Dear ENT Advocacy Network Member:  

January 22, 2021

Legislative and political activity directly affects our practices and our patients. As a leading advocate for otolaryngology-head and neck surgery, we hope you enjoy reading this edition of The ENT Advocate, your premier source of advocacy information for the specialty!

**Lead Story**

**ENT PAC’s “First 50” Campaign Kicked Off January 1, 2021!**

Don’t miss ENT PAC’s fifth annual “First 50” campaign! The “First 50” campaign is a fundraising effort to garner at least 50 contributions of $1,000+ (Chairman’s Club or Leadership Club) during the month of January. "First 50" investors will have exclusive access to a 2021 conference call series with high-ranking individuals from Congress and the Administration. If you have questions, would like additional information, or would like to invest in this exclusive opportunity before it’s too late, visit [www.entpac.org](http://www.entpac.org) or contact ENT PAC staff at entpac@entnet.org.

**Legislative and Political Reports**

**117th Congress Convenes**

The first session of the 117th U.S. Congress convened on January 3 with more than 65 new federal legislators sworn in. The balance of power has shifted slightly, as Democrats will continue to have a majority in the U.S. House of Representatives and now will have a narrow majority, with Vice President Kamala Harris as the tie-breaking vote, in the U.S. Senate. The AAO-HNS is currently meeting with new lawmakers to help educate them on the specialty’s legislative priorities. As bills begin to be introduced on Capitol Hill, watch for upcoming opportunities to contact your Congressional representatives and make your voice heard!

**AAO-HNS Calls on Governors to Prioritize Otolaryngologists in COVID-19 Vaccination Distribution Plans**

On December 11 the Academy sent letters to each of the 50 state governors, Puerto Rico, and the District of Columbia urging prioritization of otolaryngologists and other frontline medical workers for receipt of the U. S. Food and Drug Administration’s first approved COVID-19 vaccine. The letters implored governors to consider the particular vulnerability of otolaryngologists in treating patients with COVID-19 as vaccine distribution plans are established in their individual state.

**Fifth COVID Relief Package Signed into Law**

On December 27 President Trump signed Appropriations Act, 2021, a $900 billion COVID-19 relief package and $1.4 trillion omnibus spending bill. The package provided economic relief through additional funding for a
wide constituency. Specifically, the bill included a new round of stimulus checks, extended and expanded unemployment benefits, funding for small businesses and transportation, COVID-19 vaccine distribution, and schools. The legislation also includes a number of provisions addressing healthcare that are of interest to practicing otolaryngologist-head and neck surgeons. Click here to read the Academy’s preliminary analysis of the bill’s impact on our members and their patients. We will keep you informed about any changes and their effects as the law is implemented.

**ASLP Interstate Compact Update**

Despite facing unprecedented physical, social, and economic challenges in the states, the flawed audiology and speech-language pathology interstate compact (ASLP-IC) legislation continues to be introduced around the country. Currently, ASLP-IC legislation has been filed in GA, IN, KY, MD, NE, WA. The AAO-HNS and our dedicated group of State Trackers are working to amend this legislation in each of these states.

**Regulatory Reports**

**CMS Extends the Deadline to Apply for a 2020 Extreme and Uncontrollable Circumstances Exception**

For the 2020 Merit-based Incentive Payment System (MIPS) performance period, the Centers for Medicare & Medicaid Services (CMS) is using the Extreme and Uncontrollable Circumstances policy to allow clinicians, groups, and virtual groups to submit an application requesting reweighting of one or more MIPS performance categories due to the COVID-19 pandemic. Recognizing the varying effects of the pandemic on eligible practitioners, CMS has extended the deadline to submit a COVID-19 related 2020 extreme and uncontrollable circumstances application to February 1, 2021.

**AAO-HNS Comments on CY 2021 Medicare HOPPS Final Rule**

On January 4 the AAO-HNS submitted a comment letter to CMS on the Calendar Year 2021 Hospital Outpatient Prospective Payment System and Ambulatory Surgical Center (HOPPS) final rule. In response to AAO-HNS advocacy and stakeholder comments on the proposed rule, CMS amended the assignment of CPT code 69705 (Nasopharyngoscopy, surgical, with dilation of the eustachian tube (i.e., balloon dilation); unilateral) from ambulatory payment classification (APC) 5164 (Level 4 ENT Procedures) to a higher level APC which more accurately describes the procedure’s cost. For 2021, CPT codes 69705 and 69706 (Nasopharyngoscopy, surgical, with dilation of the eustachian tube (i.e., balloon dilation); bilateral) each map to APC 5165. Additionally, the Academy urged CMS to revise its decision and reclassify HCPCS code C9771 for nasal/sinus endoscopy, cryoablation nasal tissue(s) and/or nerve(s), unilateral or bilateral, utilizing the ClariFix device, to a higher APC. The rule took effect on January 1.

**CMS Releases Revised 2021 Physician Fee Schedule Conversion Factor**

On January 7 CMS announced modifications to the calendar year 2021 Medicare Physician Fee Schedule (MPFS) based on the Consolidated Appropriations Act, 2021, signed into law on December 27. Cumulative changes included in the Act result in an increase to the 2021 conversion factor from $32.41 to $34.89. The Act prevents significant Medicare cuts by increasing overall Medicare physician payments by 3.75%. Other major Medicare changes in the law affecting the specialty include delaying the implementation of the inherent complexity code for evaluation and management services (G2211) until calendar year 2024 and a suspension of the two percent Medicare sequestration cut through March 31, 2021.

**AAO-HNS Urges VA to Protect Health of Veterans**

On January 11 the AAO-HNS submitted comments in opposition to the Department of Veterans Affairs’ Interim Final Rule, entitled “Authority of VA Professionals to Practice Health Care.” The rule permits virtually all Veterans Health Administration-employed non-physician providers (NPPs) to practice without the clinical supervision of physicians. The Academy’s comments, which encourage the VA not to weaken current
standards of care for veterans, highlight the differences in education and training that exist between nonphysician providers and physicians, national standards versus state licensing, and the importance of adequate oversight.

**Paycheck Protection Program Resumes**

On January 11 the U.S. Small Business Administration (SBA), along with the U.S. Treasury Department, reopened the Paycheck Protection Program (PPP). The SBA began accepting “first draw” loans from small businesses that had not yet received a PPP loan. Effective January 13, businesses that already applied for a PPP loan can pursue “second draw” PPP loans from community institutions. Applicants are generally eligible for a “second draw” PPP Loan if the borrower previously received a “first draw” PPP Loan and will or has used the full amount only for authorized uses, as no more than 300 employees, and can demonstrate at least a 25% reduction in gross receipts between comparable quarters in 2019 and 2020.

**Strengthening PROJECT 535**

Given the ambitious legislative agenda for the 117th Congress, it’s more important than ever for the Academy to strengthen its “key contacts” network via PROJECT 535. In addition to the Academy’s overall advocacy efforts, PROJECT 535 volunteers help reinforce our message by establishing one-to-one relationships with federal elected officials. This additional element of constituent-based outreach amplifies our advocacy efforts when Congress debates major issues affecting the specialty. The commitment is minimal, but the impact is immense. To help further strengthen our collective advocacy efforts, [sign up](mailto:govtaffairs@entnet.org) today or contact [govtaffairs@entnet.org](mailto:govtaffairs@entnet.org) for more information.

Sincerely,

Jeffrey S. Brown, MD
BOG Legislative Affairs Committee Chair
and the AAO-HNS Advocacy Team

If you no longer wish to receive important legislative and political updates via *The ENT Advocate*, please reply to this email with CANCEL ADVOCATE in the subject line.

*Contributions to ENT PAC are not deductible as charitable contributions for federal income tax purposes. Contributions are voluntary, and all members of the American Academy of Otolaryngology-Head and Neck Surgery have the right to refuse to contribute without reprisal. Federal law prohibits ENT PAC from accepting contributions from foreign nationals. By law, if your contributions are made using a personal check or credit card, ENT PAC may use your contribution only to support candidates in federal elections. All corporate contributions to ENT PAC will be used for educational and administrative fees of ENT PAC, and other activities permissible under federal law. Federal law requires ENT PAC to use its best efforts to collect and report the name, mailing address, occupation, and the name of the employer of individuals whose contributions exceed $200 in a calendar year.*

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