

New study highlights inadvertent impact of the Inflation Reduction Act of 2022: payment cuts of \$25B-\$37B to nonhospital physicians

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A new Avalere study¹ highlights the devastating impact and unintended consequence of the Inflation Reduction Act of 2022: a decrease of \$25B to \$37B over five years in payments to physicians. The consequence? Non-hospital physicians may no longer be able to afford to provide infusion treatments for their patients. As a result, chronically ill and cancer patients would migrate to the higher cost hospital setting, thereby doubling drug administration costs to Medicare and health insurers while creating significant access issues.

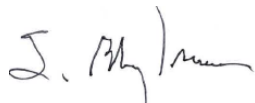
The cuts would result from physicians caught in the middle of Medicare Part B drug price negotiations between the federal government and drug manufacturers. While those cuts won't go into effect until 2028, the regulatory process will likely begin next year, which is why Congress should enact the Protecting Patient Access to Cancer and Complex Therapies Act of 2023 ([S. 2764/H.R. 5391](#)).

The IPA is a leading voice for in-office and freestanding ambulatory infusion providers, saving Medicare on average more than 60 cents on the dollar per infusion compared to hospital administration², while providing more efficient, more convenient and safer treatments to patients with serious chronic conditions.

¹ <https://avalere.com/insights/commercial-spillover-impact-of-part-b-negotiations-on-physicians>
² [UHG-Administered-Specialty-Drugs\(unitedhealthgroup.com\)](https://www.unitedhealthgroup.com/insights/uhg-administered-specialty-drugs)



Doug Ghertner
President



Brad Traverse
Executive Director