





Medicare 2023 Final Payment Policies Released

On November 1, 2022, the Centers for Medicare and Medicaid Services (CMS) released the calendar year (CY) 2023 Medicare Physician Fee Schedule (PFS).

CY 2023 Medicare Physician Fee Schedule Final Rule

A Win for Patients: Colorectal Cancer Screening Benefit Expansion – Age 45 and Coverage of Colonoscopy Following Positive Stool-based Test

In a win for patients and thanks to our collective advocacy efforts, CMS will expand Medicare coverage of colorectal cancer screening tests by reducing the minimum age payment limitation from age 50 to age 45, beginning in 2023. This proposal aligns coverage with a recently revised recommendation by the United States Preventive Services Task Force (USPSTF) as well as the U.S. Multi-Society Task Force on Colorectal Cancer.

CMS will also expand the regulatory definition of "CRC screening tests," beginning in 2023, to include the colonoscopy after a positive stool-based CRC screening test. This update would waive beneficiary cost-sharing for this necessary follow-up colonoscopy after a non-invasive colorectal cancer screening test. CMS believes these changes would expand access to quality care and improve health outcomes through prevention, early detection, more effective treatment and reduced mortality. CMS also notes that this policy change would directly advance health equity by promoting access and removing barriers for much needed cancer prevention and early detection within rural communities and communities of color that are especially impacted by the incidence of CRC.

CMS will provide implementation instructions, including coding and payment, through the CMS Transmittals online platform and Medicare Learning Network educational articles.

Medicare Cuts Looming: Conversion Factor & Impact on Gastroenterology

CMS has finalized a CY 2023 Physician Conversion Factor (CF) of \$33.06, a decrease of \$1.55 to the CY 2022 PFS conversion factor of \$34.61. This represents an approximately 4.5% reduction from the final CY 2022 Physician CF of \$34.6062. The CF amount reflects a statutorily required update of 0%, the expiration of a 3% increase in payment for CY 2022 as required by the Protecting Medicare and American Farmer from Sequester Cuts Act and a statutorily required budget neutrality adjustment.

Split/Shared Visits Policy Delayed

CMS will delay until CY 2024 the split (or shared) E/M visits policy originally scheduled for implementation in CY 2023. For CY 2023 (as in CY 2022) the substantive portion of a visit may be met by any of the following elements:

- history
- performing a physical exam
- making a medical decision
- spending time (more than half of the total time spent by the practitioner who bills the visit).

Under this change, gastroenterologists furnishing split/shared E/M visits will continue to have a choice of history, physical exam, medical decision making, or more than half of the total practitioner time spent to define the substantive portion, instead of using total time to determine the substantive portion, until CY 2024. The GI societies and many other specialties pushed CMS not to implement its new definition of "substantive portion" as more than half of the total visit time and we will continue to advocate against implementation of this policy change.

Payment for New Endoscopic Bariatric Device Procedure Codes (43290 and 43291)

CMS finalized physician work relative value units (RVUs) for new endoscopic bariatric device procedure codes of 3.11 RVUs for deployment and 2.80 RVUs for removal of the intragastric balloon device.

- 43290 Esophagogastroduodenoscopy, flexible, transoral; with deployment of intragastric bariatric balloon
- 43291 Esophagogastroduodenoscopy, flexible, transoral; with removal of intragastric bariatric balloon(s)

Merit-based Incentive Payment System (MIPS)

CMS will maintain the CY 2023 MIPS performance threshold at 75 points (same as CY 2022). This impacts the CY 2025 payment year. Please note, CY 2022 is the final year for the "exceptional bonus" for high MIPS scores. While most gastroenterologists continue to meet the minimum MIPS reporting thresholds, failing to satisfactorily participate in MIPS for the CY 2023 performance year will result in a 9% payment cut in CY 2025.

MIPS Value Pathways (MVPs) are intended to connect activities and measures from the four MIPS performance categories that are relevant to a specialty, medical condition, or a particular population. For the CY 2023 performance period, CMS will add 5 new MVPs to the previously announced 7 MVPs in the program. CMS will add measures to the existing 7 MVPs. No GI-related MVPs have been proposed for public comment at this time.

CY 2023 Medicare Final Physician Payment Chart

CY 2023 MPFS Final Rule Payment Changes

CMS Final Rules and Fact Sheets

CY 2023 Physician Fee Schedule Final Rule

CY 2023 Physician Fee Schedule Final Rule Fact Sheet