



## PAAC April 2020 Monthly Report

Sharing updates from Payer Advocacy Advisory Committee:

### Highlights from our activities:

1. A special thank you for everyone who has used their voices to advocate for appropriate payment for pediatrics over these challenging last few months! This is a collective effort.
2. KUDOS to Gail Schonfeld whose advocacy led to the Tricare decision to take instrument based vision screening off of their no-pay list (CPT codes 99174 and 99177) for children age one to age six). Tricare should start retroactively reprocessing claims back to their effective date of December 2, 2019. See [https://manuals.health.mil/pages/DisplayManualHtmlFile/TP15/63/AsOf/TP15/c7s2\\_5.html#FM66760](https://manuals.health.mil/pages/DisplayManualHtmlFile/TP15/63/AsOf/TP15/c7s2_5.html#FM66760)
3. PAAC continues to advocate for pediatric practices where United Healthcare is denying payment for well visits **and for vaccines** until a visit note is provided. We ask that those involved also file a complaint so we can raise attention to this matter:  
To report HIPAA administrative simplification violations, practices can use the CMS ASETT tool to file a complaint: [https://asett.cms.gov/ASETT\\_HomePage](https://asett.cms.gov/ASETT_HomePage) Specifically, if the payer is not appropriately processing claims for payment, even when you are using appropriate CPT codes/descriptors, you would click on the “code set” button to start the complaint.
4. PAAC has been very busy advocating for appropriate payment for Telehealth for both sick and well visits. Letters were sent to the national and regional carriers advocating for payment for preventive medicine services via telemedicine along with guidance for billing and payment. Please let us know how we can be of additional assistance.
5. The AAP’s Health Care Finance team is actively collecting information and links to payer websites for updated telehealth payment rules. Stay tuned for a resource to be provided.
6. We are also trying to clarify Aetna’s request to use an E/M visit for the Telehealth Well as there are identified concerns for claims failure using the appropriate Z00 ICD codes for E/M services.
7. PAAC is working on an Issue Guidance regarding removing barriers to payment for an annual well visit. Stay tuned for posted resources.

Thank you for all that you do to help the children, families and colleagues of your region!

**Request from PAAC:** if you have any problems with payment, please reach out to us by filling out the <https://www.aap.org/en-us/professional-resources/practice-transformation/getting-paid/Pages/Hassle-Factor-Form-Concerns-with-Payers.aspx> Hassle Factor form (link on the bottom of

every SOAPM email), or emailing members directly. **PLEASE** consider including **email contact for your biller or office manager** who might best provide additional information such as ERAs so that we can be more effective in our advocacy efforts. In addition, if we reach out to you to follow-up, please respond and include the appropriate team members in your organization who might be able to provide additional details if needed.

Please help us help you!  
Sue Kressly, PAAC Chair

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All others AND Medicaid, for now....please process through the Hassle Factor Form

Thanks for your support!

Sue Kressly