

# OBFA Applauds CMS Final Rule Recognizing Indirect Practice Expense; Echoes Call to Remove Supplies & Equipment from PFS

*OBFA applauds CMS for recognizing indirect practice expense in the 2025 PFS, calling it vital relief for office-based care and urging broader payment reform.*



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-- The [Office-Based Facility Association \(OBFA\)](#) applauds the Centers for Medicare & Medicaid Services (CMS) for finalizing policy recognizing indirect practice expense (IPE) for office-based facilities and specialists under the 2025 Medicare Physician Fee Schedule (PFS). This policy marks a major milestone for independent, office-based practices and supports OBFA's advocacy for long-term payment stability in non-facility settings.

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*Dr. Bob Tahara, Health Policy  
Chair of OBFA*

At the same time, OBFA notes that CMS did not implement the Physician Practice Information Survey (PPIS) in this rule—underscoring the association's position that flaws in the survey data would have caused yet another round of untenable cuts to office-based proceduralists.

“Independent office-based practices have been hanging by a thread for too long,” said Dr. Bob Tahara, Health Policy Chair of OBFA. “Today's final rule gives them breathing room and recognizes the real cost of overhead in those

settings. But we must not stop here. Removing supplies and equipment costs from the PFS is essential if we want independent practices to survive, patients to retain choice, and rural and underserved communities to maintain access.”

Through the IPE policy, CMS helps level the playing field for independent office-based practices that have long faced structural disadvantages compared to hospital outpatient departments. OBFA remains committed to advancing broader reforms, including removing supply and equipment cost inputs from the PFS.

About OBFA:

The Office-Based Facility Association (OBFA) represents practitioners, healthcare facilities, and allied providers delivering minimally invasive procedures in office-based settings across multiple specialties. OBFA advocates for policy reforms that sustain independent, patient-centered office-based care.

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