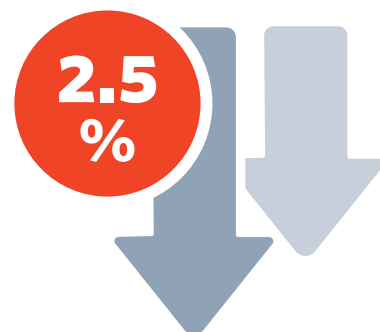# Are You Paid by wRVUs?
How the CMS "Efficiency Adjustment" Will Cut Surgeons' Pay

The Centers for Medicare & Medicaid Services (CMS) has finalized a **2.5% cut to work relative value units** (wRVUs) for almost all non-time-based codes starting on January 1, with additional reductions expected every 3 years *indefinitely*.

This so-called "efficiency adjustment" is based on unsupported assumptions about productivity gains, further reducing surgeon reimbursement, and having far-reaching consequences for patients.

Flawed Thinking

CMS claims that surgeons have become more efficient over time, performing procedures faster and with less intensity. However, recent data contradict this assumption.

A study published in the *Journal of the American College of Surgeons*, analyzing more than 1.7 million operations across 249 CPT codes and 11 surgical specialties, found that 90% of procedures took the same or longer to perform in 2023 compared to 2019. All measures of complexity also increased during this time period. In fact, **operative times increased by an average of 3.1%.**

Inconsistent Implementation

CMS's cut even applies to codes that have been recently revalued, despite them not having historical data on efficiency. **This logic is flawed and inconsistent.**

Unintended Consequences

Reducing wRVUs will have wide-ranging consequences for surgeons and patients. Many physician compensation models are tied to work or total RVUs, therefore, **CMS is directly cutting pay without reducing workload.** Physicians locked into multiyear employment agreements could face untenable financial strain, undermining stability in medical practices.

In addition, these cuts could **limit access to surgical care,** particularly among the sickest or most complex patients.

Call to Action

CMS's across-the-board reduction in work RVUs, without clear, data-driven justification, is flawed and harmful.
Congress needs to act swiftly to prevent implementation of this misguided policy before it takes effect on January 1.

Help us fight back against these cuts. Amplify our voice using SurgeonsVoice.

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