CMS Calendar Year (CY) 2027 Medicare Physician Fee Schedule Final Rule Fact Sheet
Last updated: November 6, 2026

Background

The Centers for Medicare and Medicaid Services (CMS) published the text for the calendar year (CY) 2027 Medicare Physician Fee Schedule Final Rule on November 4, 2026, with an effective date of January 1, 2027. CMS published a fact sheet on the final rule policies.

Key Provisions of the Final Rule

Current Procedural Terminology (CPT) Codes for Maternity Care Services

CMS issued a statement of enforcement discretion providing temporary flexibility for HIPAA covered entities regarding the use of CPT codes for maternity care services. For the duration of CY 2027, HIPAA covered entities are permitted to use 2026 CPT Maternity Care Services codes for billing and payment purposes when episodes of care begin in 2026 and extend into 2027. The enforcement discretion will end December 31, 2027. This temporary flexibility is intended to minimize disruptions to providers and support accurate payment during the transition to the restructured 2027 CPT Maternity Care Services codes.

Changes to the Quality Payment Program MIPS Promoting Interoperability Performance Category

- Definition of Certified Electronic Health Record Technology (CEHRT)
    - Modifies the definition of CEHRT to align with the decertification policies within the ONC Health IT Certification Criteria as part of the Health Data, Technology, and Interoperability: ONC Deregulatory Actions to Unleash Prosperity (HTI-5) Final Rule
    - Removes the following certification criteria from the definition of CEHRT: Family Health History, Patient Health Information Capture, Automated Numerator Recording, Automated Measure Calculation, Clinical Quality Measures – Filter
- ONC Direct Review Attestation and ONC-Authorized Certification Body (ACB) Surveillance Attestation
    - Removes the required ONC Direct Review attestation and the optional ONC-ACB Surveillance attestation starting with the CY 2026 performance period
- Security Risk Analysis Measure
    - Removes the required Security Risk Analysis measure starting with the CY 2027 performance period

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- Electronic Prior Authorization Measure
    - Makes the measure an optional/bonus measure for 10 bonus points for the CY 2027 performance period. The measure will be required during the CY 2028 performance period
    - Requires the use of CEHRT that includes Health IT Modules certified to at least one of the three ONC Health IT certification criteria for electronic prior authorization, to complete at least one prior authorization request for at least one medical item or service (excluding drugs) for the CY 2027 performance period
    - Requires the use of CEHRT that includes Health IT Modules certified to all three ONC electronic prior authorization criteria to complete at least one prior authorization request for at least one medical item or service (excluding drugs) beginning with the CY 2028 performance period
- Electronic Prior Authorization for Prescription Drugs Measure
    - Finalized the new Electronic Prior Authorization for Prescription Drugs measure which will require the use of CEHRT to complete at least one prior authorization request for prescription drugs and medications, required beginning with the CY 2028 performance period
    - This new measure aligns with policies proposed in the 2026 CMS Interoperability Standards and Prior Authorization for Drugs Proposed Rule

Changes to Remote Physiologic Monitoring (RPM) and Remote Therapeutic Monitoring (RTM) Services

- Finalized policies for CY 2027
    - RTM services must only be furnished to established patients
    - Practitioners reporting RPM or RTM services must furnish a separately reportable initiating visit in association with the onset of RPM or RTM services
    - Updates to how these services are valued under the Physician Fee Schedule
- Finalized policy beginning CY 2029
    - Payment for RPM or RTM services is only permitted when performed by clinical staff employed by the practice and not when those services are delivered by contractors

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Anticipated Impact on Health Information Professionals

- ***Enforcement Discretion of CPT® codes for maternity care services:*** HI professionals should work with their coding and electronic health record (EHR) vendors to ensure operationalization. Certain payers may move ahead with the new codes scheduled for 2027 while others may choose to use the enforcement discretion, so HI professionals should pay close attention to what codes payers are adopting.

- ***Monitor EHR certification and interoperability readiness:*** Changes to the definition of CEHRT and alignment with the ONC's decertification efforts may affect health systems' technology strategies. HI professionals should work with their EHR vendors, as well as IT and compliance teams to understand how these changes may affect reporting and interoperability efforts.

- ***Prepare for expanding electronic prior authorization reporting:*** While mandatory reporting of the electronic prior authorization measures does not take effect until the CY 2028 reporting period, accurate and complete documentation and coordination between revenue cycle, utilization management, and IT will be critical. HI professionals are strategically positioned to validate data capture and support implementation efforts.

Questions? Contact us at advocacy@ahima.org.

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