



Top news stories from AMA Morning Rounds®: Week of Nov. 4, 2024

Read *AMA Morning Rounds®*' most popular stories in medicine and public health from the week of Nov. 4, 2024–Nov. 8, 2024.

CMS goes ahead with 2.9% cut to Medicare physician reimbursements for 2025

Modern Healthcare (11/1, Early, Subscription Publication) reported CMS “has gone ahead with a 2.9% cut to Medicare physician reimbursements for 2025, setting up a lobbying fight when Congress gets back to Washington after the elections.” The federal agency “published the Medicare Physician Fee Schedule final rule Friday, which retains the payment reduction the agency proposed in July.” The AMA “and other physician societies are pleading with Congress to stop the cut from taking effect or blunt its impact – as” they “did for 2024 and prior years.” In a Friday statement, AMA President Bruce Scott, MD, said, “To put it bluntly, Medicare plans to pay us less while costs go up. You don’t have to be an economist to know that is an unsustainable trend, though one that has been going on for decades.”

Fierce Healthcare (11/2, Landi) reported “the calendar year 2025 Medicare Physician Fee Schedule rule...also outlines new policies focused on primary care, preserved telehealth flexibilities and a strengthened Medicare Shared Savings Program.” A fact sheet from CMS “on the rule outlines the key provisions.” Scott “pointed out that...while physicians are receiving a 2.8% payment cut next year, medical practice costs for physicians will increase by 3.5% in 2025.”

You may also be interested in: Why Medicare pay reform is the AMA’s top advocacy priority.

Fewer than one in six health care workers in hospitals, nursing homes received COVID-19 boosters during 2023-2024 respiratory virus season, study finds



Axios (11/4, Bettelheim) reports, “Fewer than 1 in 6 health care workers in hospitals and nursing homes reported getting COVID-19 boosters during the 2023-2024 respiratory virus season, a Centers for Disease Control and Prevention study found.” The new “study found 15.3% of workers in 4,112 acute care hospitals got boosted in 2023-2024, with rates lowest among licensed independent practitioners.” Study results indicate that “vaccination coverage was 10.5% overall among workers in more than 14,000 nursing homes.” Meanwhile, “flu vaccination rates for the same period were 80.7% at acute care hospitals and 45.4% at nursing homes.” The findings were published in Morbidity and Mortality Weekly Report.

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Medicare’s virtual care facing wind down without lawmaker action

Bloomberg Law (11/5, Belloni, Subscription Publication) reports, “The Medicare agency’s move to curtail many popular pandemic-era telehealth flexibilities is prompting a renewed sense of urgency from the telehealth industry to get a broad-ranging telehealth bill passed in Congress before coverage expires at the end of the year.” Bloomberg Law adds, “The 2025 Medicare Physician Fee Schedule announced Nov. 1 will issue a modest extension of flexibilities within the Centers for Medicare & Medicaid Services’ enforcement purview until next year, including allowing limited types of practitioners to virtually supervise auxiliary personnel via telehealth, as well as allowing teaching physicians to be present virtually when providing telehealth services involving residents.”

You may also be interested in: Bipartisan bill would stabilize Medicare physician pay for 2025.

Almost 16% of American adults have diabetes, CDC data show

HealthDay (11/6, Mundell) reports that “nearly 16% of American adults—that’s close to 1 in 6—now” have “diabetes, according to the latest data from the U.S. Centers for Disease Control and Prevention.” Researchers “found a big rise in diabetes rates since 1999-2000, when 9.7% of adult



Americans had the disease.” The findings were published as an NCHS Data Brief.

FDA proposes removing common ingredient in cold medicines found to have no effect on nasal congestion

The New York Times (11/7, Jewett) reports the FDA “on Thursday proposed removing a common ingredient in over-the-counter cold medicines that was found to have no effect on nasal congestion, despite its widespread use for decades.” The agency’s “proposal stems from a recommendation issued just over a year ago by a panel of experts who agreed unanimously that the ingredient, called phenylephrine, did not work when taken in liquid or pill form.” Patrizia Cavazzoni, the director of the FDA’s Center for Drug Evaluation and Research, said, “Based on our review of available data, and consistent with the advice of the advisory committee, we are taking this next step in the process to propose removing oral phenylephrine because it is not effective as a nasal decongestant.”

Reuters (11/7, Roy, S K) reports “the FDA’s action is only related to orally administered phenylephrine and not the nasal spray form.” The FDA is “seeking public comments on this proposed order.”

The Hill (11/7, Weixel) reports the “FDA said its proposal was not based on safety concerns, so companies can still market oral drugs containing the common ingredient.” If the FDA “makes a final decision, then the drugs would have to be removed from shelves.”

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