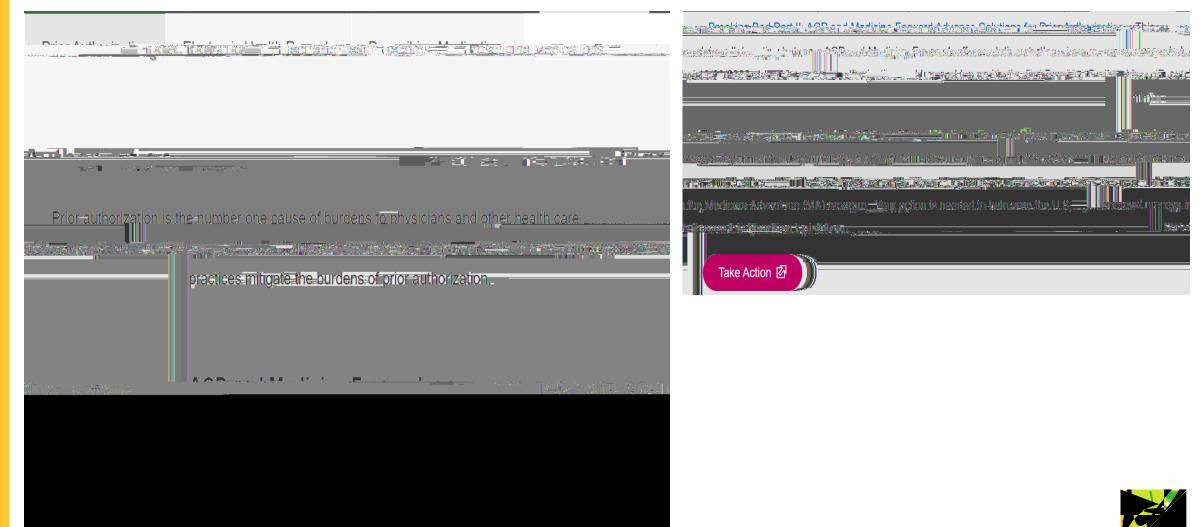
Intended to streamline processes and improve electronic exchange of data

Proposed rule would:

- Require implementation of electronic prior authorization standards
- Place time requirements (i.e., decision timeframes) for responses from payers (+ denials)
- Better enable a longitudinal health record, with patient opt-



Practice Resources, Tips, and Solutions



Updates to the Medicare Advantage Program



