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## FOR IMMEDIATE RELEASE

### Legislation to Strengthen Community and Office-Based Providers Highlighted by Energy and Commerce Health Subcommittee

**Washington, DC**—The Clinical Labor Coalition (CLC) commends Energy and Commerce Health Subcommittee leaders, Reps. Brett Guthrie and Anna Eshoo, for their leadership in convening today’s hearing to discuss critical Medicare proposals to improve patient access to care and minimize red tape for doctors. This hearing offered a rare opportunity to highlight fundamental issues in the Medicare program that are negatively impacting both physicians and the patients they serve.

One of the pieces of legislation highlighted at the hearing is H.R. 3674, the Providing Relief and Stability for Medicare Patients Act of 2023. Introduced by Reps. Bilirakis (R-FL), Cardenas (D-CA), Murphy (R-NC) and Davis (D-IL) this legislation addresses the needs of specialty physicians practicing in community-based office settings that have been disproportionately impacted by CMS’ proposed changes within the fee schedule. Specifically, the clinical labor update policy, finalized in the CY2022 MPFS Final Rule, recognized the need for increased salary rates for all types of clinical labor (e.g., nurses and technologists), but, due to the budget neutrality constraints in the Medicare Physician Fee Schedule, decreased reimbursement rates for those services with high supply and equipment costs when performed in a community-based office setting. H.R. 3674 would provide critical relief for office-based specialists by increasing the non-facility/office-based practice expense relative value units negatively impacted by CMS’ clinical labor policy for the next two years.

The CLC is a strong supporter of H.R. 3674, and its member organizations are dedicated to facilitating advancement of the bill. “The impact of these cuts is real for physicians who care for Medicare beneficiaries in a community-based, office setting, and will increasingly result in diminished access to care for Medicare patients seeking a variety of critical services in their neighborhood,” said **Dr. Megan Tracci, Chair of the Society for Vascular Surgery’s Advocacy Council**. “H.R. 3674 is a critical step to provide desperately needed stability for those most impacted by the clinical labor update policy.”

**Dr. Bob Tahara, President of the Outpatient Endovascular and Interventional Society** added, “Office based specialty care is a critical service outside of the hospital setting. These specialists provide a wide range of services to patients with end-stage renal disease, eye disease, fibroids, as well as limb salvage and venous ulcer needs. Maintaining the office setting is critical for patient access and patients receiving care in a timelier manner.”

“For at least a decade, office-based specialty centers have been closing, resulting in a significant loss of access in rural and underserved areas. Enactment of H.R. 3674 is a critical bridge to ensuring that patients with cancer and other life-threatening diseases can continue to receive timely access to care as Congress continues to work on broader reform to the Physician

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Fee Schedule,” said **Dr. Dwight Heron, President of the American College of Radiation Oncology**.

The CLC appreciates the E/C Heath Subcommittee’s efforts to highlight this important legislation and looks forward to working together to ensure it is included in any year-end legislative package.

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Alliance of Wound Care Stakeholders  
American Association of Clinical Urologists  
American College of Cardiology  
American College of Radiation Oncology  
American College of Radiology  
American College of Surgeons  
American Society for Radiation Oncology  
American Society of Diagnostic and Interventional Nephrology  
American Society of Nephrology  
American Urological Association  
American Vein & Lymphatic Society  
American Venous Forum  
Association of Freestanding Radiation Oncology Centers  
CardioVascular Coalition  
Dialysis Vascular Access Coalition  
Free From Fibroids Foundation  
Large Urology Group Practice Association  
Outpatient Endovascular and Interventional Society  
Renal Physicians Association  
Society for Cardiovascular Angiography and Interventions  
Society for Vascular Surgery  
Society of Interventional Radiology  
The US Oncology Network  
United Specialists for Patient Access

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