

What Have You Done for Me Lately?

EDPMA Advocacy Successes in the First Third of 2020

Every year, at the Solutions Summit, we summarize EDPMA's advocacy successes for the first third of the current calendar year. Because the Summit is cancelled, we are sharing this list with you here:

ADVOCACY FOR COVID-19 RELIEF (13 EDPMA letters)

- 1) **In addition to hospitals, independent physician groups are eligible for COVID-19 provider relief as EDPMA requested.**
- 2) **Initial tranche of provider relief was distributed to emergency physician groups quickly based on a simple formula based on 2019 Medicare revenue so the physician group would receive an immediate infusion of funds without a complicated application process as EDPMA requested.**
- 3) **Balance billing ban referenced in the Terms and Conditions for Provider Relief was limited as EDPMA requested.** HHS originally appeared to ban balance billing for actual and "possible" COVID-19 cases (which included all cases). After EDPMA wrote HHS, HHS changed the language and only banned actual and "presumptive" COVID-19 cases. On May 6th, HHS guidance clarified that *"Not every possible case of COVID-19 is a presumptive case of COVID 19,"* and *"A presumptive case of COVID-19 is a case where a patient's medical record documentation supports a diagnosis of COVID-19, even if the patient does not have a positive in vitro diagnostic test result in his or her medical record."*
- 4) **More claims will be paid under HRSA uninsured program as EDPMA requested.** HRSA stated in guidance that it will accept claims that include the acceptable diagnoses anywhere on the claim, not just when it is the primary diagnosis, as EDPMA requested.
- 5) **HRSA clarified in writing that claims will be paid even when test results were unavailable or came back negative as EDPMA requested.**
- 6) **Emergency department services were added to the list of Medicare telehealth approved services during the pandemic as EDPMA requested.**
- 7) **Telehealth virtual check-in services were expanded to new patients as EDPMA requested.**
- 8) **Clinicians who provide telehealth from home are reimbursed as EDPMA requested.**
- 9) **Blanket 1135 EMTALA waiver was approved as EDPMA requested.**
- 10) **Some freestanding emergency departments are eligible for Medicare reimbursement during the pandemic as EDPMA requested.**
- 11) **Commercial insurers not only cover Covid-19 testing (including profession services), as required by law, but also cover related diagnostic services, per recent CMS guidance, without cost-sharing as EDPMA requested.**
- 12) **2019 MIPS reporting deadline was delayed as EDPMA requested.**
- 13) **Scope of Ban on Balance Billing in CARES Act Provider Relief Fund Terms & Conditions was clarified as requested.** On May 6th, HHS issued an [updated FAQ document](#) stating that *"The Terms and Conditions do not impose any limitations on the ability of a provider to submit a claim for payment to the patient's insurance company.... Most health insurers have publicly stated their commitment to reimbursing out-of-network providers that treat health plan members for COVID-19-related care at the insurer's prevailing in-network rate. But if the health insurer is not willing to do so, the out-of-network provider may seek to collect from the patient out-of-pocket expenses, including deductibles, copayments, or balance billing, in an amount that is no greater than what the patient would have otherwise been required to pay ... an in-network provider."*

OTHER FEDERAL ADVOCACY (6 EDPMA letters; over 25 meetings; 3 action alerts; March Lobby Days)

- 14) **GPCI Work Floor extended as requested by EDPMA.**
- 15) **UHC delayed implementation of its April 1, 2020 policy that would have violated the Prudent Layperson Standard after EDPMA asked UHC not to implement it and shared that request with all state insurance commissioners.**
- 16) **Problematic federal surprise billing proposals, such as the proposal offered by Alexander and Pallone, have not become law as EDPMA and other provider groups have requested.**
- 17) **Dr. Profeta (a member of EDPMA) worked with EDPMA to draft a blog post criticizing the Alexander/Pallone surprise billing proposal.**

STATE ADVOCACY (4 EDPMA letters; 1 meeting; 1 advocacy alert)

- 18) **Texas confirmed that the OON arbitration portal supports multiple claim submissions as EDPMA and the Texas provider coalition requested.**
- 19) **Texas delayed its tax on medical billing as requested by EDPMA and others in the Texas provider coalition. The legislature will now have an opportunity to weigh in on the issue.**
- 20) **Virginia did not pass problematic surprise billing legislation based on Medicare rates and, instead, adopted legislation requiring OON reimbursement at the commercially reasonable rate with arbitration as EDPMA and others in the Virginia provider coalition requested.**
- 21) **Maine OON legislation references reimbursement rates from an “independent” database when data in the state database is insufficient, as requested by EDPMA and the Maine provider coalition.**
- 22) **Connecticut rescinded its executive order that would have blocked the effect of the model CT OON law during the pandemic as requested by EDPMA and the Connecticut provider coalition.**