PAAC January 2020 Report

Sharing updates from Payer Advocacy Advisory Committee:

**Highlights** from our activities:

1. PAAC is having an ongoing dialogue with Highmark (network includes PA, WV, DE) regarding their True Performance Program and move toward Value Based Payment. We have involved a subject matter expert from COQIPS (Council on Quality Improvement and Patient Safety) in this work.

2. As part of the Highmark work, we have also identified a Third Party Vendor that is doing much of the Risk Adjustment for Payers and they report that they are using some validated pediatric data. More to come as PAAC is trying to connect with that vendor.

3. PAAC has been working with other Academy subject matter experts including COCWD (Council on Children with Disabilities), SODBP (Section on Developmental Behavioral Pediatrics) and the Autism Subcommittee on barriers to effective diagnosis, treatment and referral for children with autism. Stay tuned for a letter to payers to address some of the payer’s recent obstacles/barriers to good care. Thanks to PAAC member Gene Hershorin and COCHF Chair Jon Price for leading this work with the above named groups.

4. PAAC is gearing up to attend the ALF Virtual Reference hearings and to comment on resolutions related to payment and the business of practice (there are a bunch!) Please add your voice to the comment process! This is where your voice can influence policy and change (but only if you use it!)

5. COCN (Council on Coding and Nomenclature) has prepared an outline for education for the 2021 E/M coding/documentation changes and PAAC is working with our colleagues to identify and address potential payer issues. As part of this ongoing effort, Lou Terranova attended the AMA forum for payers on January 23rd regarding the 2021 E/M Office Visit Changes. Apparently what was intended for mostly payers, was attended by organizations providing care as well as the payers. Lots of questions asked that will lead to additional follow up communication that PAAC and COCN will share with members when available.

6. Discussions regarding automatic down-coding based solely on diagnosis (Aetna) are ongoing. Thanks PAAC member, Gene Hershorn for your continued work on this problem.

7. PAAC member Chip Harbaugh continues to work with United Healthcare on their recent “pilot program” to insist on documentation in order to get paid for services. Stay tuned for more! (Examples were provided to UHC on records requests for well visit and immunization documentation, not just E/M sick services.)

8. Thanks to PAAC members Greg Barabell and Gail Schonfeld for leaning in and contributing to this recent article in AAP News on managing patient attribution. Please read if you haven’t
As part of PAAC monthly activities, we discussed a variety of subjects including developing Issue Guidance resources for payment on asthma care, well visits, ADHD meds and what practices can do to streamline prior authorization and credentialing.

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 [Hassle Factor Form](https://www.aap.org/en-us/professional-resources/practice-transformation/getting-paid/Pages/Hassle-Factor-Form-Concerns-with-Payers.aspx) 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