PAAC June 2020 Monthly Report

Sharing updates from Payer Advocacy Advisory Committee:

**Highlights** from our activities:

1. Congratulations to Betsy Peterson (WI) who was successful in finally getting a regional contact for Cigna and got objectionable language removed from her contract. Next step: following up on Cigna’s offer to get the regional Pediatric Councils together to meet with the Cigna regional representative for Wisconsin, Minnesota, Michigan, Illinois, and Indiana.
2. Sue Kressly and payment advocacy and coding staff, continue to meet with Highmark on issues related to payment for Telehealth Well Visits and their P4P Quality programs.
3. PAAC is aware of RBC chains encroaching on Medical Home territory and beginning to offer themselves as the PCP. We are discussing strategies with key groups within the AAP to address the impact to the pediatric medical home.
4. According to outreach, CMS and the AMA remain committed to changing the documentation and coding structure for E/M office visits effective 1/1/21. PAAC is reaching out to the major payers in advance as well as planning for effective advocacy when payers do not comply.
5. Knowing that the E/M office visit code changes have significant impact regarding MDM, PAAC is getting additional clarity and pediatric specific use cases which will be shared broadly.

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

1. PAAC members input to AAP discussions on What part of Telehealth should remain post-pandemic and what is appropriate to remove when the public health emergency is over. Advocacy efforts initially have been targeted to extension of current payer rules (see AAP letter to payers advocating for continued telemedicine/telehealth coverage beyond COVID-19 public health emergency). From PAAC’s perspective, a high priority is to make sure that the originating/distancing site relaxed rules become permanent.
2. Re-convening the Medicaid PAAC work group.
3. Payment for Social Determinants of Health (SDOH) screening and how to code and report
4. Aligning efforts with sister professional societies on tracking payer compliance with new coding/documentation changes to be implemented 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 [Hassle Factor form](https://www.aap.org/en-us/professional-resources/practice-transformation/getting-paid/Pages/Hassle-Factor-Form-Concerns-with-Payers.aspx) (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!
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