PAAC February 2020 Report

Sharing updates from Payer Advocacy Advisory Committee:

**Highlights** from our activities:

As part of PAAC monthly activities, we discussed a variety of subjects including:

1. Periodically HEDIS reviews their quality measures and NCQA has released for public comment proposed measure retirements, new measures, changes to existing measures and changes that apply across various HEDIS measures. Changes that apply to the next set of HEDIS measures will be published in July 2020 and reported in June 2021, based on activity that occurred during 2020. The AAP will be submitting comments and PAAC submitted our comments to the Academy to be included in their collective response. We encourage EVERY MEMBER to weigh in on the NCQA website (comments are due by March 13, 2020)  

2. At the ALF (March 12-14) PAAC will be sitting alongside SOAPM and COCHF to make sure that comments related to payment and financing are appropriately part of the conversation as resolutions are discussed.

Practices are experiencing stress and barriers to appropriate payment all over the country recently. PLEASE continue to bring these to our attention. PAAC is discussing appropriate responses to many of these challenges including:

3. Automatic down-coding of 99214 and 99215 visits by several payers, most recently Aetna (which is moving into additional regions of the country). This seems to be targeted to individual providers who have a higher number of 99214s (even when VERY appropriate). Do NOT simply comply. Review each of your notes and if your documentation supports a higher level, appeal each and every one.

4. In NY state, Medicaid budgetary cuts are causing any Medicaid MCO bonus/quality payments to be discontinued including payments for work already completed.

5. In NJ, United Healthcare dropping many independent Medicaid PCPs from their network to steer patients to a practice owned by Optum (UHC subsidiary).

6. In CA, United Healthcare creating a narrow network where a large children’s network of PCPs is completely carved out except for Urgent Care and emergencies.

7. Thanks to everyone who submitted their ideas for the strategic goals to the AAP leadership as requested by the board.

8. Please make sure you sign up for the coding changes webinar to see what’s coming in 2021!
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](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