

Repeal the Independent Payment Advisory Board (IPAB) Protect Medicare Payments to Anesthesiologists

The Patient Protection and Affordable Care Act (PPACA) created the non-elected Independent Payment Advisory
Board (IPAB) which would have sweeping powers to mandate across-the-board payment or other targeted reductions in Part
B payments on top of cuts related to sequestration and the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA).

Members of Congress play an essential role in shaping health policies that best meet the needs of their communities and constituents to ensure that the health care system is equipped to care for diverse populations across the country. Under IPAB, major health policy decisions will rest in the hands of 15 unelected and largely unaccountable individuals. Fewer than half of IPAB members can be health care providers, and none will be permitted to be practicing physicians or be otherwise employed.

However, IPAB cuts will disproportionately fall on physicians, as providers representing 37 percent of all Medicare payments - including hospitals and hospice care -- are exempt from IPAB cuts until 2020. As a result of the already unreasonably low Medicare payments for anesthesia services – "the 33 percent problem" - IPAB cuts could disproportionately impact physician anesthesiologists specifically. According to the Government Accountability Office (GAO), Medicare's anesthesia payment rates are 33% of commercial providers' payment rates. Studies show Medicare payment rates for other physician services are between 75-80% of what commercial insurers pay. Physicians already face cuts over the next decade. IPAB will cut payments only, doing nothing to encourage greater access and quality care for health care dollars.

The Protecting Seniors' Access to Medicare Act would repeal the IPAB. Legislation has been introduced in both the House (H.R. 849) and Senate (S. 260) with bipartisan support. Congress should act to repeal the IPAB and ensure fair Medicare payments to physician anesthesiologists.

The non-elected and largely unaccountable Independent Payment Advisory Board (IPAB) will have sweeping powers to mandate across-the-board payment or other targeted reductions in Part B payments on top of cuts related to sequestration and MACRA.IPAB not only severely limits Congressional authority, it eliminates the transparency of hearings, debate and any meaningful opportunity for stakeholder input.IPAB cuts will disproportionately fall on physicians, and could disproportionately impact anesthesiologists, who already experience a "33 percent problem." Congress should act to pass legislation to repeal the IPAB.

KEY POINTS:

- The non-elected and largely unaccountable Independent Payment Advisory Board (IPAB) will have sweeping powers to mandate across-the-board payment or other targeted reductions in Part B payments on top of cuts related to sequestration and MACRA.
- IPAB not only severely limits Congressional authority, it eliminates the transparency of hearings, debate and any meaningful opportunity for stakeholder input.
- IPAB cuts will disproportionately fall on physicians, and could disproportionately impact anesthesiologists, who already experience a "33 percent problem."
- Congress should act to pass legislation to repeal the IPAB.

CONGRESSIONAL REQUEST:

- Please support IPAB repeal legislation (S. 260 and H.R. 849), the "Protecting Seniors' Access to Medicare Act."
- Protect and enhance Medicare payments to physician anesthesiologists by addressing the anesthesiology payment "33 percent problem" and reversing draconian Medicare cuts to important pain care procedures.