**Using the Data Contained in the Physician Fee Schedule Public Use Files**

This brief document describes one example of how stakeholders might use the data contained within the public use files (PUF) available in the “download” section of the Physician Fee Schedule (PFS) rule website.

The CMS creates PFS rates by using established methodologies to develop Relative Value Units (RVUs) for each individual service and implement required adjustments to the PFS conversion factor (CF) to ensure that policy changes and changes to the RVUs are consistent with statutory budget neutrality requirements for the PFS.

Several stakeholders have inquired with CMS about using these publicly available files to determine how much the proposed rates for individual services contribute to our estimates of overall payments, and consequently, the required budget neutrality adjustment. In order to make these calculations, estimate (1) the total number of RVUs or anticipated total 2021 payments that would accrue to the individual service(s) and (2) the total number of RVUs or total 2021 payments under the PFS.

The total number of RVUs or anticipated total 2021 payments that would accrue to the individual service(s) can be calculated directly from two Notice of Proposed Rulemaking for Calendar Year 2021 (NPRM21) PUFs: “Appendix B”, which provides the RVUs, and “CY 2019 Utilization Crosswalk to CY 2021”, which provides the utilization needed for this calculation. The total number of RVUs is simply the product of the RVUs reported in Appendix B and the utilization for the service of interest. The utilization PUF reflects payment modifiers, such as MOD=50 for bilateral services, while RVUs only differ from the unmodified value for TC (technical component of a service) and 26 (professional component of a service) modifiers[[1]](#footnote-1). The unmodified RVU value is appropriate for all values except TC and 26. Once the appropriate RVU value by facility is merged with the utilization for the service(s) of interest, take the product of each RVU (work, PE, MP) and its corresponding utilization and sum across the cases for the service by its HCPCS code. This summation or ”pool” of RVUs multiplied by the NPRM21 CF of $32.2605 is then the value of total payments for the service(s) under the 2021 RVUs and CF.

To identify the **total** number of RVUs or total 2021 payments under the PFS, the information described above must be aggregated for all codes, and must also be supplemented with the proposed payments for anesthesia services (HCPCS codes 00100-01999), which are not included in PFS Addendum B since they are paid under a different formula. The total pool of RVUs and payments must include these services and they are included in totals reported below.

The total RVUs (or payment) associated with the service(s) of interest can be divided into the total RVUs (or payment) used in establishing budget neutrality in the table below to calculate its/their share of total RVUs (or payment).

Please note that under the PFS, payment adjustments, including budget neutrality adjustments, are reflected through changes to both the RVUs assigned to each service and the CF. While the effect on total payments of, for example, eliminating payment for particular services can be estimated by the methods described above, the actual effect on the CF and RVUs of such a change would likely differ slightly from this estimate.

Table 1 illustrates the estimated spending effects for proposals described in the A-F pages (F. Refinements to Values for Certain Services to Reflect Revisions to Payment for Office/Outpatient Evaluation and Management (E/M) Visits and Promote Payment Stability during the PHE for COVID-19 Pandemic) of the NPRM21. The first row of the table estimates total spending for all services included in budget neutrality. The CF dropped 10.61 percent from $36.0896 to $32.2605 based on all policy changes reflected in the NPRM21. If the CF did not change from 2020, overall spending would increase by $ 11,437,340,235 or 10.6 percent of the 2021 total.

**Table 1: Total 2021 RVUs and Total Payments for 2021 RVUs under Alternative CFs, Selected HCPCS Codes**

| **Service (HCPCS Code)** | **Short Descriptor** | **Setting** | **Total 2021 Service RVU (Work + Practice Expense + Malpractice)** | **Total Payments Under NPRM21 RVUs and CF ($32.2605)** | **Proposed estimated payment as a percent of total** |
| --- | --- | --- | --- | --- | --- |
| *All Services Included in Budget Neutrality* |  | *All* | *N/A* | *$96,360,584,643* |  |
| *(equals total payment under FR20 RVUs and CF)* |  |
| 99202 | Office/outpatient visit new | Non-Facility | 2.14 | $160,304,277 | 0.17% |
| 99202 | Office/outpatient visit new | Facility | 1.43 | $14,155,664 | 0.01% |
| 99203 | Office/outpatient visit new | Non-Facility | 3.29 | $1,067,920,683 | 1.11% |
| 99203 | Office/outpatient visit new | Facility | 2.42 | $93,664,790 | 0.10% |
| 99204 | Office/outpatient visit new | Non-Facility | 4.94 | $1,431,418,970 | 1.49% |
| 99204 | Office/outpatient visit new | Facility | 3.96 | $197,173,880 | 0.20% |
| 99205 | Office/outpatient visit new | Non-Facility | 6.53 | $444,509,145 | 0.46% |
| 99205 | Office/outpatient visit new | Facility | 5.39 | $137,910,132 | 0.14% |
| 99211 | Office/outpatient visit est | Non-Facility | 0.69 | $55,626,802 | 0.06% |
| 99211 | Office/outpatient visit est | Facility | 0.27 | $1,165,888 | 0.00% |
| 99212 | Office/outpatient visit est | Non-Facility | 1.68 | $466,814,894 | 0.48% |
| 99212 | Office/outpatient visit est | Facility | 1.06 | $40,489,445 | 0.04% |
| 99213 | Office/outpatient visit est | Non-Facility | 2.69 | $7,000,127,462 | 7.26% |
| 99213 | Office/outpatient visit est | Facility | 1.96 | $652,744,034 | 0.68% |
| 99214 | Office/outpatient visit est | Non-Facility | 3.81 | $11,195,864,834 | 11.62% |
| 99214 | Office/outpatient visit est | Facility | 2.89 | $1,282,244,202 | 1.33% |
| 99215 | Office/outpatient visit est | Non-Facility | 5.34 | $1,338,492,759 | 1.39% |
| 99215 | Office/outpatient visit est | Facility | 4.27 | $355,701,171 | 0.37% |
| 99XXX | Prolng off/op e/m ea 15 min | Non-Facility | 0.97 | $27,554,285 | 0.03% |
| 99XXX | Prolng off/op e/m ea 15 min | Facility | 0.94 | $9,031,377 | 0.01% |
| GPC1X | Complex visit w med care svs | Non-Facility | 0.49 | $2,533,780,963 | 2.63% |
| GPC1X | Complex visit w med care svs | Facility | 0.49 | $401,256,868 | 0.42% |
| 59400 | Obstetrical care | Facility | 72.01 | $6,265,867 | 0.01% |
| 59410 | Obstetrical care | Facility | 31.8 | $817,623 | 0.00% |
| 59425 | Antepartum care only | Non-Facility | 16.88 | $346,060 | 0.00% |
| 59425 | Antepartum care only | Facility | 13.08 | $76,539 | 0.00% |
| 59426 | Antepartum care only | Non-Facility | 30.82 | $825,483 | 0.00% |
| 59426 | Antepartum care only | Facility | 23.9 | $147,206 | 0.00% |
| 59430 | Care after delivery | Non-Facility | 7.89 | $216,235 | 0.00% |
| 59430 | Care after delivery | Facility | 5.41 | $45,287 | 0.00% |
| 59510 | Cesarean delivery | Facility | 79.55 | $5,871,571 | 0.01% |
| 59515 | Cesarean delivery | Facility | 39.18 | $956,963 | 0.00% |
| 59610 | Vbac delivery | Facility | 75.3 | $205,333 | 0.00% |
| 59614 | Vbac care after delivery | Facility | 34.4 | $35,752 | 0.00% |
| 59618 | Attempted vbac delivery | Facility | 80.41 | $60,028 | 0.00% |
| 59622 | Attempted vbac after care | Facility | 40.62 | $8,696 | 0.00% |
| 90791 | Psych diagnostic evaluation | Non-Facility | 5.2 | $106,765,687 | 0.11% |
| 90791 | Psych diagnostic evaluation | Facility | 4.46 | $38,304,096 | 0.04% |
| 90792 | Psych diag eval w/med srvcs | Non-Facility | 5.82 | $55,005,554 | 0.06% |
| 90792 | Psych diag eval w/med srvcs | Facility | 5.08 | $48,352,196 | 0.05% |
| 90832 | Psytx w pt 30 minutes | Non-Facility | 2.26 | $124,324,743 | 0.13% |
| 90832 | Psytx w pt 30 minutes | Facility | 1.98 | $35,524,019 | 0.04% |
| 90834 | Psytx w pt 45 minutes | Non-Facility | 2.98 | $421,385,239 | 0.44% |
| 90834 | Psytx w pt 45 minutes | Facility | 2.61 | $48,069,651 | 0.05% |
| 90837 | Psytx w pt 60 minutes | Non-Facility | 4.38 | $797,691,828 | 0.83% |
| 90837 | Psytx w pt 60 minutes | Facility | 3.85 | $37,472,848 | 0.04% |
| 90951 | Esrd serv 4 visits p mo <2yr | Non-Facility | 34.69 | $3,252 | 0.00% |
| 90951 | Esrd serv 4 visits p mo <2yr | Facility | 34.69 | $13,532 | 0.00% |
| 90954 | Esrd serv 4 vsts p mo 2-11 | Non-Facility | 22.76 | $82,090 | 0.00% |
| 90954 | Esrd serv 4 vsts p mo 2-11 | Facility | 22.76 | $380,953 | 0.00% |
| 90955 | Esrd srv 2-3 vsts p mo 2-11 | Non-Facility | 15.34 | $2,369 | 0.00% |
| 90955 | Esrd srv 2-3 vsts p mo 2-11 | Facility | 15.34 | $29,083 | 0.00% |
| 90956 | Esrd srv 1 visit p mo 2-11 | Non-Facility | 10.23 | $12,983 | 0.00% |
| 90956 | Esrd srv 1 visit p mo 2-11 | Facility | 10.23 | $34,008 | 0.00% |
| 90957 | Esrd srv 4 vsts p mo 12-19 | Non-Facility | 22.74 | $562,539 | 0.00% |
| 90957 | Esrd srv 4 vsts p mo 12-19 | Facility | 22.74 | $655,163 | 0.00% |
| 90958 | Esrd srv 2-3 vsts p mo 12-19 | Non-Facility | 14.8 | $107,516 | 0.00% |
| 90958 | Esrd srv 2-3 vsts p mo 12-19 | Facility | 14.8 | $91,989 | 0.00% |
| 90959 | Esrd serv 1 vst p mo 12-19 | Non-Facility | 9.59 | $45,540 | 0.00% |
| 90959 | Esrd serv 1 vst p mo 12-19 | Facility | 9.59 | $55,491 | 0.00% |
| 90960 | Esrd srv 4 visits p mo 20+ | Non-Facility | 10.44 | $707,449,644 | 0.73% |
| 90960 | Esrd srv 4 visits p mo 20+ | Facility | 10.44 | $29,308,633 | 0.03% |
| 90961 | Esrd srv 2-3 vsts p mo 20+ | Non-Facility | 8.64 | $191,310,606 | 0.20% |
| 90961 | Esrd srv 2-3 vsts p mo 20+ | Facility | 8.64 | $9,106,282 | 0.01% |
| 90962 | Esrd serv 1 visit p mo 20+ | Non-Facility | 5.93 | $38,737,541 | 0.04% |
| 90962 | Esrd serv 1 visit p mo 20+ | Facility | 5.93 | $2,548,953 | 0.00% |
| 90963 | Esrd home pt serv p mo <2yrs | Non-Facility | 17.89 | $62,826 | 0.00% |
| 90963 | Esrd home pt serv p mo <2yrs | Facility | 17.89 | $77,399 | 0.00% |
| 90964 | Esrd home pt serv p mo 2-11 | Non-Facility | 15.36 | $172,057 | 0.00% |
| 90964 | Esrd home pt serv p mo 2-11 | Facility | 15.36 | $305,694 | 0.00% |
| 90965 | Esrd home pt serv p mo 12-19 | Non-Facility | 14.75 | $431,451 | 0.00% |
| 90965 | Esrd home pt serv p mo 12-19 | Facility | 14.75 | $208,816 | 0.00% |
| 90966 | Esrd home pt serv p mo 20+ | Non-Facility | 8.64 | $96,228,015 | 0.10% |
| 90966 | Esrd home pt serv p mo 20+ | Facility | 8.64 | $4,149,895 | 0.00% |
| 90968 | Esrd svc pr day pt 2-11 | Non-Facility | 0.51 | $27,591 | 0.00% |
| 90968 | Esrd svc pr day pt 2-11 | Facility | 0.51 | $36,073 | 0.00% |
| 90969 | Esrd svc pr day pt 12-19 | Non-Facility | 0.49 | $31,999 | 0.00% |
| 90969 | Esrd svc pr day pt 12-19 | Facility | 0.49 | $30,707 | 0.00% |
| 90970 | Esrd svc pr day pt 20+ | Non-Facility | 0.28 | $8,145,999 | 0.01% |
| 90970 | Esrd svc pr day pt 20+ | Facility | 0.28 | $317,322 | 0.00% |
| 92521 | Evaluation of speech fluency | Non-Facility | 3.92 | $26,189 | 0.00% |
| 92522 | Evaluate speech production | Non-Facility | 3.3 | $358,738 | 0.00% |
| 92523 | Speech sound lang comprehen | Non-Facility | 6.71 | $4,417,787 | 0.00% |
| 92524 | Behavral qualit analys voice | Non-Facility | 3.22 | $1,881,361 | 0.00% |
| 97161 | Pt eval low complex 20 min | Non-Facility | 2.95 | $144,507,473 | 0.15% |
| 97162 | Pt eval mod complex 30 min | Non-Facility | 2.94 | $131,067,207 | 0.14% |
| 97163 | Pt eval high complex 45 min | Non-Facility | 2.94 | $30,279,752 | 0.03% |
| 97164 | Pt re-eval est plan care | Non-Facility | 2 | $38,590,643 | 0.04% |
| 97165 | Ot eval low complex 30 min | Non-Facility | 3.02 | $14,383,001 | 0.01% |
| 97166 | Ot eval mod complex 45 min | Non-Facility | 3.01 | $10,182,209 | 0.01% |
| 97167 | Ot eval high complex 60 min | Non-Facility | 3 | $2,264,014 | 0.00% |
| 97168 | Ot re-eval est plan care | Non-Facility | 2.04 | $2,333,894 | 0.00% |
| 99283 | Emergency dept visit | Facility | 2.09 | $180,600,375 | 0.19% |
| 99284 | Emergency dept visit | Facility | 3.57 | $607,925,026 | 0.63% |
| 99285 | Emergency dept visit | Facility | 5.18 | $1,879,723,315 | 1.95% |
| 99483 | Assmt & care pln pt cog imp | Non-Facility | 8.3 | $10,199,394 | 0.01% |
| 99483 | Assmt & care pln pt cog imp | Facility | 5.75 | $1,025,556 | 0.00% |
| 99495 | Trans care mgmt 14 day disch | Non-Facility | 6.12 | $129,108,527 | 0.13% |
| 99495 | Trans care mgmt 14 day disch | Facility | 4.21 | $11,372,539 | 0.01% |
| 99496 | Trans care mgmt 7 day disch | Non-Facility | 8.28 | $164,319,575 | 0.17% |
| 99496 | Trans care mgmt 7 day disch | Facility | 5.73 | $10,624,884 | 0.01% |

1. Except for the 4 codes with MOD 53 reported in Addendum B [↑](#footnote-ref-1)