

Advocacy Needed! CMS Audiology Transmittals



On February 29, 2008, CMS issued transmittals 84 and 1470, which dealt with audiology services billed to Medicare. These transmittals stated, among other changes, that audiological services, when provided by a qualified audiologist, could no longer be billed under the name and number of the supervising physician, and that the qualified audiologist must, starting October 1, 2008, obtain an NPI and be enrolled in Medicare in order to bill their services to Medicare. All other aspects of the transmittals were effective April 1, 2008.

The American Academy of Otolaryngology- Head and Neck Surgery (AAO-HNS) contends that there are significant technical and logistical flaws to these transmittals. We do not take issue with audiologists billing under their own name and NPI as this has been mandated by regulatory language since 2003. However, transmittals 84 and 1470 went far beyond that issue and placed significant limitations around the use of technicians, eliminated the use of automated computerized hearing testing (Otoqram), among other modifications. The scope of these transmittals is problematic, and goes far beyond the main issue how audiologists bill Medicare for the services they render.

The AAO-HNS has asked CMS to rescind, or at a minimum, delay for a year, these transmittals pending a discussion with the affected stakeholders. The AMA and MGMA, along with multiple other specialty societies (including the AAO-HNS) were able to convince CMS to rescind transmittal 87, which dealt with other incident to billing issues based on many of the same grounds the AAO-HNS have cited to CMS regarding transmittals 87 and 1470.

These include:

- The inclusion of language not previously defined in regulation or statute ("active participation")
- Excessive contractor discretion in interpretation
- Significant administrative and financial burdens to physician practices
- CMS's failure to obtain input from the affected specialty
- A significantly negative impact on rural practices

The AAO-HNS maintains that transmittals 84 and 1470 are flawed, and CMS should rescind the transmittals until the issues surrounding them are addressed with input from key stakeholders.

AAO-HNS members can go to our advocacy website to obtain additional information about our advocacy efforts to get these transmittals delayed or rescinded. Members can also utilize our easy advocacy system to contact your Congressional representatives through our website.

<http://www.entnet.org/Practice/members/Advocacy.cfm>



American Academy of Otolaryngology—Head and Neck Surgery Foundation

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