



PAAC April/May 2021 Report

Sharing updates from Payer Advocacy Advisory Committee:

April was a busy month for PAAC with our biannual PAAC/COCHF meetings. In addition our Pediatric Council Quarterly call was held on April 22nd.

An enthusiastic welcome to our new AAP PAAC Staff Person, Teresa Salaway!!

Highlights from the Pediatric Council Call:

1. Attendees expressed the following as top priorities for attention over the upcoming months:
 - a. Pre-payment audits and down-coding issues with several payers
 - b. Inadequate payment for COVID-19 Point of Care Testing, especially by United Healthcare
 - c. Immunization Administration Codes payment, for COVID19 and for routine pediatric immunizations
 - d. Telehealth payment post public-health emergency (PHE extended through 2021 and the Telehealth payment extends for 90 days beyond that, but some payers posing permanent solutions that are less than parity. Some states passing regulation regarding parity).
 - e. Ongoing payer engagement with Pediatric Councils
2. Thank you to the following Pediatric Council leaders who shared their interactions, frustrations, challenges and some wins in their states:
 - a. Kevin Wessinger in South Carolina for his win with Centene to stop pre-payment audits and down-coding
 - b. Suzanne Berman in Tennessee who was able to get Amerigroup in TN to stop pre-payment audits and down-coding (and shared her documents that she used to advocate for her practice which resulted in a win for the TN pediatricians)
 - c. Shannon Fox-Levine who shared her experiences with BC/BS of FL
3. Becky Dolan (COCN AAP staff extraordinaire and the person behind the coding hotline/Hassle Factor forms for the most part) is going to provide quarterly insight to all of the Pediatric councils so they can identify trends in their region and across the country to prioritize education and advocacy.

Highlights from the Biannual PAAC Meeting:

1. Discussion on Integrating Behavioral Health into the Medical Home. Work happening in many arenas including at the AMA. PAAC staff to meet with AMA for further information on this. PAAC discussed barriers including mental health carve outs, barriers to credentialing/contracting, challenges with identifying levers in 4 distinct groups of plans:

- a. Commercial Payers (direct contracts)
 - b. Employer sponsored plans
 - c. MCOs/Medicaid (state payers)
 - d. Federal payers (TriCare)
2. Discussions about pre-payment audits and under-payment/down-coding.
 - a. Looking for resources regarding **prompt payment laws** for those payers who are requiring “notes” prior to the first payment for care delivered (like those who mandate well visit notes before will pay for visit plus vaccines)
 - b. PAAC exploring any/all levers and other partners to combat down-coding based on ICD and CPT combinations. Other groups interested including many professional societies at an Anthem meeting. Another party bringing forth an AMA resolution with AAP representative monitoring. PAAC exploring collaboration with other entities and all possible levers.
 - c. 2021 E/M Outpatient ambulatory visits: some anecdotal evidence of payers who are rejecting payment even with appropriate time-based documentation.
 3. Telehealth permanent strategies discussed, including advocating for parity for pediatricians as care is more difficult than in adult medicine to accomplish virtually. Shared resource: <https://downloads.aap.org/DOCCSA/Telehealth-Advocacy-Guide.pdf> (Technical Report on Telehealth in Draft form at the Academy.).
 4. Payment for Point of Care Testing in the Pediatric Office.
 - a. Discussed strategies to defining the case for appropriate payment of commonly used in office tests
 - b. May need to balance the ask from payers with advocating for avoiding unnecessary tests as part of the Choosing Wisely program (to create value and buy-in from the payers)
 - c. Outreach to appropriate disaster preparation leaders to make sure in the advent of another public health emergency, the burden does not get put on the pediatricians providing care
 - d. Discussion regarding payers likely putting “limits” on COVID testing for the fall.
 5. Value Based Payment programs appropriate for Pediatrics is an ongoing topic and one that was discussed at a joint meeting between COCHF (Committee on Child Health Finance) and will continue among multiple interested groups.
 6. Discussed barriers to implementation of AAP Policy Statements including those that are payment related. Payers are sometimes applying policy “on the fly” and somewhat haphazardly and how do we create an infrastructure to get in front of those decisions and/or respond rapidly. How do we make sure that barriers to implementation are part of every policy statement (that now has a shorter word count limit) or at least to any accompanying technical report?

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

1. United Healthcare’s inadequate payment for COVID testing. They are planning to roll out a “complaint hotline” where you can give them information and request retroactive payment: stay tuned for more information.
2. Beginning to investigate inappropriate hurdles to appropriate biologicals for subspecialty pediatric care.
3. Strategies to understand better the levers for employer-sponsored plans. Especially when it comes to mental health carve outs and implementation of Telehealth. Includes exploring an

opportunity to develop a resource(s) on what an employer-sponsored plan should include for pediatric members. This would include a resource for the employer, family and physicians.

Newly Identified AMA Resource on managed care laws: *The Managed Care Legal Database is a comprehensive legal resource identifying how state and federal statutes and regulations address many issues that may occur between private payers and physicians, such as prior authorization, credentialing, network adequacy, out-of-network payment and contract termination. The database also contains issue briefs, advocacy resources, model legislation and a State Laws Map. Note some advocacy and model legislation may require an AMA password. Visit <https://managedcarelegaldatabase.org/> for more details.*

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 <https://form.jotform.com/Subspecialty/aapcodinghotline> (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

When contacting PAAC members directly, please cc our PAAC AAP Staff person, Teresa Salaway on any relevant correspondence (tsalaway@aap.org).

Thanks for your support!
Sue Kressly