



ASEcho.org/Advocacy

As we close 2024, ASE looks back at the legislative and regulatory advances and challenges in echocardiography.

Continued Cuts to Physician Payment

On November 1, the Centers for Medicare and Medicaid Services (CMS) released the [final rule](#) for the Calendar Year (CY) 2025 Medicare Physician Fee Schedule (PFS), which included a 2.83% reduction in physician payments—marking the fifth consecutive year of cuts. This decrease, coupled with the absence of an inflationary update, places significant strain on medical practices.

In a [letter](#) to CMS on the proposed rule, ASE advocated for Congress and CMS to collaborate on solutions that prevent further reductions, proposing an annual inflation adjustment to the conversion factor based on the Medicare Economic Index (MEI) to ensure practices can keep pace with rising healthcare costs. To address these challenges, the House of Representatives recently introduced the Medicare Patient Access and Practice Stabilization Act of 2024 ([H.R. 10073](#)). This bill aims to eliminate the 2.8% conversion factor cut and provide an approximate +1.80% update. ASE was [an original supporter](#) of this legislation and continues to urge Congress to include this bill in an end-of-year legislative package during the post-election lame duck session.

To contact your Members of Congress urging them to act, send them a letter [here](#).

Legislation Addressing Workforce Issues

ASE was active this year in advocating for new policies to address ongoing workforce issues in echocardiography. ASE advocated on the following issues:

- **Increased Graduate Medical Education** – The *Resident Physician Shortage Reduction Act* ([S. 1302](#)) will improve the nation's GME system and help to preserve access to specialty care by increasing Medicare-supported GME residency slots by 14,000 over the next seven years; specifying priorities for distributing the new slots.
- **Step Therapy** – The *Safe Step Act* ([S. 652](#) / [H.R. 2630](#)) amends the Employee Retirement Income Security Act of 1974 to require a group health plan to establish an exception process to medication step-therapy protocol, as well as require that requests be granted in a timely manner—within three days after receipt of the request or 24 hours when the protocol jeopardizes the life or health of the individual.
- **Telehealth** – There are several legislative vehicles to allow broader access to telehealth services, including the use of audio-only communication, expansion of eligible telehealth providers, and the ability to deliver services to patients in their homes, regardless of geographic location. ASE supports legislation to ensure care is continued for echocardiography patients.
- **Prior Authorization Reform** – The *Improving Seniors' Timely Access to Care Act* ([S. 4532](#)) would establish an electronic prior authorization process for Medicare Advantage (MA) plans including a standardization for transactions and clinical attachments, and increase transparency around MA prior authorization requirements and its use.

Coverage for New Technology

ASE advocated to CMS for increased coverage for echocardiography technology through two new National Coverage Determinations (NCDs).

- **ASE Joins Coalition in Response to the National Coverage Analysis for Transcatheter Tricuspid Valve Replacement** – On July 19, ASE signed onto a coalition [letter](#) to CMS in support of a National Coverage Determination for transcatheter tricuspid valve replacements. The letter also expresses support for facility and operator requirements, including Coverage with Evidence Development.
- **Coalition Letter to CMS on the National Coverage Analysis for T-TEER** – On November 1, ASE joined a coalition [letter](#) to the CMS Coverage Analysis Group in response to updates to the National Coverage Analysis for Tricuspid Transcatheter Edge-To-Edge Repair (T-TEER). The letter expresses support for the creation of a National Coverage Determination for T-TEER and provides detailed guidance on patient risk, health equity, and facility and operator requirements, among other recommendations.

Representation at the American Medical Association

ASE has representation at the American Medical Association's (AMA) House and Committees to advance echocardiography both through policy and billing / coding.

- **House of Delegates** – ASE has two delegates, **Dr. Peter Rahko** and **Dr. Kamu Maganti**, to the AMA House of Delegates, AMA's policy making body. The Society's delegates attended two meetings in 2024 to review, comment, and vote on hundreds of resolutions impacting the House of Medicine.
- **Relative Value Scale Update Committee (RUC)** – ASE has two advisors, **Dr. Geoffrey Rose** and **Dr. Danita Sanborn** to the RUC, a multi-specialty committee dedicated to describing the resources required to provide physician services. The Society's advisors review codes within the echo-family, as well as monitor any potential changes related to practice expenses.
- **CPT Editorial Panel** – ASE also has two advisors, **Dr. Susan Mayer** and **Dr. Vera Rigolin**, to the CPT, the panel responsible for maintaining the AMA CPT code set. The Society's advisors reviewed new applications for codes impacting echocardiography and were pleased to support a new code that was accepted by the CPT Panel and was included in the final Hospital Outpatient Prospective Payment System (OPPS)/Ambulatory Surgical Center (ASC) Rule.
 - Effective January 1, 2025, the new CPT code 0932T - Noninvasive detection of heart failure derived from augmentative analysis of an echocardiogram that demonstrated preserved ejection fraction, with interpretation and report by a physician or other qualified health care professional will replace the previous HCPCS outpatient code C9786. This code will be available for use in both the physician office and hospital outpatient settings. Additionally, this service will continue to be covered in the hospital inpatient setting using the New Technology Add-on Payment (NTAP) code XXE2X19.

If you'd like to become more involved in ASE's advocacy activities, click [here](#) and request to join ASE's Advocacy Network and be kept abreast of the Society's work.

Advancing Cardiovascular Ultrasound to Improve Lives

American Society of Echocardiography | 919-861-5574 | [ASEcho.org](https://www.asecho.org)

American Society of Echocardiography | 2530 Meridian Parkway Suite 450 | Durham, NC 27713 US

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