

Finding Medicare Fee-for-Service (FFS) Payment System Rules: Schedules and Resources

Updated August 14, 2026

Congressional Research Service

<https://crsreports.congress.gov>

R46797



R46797

August 14, 2026

Michele L. Malloy
Senior Research Librarian

Finding Medicare Fee-for-Service (FFS) Payment System Rules: Schedules and Resources

The Medicare Fee-for-Service (FFS) program pays physicians, hospitals, and other health care facilities based on statutorily established payment systems, most of which are updated annually through regulations. The publication of Medicare FFS proposed and final rules follow schedules based on requirements found in statute, regulation, or both.

As Medicare FFS payment system proposed and final rules are issued, they impact payments received by health care facilities and providers. Congressional Members and committees may comment on proposed rules and are often contacted by provider and beneficiary groups regarding these rules. Tracking the status and requirements for specific rules can be onerous, as they have different schedules and web locations.

This report contains information on these payment system rules in a quick reference table. Specifically, the table compiles the payment systems; their main portals on the Centers for Medicare & Medicaid Services (CMS) website; the typical rulemaking schedule; statutory and regulatory requirements; and the most recently issued proposed rules, public comments, final rules, and subsequent corrections. The table also includes embedded links to the applicable resources. Not all payment systems include detailed statutory and regulatory requirements, as noted in the table.

Contents

Introduction	1
Medicare FFS Payment System Rules: Schedules and Resources	1

Tables

Table 1. Medicare Fee-for-Service (FFS) Payment System Rules: Schedules and Resources	3
---	---

Contacts

Author Information.....	16
-------------------------	----

Introduction

The Medicare Fee-for-Service (FFS) program pays physicians, hospitals, and other health care facilities based on statutorily established payment systems, most of which are updated annually through regulations. The publication of Medicare FFS proposed and final rules follow schedules based on requirements found in statute, regulation, or both. Medicare payment systems that follow annual regulatory updates with comment periods include:

- Medicare Physician Fee Schedule Payment (MPFS or PFS),
- Hospital Outpatient Prospective Payment System (OPPS),
- Ambulatory Surgical Center Payment System (ASC Payment System),
- Acute Inpatient Prospective Payment System (IPPS),
- Long-Term Care Hospital Prospective Payment System (LTCH PPS),
- Skilled Nursing Facility Prospective Payment System (SNF PPS),
- Inpatient Rehabilitation Facility Prospective Payment System (IRF PPS),
- Inpatient Psychiatric Facility Prospective Payment System (IPF PPS),
- Home Health Prospective Payment System (Home Health PPS),
- End Stage Renal Disease Prospective Payment System (ESRD PPS), and
- Hospice Wage Index and Payment Rate.

As Medicare FFS payment system proposed and final rules are issued, they impact payments received by health care facilities and providers. Congressional Members and committees may comment on rules, and are often contacted by provider and beneficiary groups regarding these rules. Tracking the status and requirements for specific rules can be onerous, because they have different schedules and web locations. This report contains information on these payment system rules in a quick reference table.

To learn more about these payment systems, please see applicable sections of CRS Report R40425, *Medicare Primer*. In addition, the Medicare Payment Advisory Commission (MedPAC) produces “Payment Basics,”¹ a series of brief overviews of how Medicare’s payment systems function.

For information on rulemaking, see CRS In Focus IF10003, *An Overview of Federal Regulations and the Rulemaking Process*, and other related CRS products. In addition to general rulemaking procedures set forth in the Administrative Procedure Act (APA),² Medicare rulemaking is subject to requirements outlined in statute.³

Medicare FFS Payment System Rules: Schedules and Resources

Medicare FFS payment system rules and the associated statutory and regulatory requirements regarding timeline and public comment can be difficult to locate. **Table 1** compiles the payment

¹ MedPAC, “Payment Basics,” <https://www.medpac.gov/document-type/payment-basic/>.

² See the “Administrative Procedure Act” section of CRS Report RL32240, *The Federal Rulemaking Process: An Overview*.

³ 42 U.S.C. §1395hh.

systems; their main portals on the Centers for Medicare & Medicaid Services (CMS) website; the typical rulemaking schedule; statutory and regulatory requirements; and the most recently issued proposed and final rules, including agency docket numbers, *Federal Register* citations, public comments available on Regulations.gov, and any corrections issued. The table also includes embedded links to the applicable resources and notes when rulemaking timelines and comment periods are not specified. Statutory and regulatory requirements for rulemaking timelines and comment periods are not included for all payment systems, as noted in the table.

Table I. Medicare Fee-for-Service (FFS) Payment System Rules: Schedules and Resources

Typically Issued			Requirements: Timeline and Public Comment		
Rule Name and Payment System(s) ^a	Proposed Rule	Final Rule	Statutory	Regulatory	Most Recently Issued Rule(s)
Payment Policies Under the Physician Fee Schedule					
Medicare Physician Fee Schedule Payment (PFS)	July-August	November	42 U.S.C. §1395w-4: Payment for physicians' services	N/A	2027 Proposed Rule (7/16/2026) CMS-1848-P 91 FR 43842 Comments: Regulations.gov CMS-2026-2377
			(b)(1) "Before November 1 of the preceding year, for each year beginning with 1998, subject to subsection (p), the Secretary shall establish, by regulation, fee schedules that establish payment amounts for all physicians' services furnished in all fee schedule areas (as defined in subsection (j)(2)) for the year."		2026 Final Rule (11/5/2025) CMS-1832-F 90 FR 49266 Corrections: 90 FR 54589 (11/28/2025); 91 FR 12071 (3/12/2026)
			Note: Public comment is not addressed broadly for PFS in statute. However, public comment is addressed for aspects of the physician payment system, such as the development of categories and codes.		2026 Proposed Rule (7/16/2025) CMS-1832-P 90 FR 32352 Comments: Regulations.gov CMS-2025-0304 Corrections: 90 FR 39155 (8/14/2025)
					2025 Final Rule (12/9/2024) CMS-1807-F 89 FR 97710
					2025 Proposed Rule (7/31/2024) CMS-1807-P 89 FR 61596

Rule Name and Payment System(s) ^a	Typically Issued		Requirements: Timeline and Public Comment			Most Recently Issued Rule(s)
	Proposed Rule	Final Rule	Statutory		Regulatory	
						Comments: Regulations.gov CMS-2024-0256-0045 2024 Final Rule (11/16/2023) CMS-1784-F 88 FR 78818 Corrections: 89 FR 9776 (2/12/2024) 2024 Proposed Rule (8/7/2023) CMS-1784-P 88 FR 52262 Comments: Regulations.gov CMS-2023-0121
Hospital Outpatient Prospective Payment and Ambulatory Surgical Center Payment Systems						
Hospital Outpatient Prospective Payment System (OPPS)	July-August	November-December	42 U.S.C. §1395l: Payment of benefits (t) Prospective payment system for hospital outpatient department services Note: Specific timelines for rulemaking and comments are not addressed in statute.		42 C.F.R. §419.50 Annual review.	2027 Proposed Rule (7/7/2026) CMS-1850-P 91 FR 41734 Comments: Regulations.gov CMS-2026-2344-0002 2026 Final Rule (11/25/2025) CMS-1834-FC 90 FR 53448 Corrections: 91 FR 8383 (2/23/2026)
Ambulatory Surgical Center (ASC) Payment System	July-August	November-December	42 U.S.C. §1395l: Payment of benefits (i) Outpatient surgery (2)(D)(i) “Taking into account the recommendations in the report under section 626(d) of Medicare Prescription Drug, Improvement,		42 C.F.R. §416.130 Publication of revised payment methodologies. “Whenever CMS proposes to revise the payment rate for ASCs, CMS publishes a notice in the Federal Register describing the revision. The notice also explains the basis on which the rates were established. After reviewing public comments, CMS publishes a notice establishing	2026 Proposed Rule (7/17/2025) CMS-1834-P 90 FR 33476 Comments: Regulations.gov CMS-2025-0306

Rule Name and Payment System(s) ^a	Typically Issued		Requirements: Timeline and Public Comment		
	Proposed Rule	Final Rule	Statutory	Regulatory	Most Recently Issued Rule(s)
			and Modernization Act of 2003, the Secretary shall implement a revised payment system for payment of surgical services furnished in ambulatory surgical centers.”	the rates authorized by this section. In setting these rates, CMS may adopt reasonable classifications of facilities and may establish different rates for different types of surgical procedures.”	<i>2025 Final Rule</i> (11/27/2024) CMS-1809-FC 89 FR 93912 <i>2025 Proposed Rule</i> (7/22/2024) CMS-1809-P 89 FR 59186 Comments: Regulations.gov CMS-2024-0199-0002 <i>2024 Final Rule</i> (11/22/2023) CMS-1786-FC 88 FR 81540 Corrections: 89 FR 9002 (2/9/2024) <i>2024 Proposed Rule</i> (7/31/2023) CMS-1786-P 88 FR 49552 Comments: Regulations.gov CMS-2023-0120 Corrections: 88 FR 57029 (8/22/2023)
Hospital Inpatient Prospective Payment Systems for Acute Care Hospitals and the Long-Term Care Hospital Prospective Payment System					
Acute Inpatient Prospective Payment System (IPPS)	April-May	August-October	42 U.S.C. §1395ww: Payments to hospitals for inpatient hospital services (e)(1)(C)(5) “The Secretary shall cause to have published in the Federal Register, not later than- (A) the April 1 before each fiscal year (beginning	42 C.F.R. §412.8 Publication of schedules for determining prospective payment rates. “(b) Annual publication of schedule for determining prospective payment rates. (1) CMS proposes changes in the methods, amounts, and factors used to determine inpatient prospective payment rates in a Federal Register document published for public comment not later than the	<i>2027 Final Rule</i> (8/4/2026) CMS-1849-F 91 FR 49570 <i>2027 Proposed Rule</i> (4/14/2026) CMS-1849-P 91 FR 19312 Comments: Regulations.gov

Rule Name and Payment System(s) ^a	Typically Issued		Requirements: Timeline and Public Comment		
	Proposed Rule	Final Rule	Statutory	Regulatory	Most Recently Issued Rule(s)
Long-Term Care Hospital Prospective Payment System (LTCH PPS)	April-May	August-October	with fiscal year 1986), the Secretary's proposed recommendations under paragraph (4) for that fiscal year for public comment, and (B) the August 1 before such fiscal year after such consideration of public comment on the proposal as is feasible in the time available, the Secretary's final recommendations under such paragraph for that year."	April 1 before the beginning of the Federal fiscal year in which the proposed changes would apply. (2) Except as provided in paragraph (c) of this section, CMS publishes a Federal Register document setting forth final methods, amounts, and factors for determining inpatient prospective payment rates not later than the August 1 before the Federal fiscal year in which the rates would apply."	CMS-2026-1256-0002 Corrections: 91 FR 30269 (5/22/2026) 2026 Final Rule (8/4/2025) CMS-1833-F 90 FR 36536 2026 Proposed Rule (4/30/2025) CMS-1833-P 90 FR 18002 Comments: Regulations.gov CMS-2025-0028 Corrections: 90 FR 23867 (6/5/2025)
			42 U.S.C. §1395ww: Payments to hospitals for inpatient hospital services (m) Prospective payment for long-term care hospitals Note: Specific timelines for rulemaking and comments for the Long-Term Care Hospital PPS are not addressed in statute.	42 C.F.R. §412.535 Publication of the Federal prospective payment rates. "Except as specified in paragraph (b), CMS publishes information pertaining to the long-term care hospital prospective payment system effective for each annual update in the Federal Register.... (c) For the period beginning on or after October 1, 2009, information on the unadjusted Federal payment rates and a description of the methodology and data used to calculate the payment rates are published on or before August 1 prior to the start of the Federal fiscal year which begins October 1, unless for good cause it is published after August 1, but before September 1. (d) Information on the LTC-DRG classification and associated weighting factors is published on or before August 1 prior to the beginning of each Federal fiscal year."	2025 Final Rule (8/28/2024) CMS-1808-F 89 FR 68986 2025 Proposed Rule (5/2/2024) CMS-1808-P 89 FR 35934 Comments: Regulations.gov CMS-2024-0131-0025 2024 Final Rule (8/28/2023) CMS-1785-F 88 FR 58640 Corrections: 88 FR 68482 (10/4/2023) and 88 FR 77211 (11/9/2023)

Rule Name and Payment System(s) ^a	Typically Issued		Requirements: Timeline and Public Comment		Most Recently Issued Rule(s)
	Proposed Rule	Final Rule	Statutory	Regulatory	
					2024 Proposed Rule (5/1/2023) CMS-1785-P 88 FR 26658 Comments: Regulations.gov CMS-2023-0057
Prospective Payment System and Consolidated Billing for Skilled Nursing Facilities (SNF)					
Skilled Nursing Facility Prospective Payment System (SNF PPS)	April-May	August	42 U.S.C. §1395yy: Payment to skilled nursing facilities for routine service costs (e)(4)(H) “The Secretary shall provide for publication in the Federal Register, before May 1, 1998 (with respect to fiscal period described in subparagraph (E)(i)) and before the August 1 preceding each succeeding fiscal year (with respect to that succeeding fiscal year), of- (i) the unadjusted Federal per diem rates to be applied to days of covered skilled nursing facility services furnished during the fiscal year, (ii) the case mix classification system to be applied under subparagraph (G)(i) with respect to such services during the fiscal year, and (iii) the factors to be applied in making the area wage adjustment under subparagraph (G)(ii) with respect to such services.”	42 C.F.R. §413.345 Publication of Federal prospective payment rates. “CMS publishes information pertaining to each update of the Federal payment rates in the Federal Register. This information includes the standardized Federal rates, the resident classification system that provides the basis for case-mix adjustment, and the factors to be applied in making the area wage adjustment. This information is published before May 1 for the fiscal year 1998 and before August 1 for the fiscal years 1999 and after.”	2027 Final Rule (7/31/2026) CMS-1843-F 91 FR 48588 2027 Proposed Rule (4/7/2026) CMS-1843-P 91 FR 17678 Comments: Regulations.gov CMS-2026-1321-0002 2026 Final Rule (8/4/2025) CMS-1827-F 90 FR 37310 2026 Proposed Rule (4/30/2025) CMS-1827-P 90 FR 18590 Comments: Regulations.gov CMS-2025-0031 2025 Final Rule (8/6/2024) CMS-1802-F 89 FR 64048

Typically Issued		Requirements: Timeline and Public Comment			
Rule Name and Payment System(s) ^a	Proposed Rule	Final Rule	Statutory	Regulatory	Most Recently Issued Rule(s)
			Note: The timelines for the proposed rule and comments are not addressed in statute.		2025 Proposed Rule (4/3/2024) CMS-1802-P 89 FR 23424 Comments: Regulations.gov CMS-2024-0116-0002
					2024 Final Rule (8/7/2023) CMS-1779-F 88 FR 53200 Corrections: 88 FR 68486 (10/4/2023) and 89 FR 25144 (4/10/2024)
					2024 Proposed Rule (4/10/2023) CMS-1779-P 88 FR 21316 Comments: Regulations.gov CMS-2023-0048
Inpatient Rehabilitation Facility Prospective Payment System					
Inpatient Rehabilitation Facility Prospective Payment System (IRF PPS)	April-May	August	42 U.S.C. §1395ww: Payments to hospitals for inpatient hospital services (j)(5) “The Secretary shall provide for publication in the Federal Register, on or before August 1 before each fiscal year (beginning with fiscal year 2001), of the classification and weighting factors for case mix groups under paragraph (2) for such fiscal year and a description of the methodology and data used in computing the prospective	42 C.F.R. §412.628 Publication of the Federal prospective payment rates. “We publish information pertaining to the inpatient rehabilitation facility prospective payment system effective for each fiscal year in the Federal Register. This information includes the unadjusted Federal payment rates, the patient classification system and associated weighting factors, and a description of the methodology and data used to calculate the payment rates. This information is published on or before August 1 prior to the beginning of each fiscal year.”	2027 Final Rule (8/3/2026) CMS-1845-F 91 FR 48982 2027 Proposed Rule (4/6/2026) CMS-1845-P 91 FR 17195 Comments: Regulations.gov CMS-2026-1024-0002 2026 Final Rule (8/5/2025) CMS-1829-F 90 FR 37678

Rule Name and Payment System(s) ^a	Typically Issued		Requirements: Timeline and Public Comment		Most Recently Issued Rule(s)
	Proposed Rule	Final Rule	Statutory	Regulatory	
			payment rates under this subsection for that fiscal year.”		Corrections: 90 FR 58509 (12/17/2025)
			Note: Only the final rule deadline is specified, t. The proposed rule is not addressed in statute. Public comment is not addressed in statute.		2026 Proposed Rule (4/30/2025) CMS-1829-P 90 FR 18534 Comments: Regulations.gov CMS-2025-0032 2025 Final Rule (8/6/2024) CMS-1804-F 89 FR 64276 2025 Proposed Rule (3/29/2024) CMS-1804-P 89 FR 22246 Comments: Regulations.gov CMS-2024-0111-0002 2024 Final Rule (8/2/2023) CMS-1781-F 88 FR 50956 Corrections: 88 FR 68494 (10/4/2023) 2024 Proposed Rule (4/7/2023) CMS-1781-P 88 FR 20950 Comments: Regulations.gov CMS-2023-0047

Rule Name and Payment System(s) ^a	Typically Issued		Requirements: Timeline and Public Comment			Most Recently Issued Rule(s)
	Proposed Rule	Final Rule	Statutory	Regulatory		
Inpatient Psychiatric Facilities Prospective Payment System						
Inpatient Psychiatric Facilities Prospective Payment System (IPF PPS)	April-May	August	42 U.S.C. §1395ww: Payments to hospitals for inpatient hospital services	42 C.F.R. §412.428 Publication of changes to the inpatient psychiatric facility prospective payment system.	2027 Final Rule (7/31/2026) CMS-1847-F 91 FR 48514	
			(s) Prospective payment for psychiatric hospitals	“CMS will issue annually in the Federal Register information pertaining to changes to the inpatient psychiatric facility prospective payment system.”	2027 Proposed Rule (4/7/2026) CMS-1847-P 91 FR 17720 Comments: Regulations.gov CMS-2026-1123-0002	
			Note: Specific timelines for rulemaking and comments for Inpatient Psychiatric Facility PPS are not addressed in statute. Deadlines for quality measures are specified.		2026 Final Rule (8/5/2025) CMS-1831-F 90 FR 37628	
					2026 Proposed Rule (4/30/2025) CMS-1831-P 90 FR 18494 Comments: Regulations.gov CMS-2025-0029	
					2025 Final Rule (8/7/2024) CMS-1806-F 89 FR 64582	
					2025 Proposed Rule (4/3/2024) CMS-1806-P 89 FR 23146 Comments: Regulations.gov CMS-2024-0119-0002	

Rule Name and Payment System(s) ^a	Typically Issued		Requirements: Timeline and Public Comment			Most Recently Issued Rule(s)
	Proposed Rule	Final Rule	Statutory		Regulatory	
						<i>2024 Final Rule</i> (8/2/2023) CMS-1783-F 88 FR 51054 Corrections: 88 FR 68491 (10/4/2023) <i>2024 Proposed Rule</i> (4/10/2023) CMS-1783-P 88 FR 21238 Comments: Regulations.gov CMS-2023-0053
Home Health Prospective Payment System						
Home Health Prospective Payment System (Home Health PPS)	July	November	42 U.S.C. §1395fff: Prospective payment for home health services Note: Specific timelines for rulemaking and comments for Home Health PPS are not addressed in statute.		42 C.F.R. §484.225 Annual update of the unadjusted national, standardized prospective payment rates. “CMS annually updates the unadjusted national, standardized prospective payment rate on a calendar year basis (in accordance with section 1895(b)(1)(B) of the Act).”^b	<i>2027 Proposed Rule</i> (7/6/2026) CMS-1844-P 91 FR 41216 Comments: Regulations.gov CMS-2026-2311-0002 <i>2026 Final Rule</i> (12/2/2025) CMS-1828-F 90 FR 55342 <i>2026 Proposed Rule</i> (7/2/2025) CMS-1828-P 90 FR 29108 Comments: Regulations.gov CMS-2025-0242 Corrections: 90 FR 30217 (7/9/2025), 90 FR 30833 (7/11/2025), 90 FR 41940 (8/28/2025)

Rule Name and Payment System(s) ^a	Typically Issued		Requirements: Timeline and Public Comment			Most Recently Issued Rule(s)
	Proposed Rule	Final Rule	Statutory		Regulatory	
						<i>2025 Final Rule</i> (11/7/2024) CMS-1803-F 89 FR 88354 <i>2025 Proposed Rule</i> (7/3/2024) CMS-1803-P 89 FR 55312 Comments: Regulations.gov CMS-2024-0190-0002 <i>2024 Final Rule</i> (11/13/2023) CMS-1780-F 88 FR 77676 Corrections: 89 FR 6019 (1/31/2024) <i>2024 Proposed Rule</i> (7/10/2023) CMS-1780-P 88 FR 43654 Comments: Regulations.gov CMS-2023-0113
End-Stage Renal Disease Prospective Payment System						
End-Stage Renal Disease Prospective Payment System (ESRD PPS)	July	November	42 U.S.C. §1395rr: End stage renal disease program Note: Specific timelines for rulemaking and comments for ESRD PPS are not addressed in statute.		42 C.F.R. §413.196 Notification of changes in rate-setting methodologies and payment rates. “(b) Changes in payment rates resulting from incorporation of updated cost data or general revisions of geographic labor cost adjustment factors are announced by notice published in the Federal Register without opportunity for prior comment. Revisions of the rate-setting methodology are published in the Federal	<i>2027 Proposed Rule</i> (6/26/2026) CMS-1846-P 91 FR 38784 Comments: Regulations.gov CMS-2026-2245-0002 <i>2026 Final Rule</i> (11/24/2025) CMS-1830-F 90 FR 53068

Rule Name and Payment System(s) ^a	Typically Issued		Requirements: Timeline and Public Comment			Most Recently Issued Rule(s)
	Proposed Rule	Final Rule	Statutory	Regulatory		
				Register in accordance with the Department's established rulemaking procedures.”		<i>2026 Proposed Rule</i> (7/2/2025) CMS-1830-P 90 FR 29342 Comments: Regulations.gov CMS-2025-0240 <i>2025 Final Rule</i> (11/12/2024) CMS-1805-F 89 FR 89084 <i>2025 Proposed Rule</i> (7/5/2024) CMS-1805-P 89 FR 55760 Comments: Regulations.gov CMS-2024-0189-0002 <i>2024 Final Rule</i> (11/6/2023) CMS-1782-F 88 FR 76344 <i>2024 Proposed Rule</i> (6/30/2023) CMS-1782-P 88 FR 42430 Comments: Regulations.gov CMS-2023-0110
Hospice Wage Index and Payment Rate						
Hospice Wage Index and Payment Rate	April-May	August	42 U.S.C. §1395f: Conditions of and limitations on payment for services (i) Payment for hospice care	42 C.F.R. §418.306 Annual update of the payment rates and adjustment for area wage differences. “(b) Annual update of the payment rates. The payment rates for routine home care and other services included in hospice care are the payment rates in effect under this paragraph during the		<i>2027 Final Rule</i> (8/3/2026) CMS-1851-F 91 FR 49118 <i>2027 Proposed Rule</i> (4/6/2026) CMS-1851-P 91 FR 17338

Rule Name and Payment System(s) ^a	Typically Issued		Requirements: Timeline and Public Comment		Most Recently Issued Rule(s)
	Proposed Rule	Final Rule	Statutory	Regulatory	
			Note: Specific timelines for rulemaking and comments for hospice payment rates are not addressed in statute.	previous fiscal year increased by the hospice payment update percentage increase (as defined in section 1814(i)(1)(C) of the Act), applicable to discharges occurring in the fiscal year.” ^b	Comments: Regulations.gov CMS-2026-11156 2026 Final Rule (8/5/2025) CMS-1835-F 90 FR 37404 Corrections: 90 FR 42709 (9/4/2025) 2026 Proposed Rule (4/30/2025) CMS-1835-P 90 FR 18568 Comments: Regulations.gov CMS-2025-0030 Corrections: 90 FR 21715 (5/21/2025) 2025 Final Rule (8/6/2024) CMS-1810-F 89 FR 64202 2025 Proposed Rule (4/4/2024) CMS-1810-P 89 FR 23778 Comments: Regulations.gov CMS-2024-0118-0002 2024 Final Rule (8/2/2023) CMS-1787-F 88 FR 51164

Rule Name and Payment System(s) ^a	Typically Issued		Requirements: Timeline and Public Comment		Most Recently Issued Rule(s)
	Proposed Rule	Final Rule	Statutory	Regulatory	
					2024 Proposed Rule (4/4/2023) CMS-1787-P 88 FR 20022 Comments: Regulations.gov CMS-2023-0051

Source: Compiled by CRS.

Notes: Table compiled using Centers for Medicare & Medicaid Services (CMS) websites, *Federal Register*, and Regulations.gov. In some cases, multiple payment systems are covered by one rule, so they are combined under one header and rule column but include separate rows for their payment system names as well as the statutory and regulatory requirements. Typical months when proposed and final rules are issued can vary, and the months listed are based on CRS analysis of *Federal Register* publication dates from the past 10 years. Additionally, corrections are sometimes issued after the final rule.

- a. Some Medicare FFS payment systems are not updated through notice and comment or on an annual basis but only periodically. These include the Clinical Laboratory Fee Schedule, Shared Savings Program, and Ambulance Fee Schedule. Please see the embedded CMS links for more information, including the most recent rules.
- b. At times, regulations reference the Social Security Act rather than the *U.S. Code*. The Social Security Administration provides a cross-reference table at https://www.ssa.gov/OP_Home/comp2/G-APP-H.html.

Author Information

Michele L. Malloy
Senior Research Librarian

Acknowledgments

CRS Analysts Jim Hahn and Marco Villagrana and former analyst Phoenix Voorhies aided in the compilation and review of the statutory and regulatory requirements of selected payment system rules.

Disclaimer

This document was prepared by the Congressional Research Service (CRS). CRS serves as nonpartisan shared staff to congressional committees and Members of Congress. It operates solely at the behest of and under the direction of Congress. Information in a CRS Report should not be relied upon for purposes other than public understanding of information that has been provided by CRS to Members of Congress in connection with CRS's institutional role. CRS Reports, as a work of the United States Government, are not subject to copyright protection in the United States. Any CRS Report may be reproduced and distributed in its entirety without permission from CRS. However, as a CRS Report may include copyrighted images or material from a third party, you may need to obtain the permission of the copyright holder if you wish to copy or otherwise use copyrighted material.