PAAC May 2020 Report

Sharing updates from Payer Advocacy Advisory Committee:

**Highlights** from our activities:

1. Continued dialogue with the national payers about extending Telehealth payment post COVID pandemic. Updated info:

**Aetna:** Member cost sharing for any in-network covered telemedicine visit – regardless of diagnosis – for its Commercial plan members is waived through June 4, 2020. However, the current Telemedicine Policy coverage has been extended through August 4, 2020. Therefore, effective June 5th, any copays allowed under the member’s plan may be collected except as noted that from June 5, 2020 through September 30, 2020, Aetna is extending all member cost-sharing waivers for in-network telemedicine visits for outpatient behavioral and mental health counseling services only for Aetna-insured Commercial plan members. Aetna and self-insured plan sponsors, as appropriate, will continue to cover member cost-sharing for services included in the Families First Coronavirus Response Act (such as COVID-19 testing and visits resulting in a COVID-19 test). Self-insured plan sponsors offer this waiver at their discretion. See the Aetna FAQ at [https://www.aetna.com/health-care-professionals/provider-education-manuals/covid-faq/telemedicine.html](https://www.aetna.com/health-care-professionals/provider-education-manuals/covid-faq/telemedicine.html)


**HCSC** (BCBS of IL, TX, OK, NM, MT) the 5/20 announcement [BCBSIL Extends Telehealth Benefits Through Dec. 31, 2020](https://www.bcbs.com/news/press-releases/2020/05/20/1906199.html), the waived copays still ends on June 30th, meaning that from July 1 onward, providers may assess copays for telehealth visits. This will apply to all 5 plans in HCSC.

**UHC:** Through June 18, 2020, unless United Healthcare extends the end date. *(NOTE: UHC announced on May 31, 2020 to extend its expanded telehealth coverage through July 24, 2020)*

2. Strategy ongoing for permanent changes to parity payment for Telehealth services.
3. New Issue Guidance available to be used for advocacy to eliminate arbitrary rules for timing intervals for an annual well visit. Pediatric Councils and practices encouraged to use these resources including:
a. Well Visits within 365 Days

b. Payer Requirements for Preventive Medicine Services upon Enrollment
4. Working with payers to accelerate quality P4P payments to assist with cash flow
5. Working with payers to extend 2019 P4P payments through 2020 without need to report.
HEDIS updates regarding NCOA requirements have been updated.
6. PAAC working with Committee on Coding & Nomenclature (COCN) to continue to educate members on upcoming coding/documentation E/M changes effective 1/1/21.

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 [link](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