



February 2024 PAAC Report

Sharing updates from the AAP Payer Advocacy Advisory Committee (PAAC):

- **PCV 20 Denials:** PAAC continues to advocate for payment of PCV 20. Payer denials indicate that “the age requirement for this procedure has not been met.” The AAP has sent a [letter](#) to national payers to ensure their systems have been updated with the current [ACIP recommendations](#) for PCV 20 use in children.
 - UHC’s payer policy is reflective of the new age ranges. Through discussion with them, it was identified that the claims system was not updated to align with their payment policy. They have identified the affected claims and will reprocess them without the need to appeal. Should you have outstanding denials after 3/15/2024, you should contact customer service to ask for reconsideration of the claim.
- **Generic Fluticasone Propionate HFA:** The AAP continues to advocate for children to have coverage of this necessary drug to control asthma and EOE (Eosinophilic Esophagitis). We have sent a [letter](#) to national payers urging that this drug be covered without any prior authorization requirements.
 - We have engaged in direct conversation with the following payers:
 - i. Aetna and UHC, who have added generic Fluticasone Propionate HFA to their formularies for all children aged 6 and under. Consideration for patients over the age of 6 will be given but requires prior authorization. We are also engaged in direct conversation with HHS, AHIP, and CMS to garner support for coverage of generic Fluticasone Propionate HFA and ways to prevent or address a potential shortage of generic Fluticasone and Asmanex.
 - ii. Anthem (Elevance) has indicated generic Fluticasone Propionate HFA is included in the formulary on all lines of policies they offer.
 - iii. Cigna has **not added** generic Fluticasone Propionate HFA to its formulary for treatment of **asthma**. It does cover the following drugs: Alvesco[®], ASMANEX[®] HFA, ASMANEX TWISTHALER[®], and QVAR RediHaler[®]. They will cover generic Fluticasone Propionate HFA for the treatment of Eosiniphilic Esophagitis (EoE), they have not confirmed the requirement of a prior authorization, but it is likely to be required since coverage is based on the illness being treated.
- **Nirsevimab Payment Issues:** PAAC continues to discuss and monitor payment issues relating to Nirsevimab.

- As reported by AAP News, Sanofi has released a [forecasting tool](#) for next year's supply of Nirsevimab.
- Sanofi offers a coverage tool for nirsevimab. This is based on data collected independently by Sanofi of which national payers are covering nirsevimab and at what levels the payment is. Use of the tool requires a [free login](#) on their coding and billing site. Once logged in look for the coverage finder tool tab. Please note the AAP cannot confirm the information on this tool and payment is also dependent on your contract with each payer.
- We were successful in educating **Tricare** on the ACA requirements of coverage and payment responsibility surrounding immunizations that are approved for use by the [CDC](#). After a claims system update on 1/6/2024, codes 90380 and 90381 are considered preventive and should be paid with no cost to the patient. Tricare has identified the affected claims before 1/6/24, and they should be reprocessed within 30 days of January 17th 2024. If practices have any claims after 1/6/2024 that have patient responsibility for this service, they should contact Humana Military customer service line 800-444-5445, for claims assistance.
- We have identified an issue regarding non-payment of the new administration codes 96380 and 96381 by Medicaid in various states. Some states have made it a requirement to report the old code 96372, which doesn't incorporate the work for counseling into its payment. Their rationale was that Medicare hadn't valued the codes. They are listed on the 2024 fee schedule with a national RVU value of 0.24 and a payment of \$22.27. The code 96372's national RVU value of 0.17 and a payment of \$14.08 significantly undervalues the work related to nirsevimab counseling and administration. [Medicare](#) made the value of the codes retroactive to October 2023 when the codes were released.

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

Information from PAAC: Issues at the state level can be reported to your state chapter of the AAP. Some chapters have Pediatric Councils that work directly with PAAC. Additionally, if you have any problems with payer policies, programs, processes, or coding questions please contact us via [the Coding Hotline/Hassle Factor Form](#). If we follow up with you, please respond and include the appropriate team members (such as biller or office manager) in your organization who might be able to provide additional details if needed so that we can be more effective in our advocacy efforts.

Please help us help you!

Thanks for your support!

Greg Barabell, PAAC Chair