







ENT PAC

Dear ENT Advocacy Network Member:

October 30, 2020

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

AAO-HNS Comments on 2021 Medicare PFS/QPP Proposed Rule

On October 5, the AAO-HNS <u>submitted a comment letter</u> on the 2021 Medicare Physician Fee Schedule (PFS)/Quality Payment Program (QPP) proposed rule. The Academy's comments expressed opposition to the unprecedented proposed drop to the conversion factor which, if finalized, will negatively impact procedure reimbursements under Medicare. The comments also addressed the rule's E/M proposals, valuation of otolaryngology services, telehealth provisions, and significant changes to the QPP, including those impacting qualified clinical data registries like Reg-entSM. The AAO-HNS expects the final rule to be published at the end of November with an effective date of January 1, 2021.

Legislative and Political Reports

Academy Joins Amicus Brief Filing on Graphic Warning Labels for Cigarettes

On October 15, the AAO-HNS, together with 16 other medical professional societies and public health advocacy organizations, <u>submitted an amicus brief</u> in the U.S. District Court for the District of Columbia to uphold the ability of the U.S. Food and Drug Administration (FDA) to require graphic health warnings on cigarette packaging. The brief highlights that graphic warnings, as mandated by the FDA through the Final Rule "Required Warnings for Cigarette Packages and Advertisements," are essential for effective communication to the public about the extraordinary range of health harms resultant from smoking.

HHS Announces New CARES Act Provider Relief Funding

On October 1, the U.S. Department of Health and Human Services (HHS) <u>announced \$20 billion in new funding</u> for physicians on the frontlines of battling the coronavirus pandemic. Providers who have already received payments can apply for additional funding that considers financial losses and changes in operating expenses caused by the coronavirus. Additionally, previously ineligible providers, such as those who began practicing in 2020, are also now eligible to apply. Physicians have until November 6, 2020, to apply for Phase 3 General Distribution funding.

AAO-HNS Opposes Inappropriate Scope of Practice Expansion

The AAO-HNS joined the American Medical Association (AMA) and dozens of other physician organizations in signing a <u>letter to Congressional leadership</u> expressing strong opposition to H.R. 884 /S. 2772, the "Medicare Mental Health Access Act." The Act would change the definition of "physician" under the Medicare program to include clinical psychologists and allow these clinicians to treat Medicare patients without doctor supervision throughout inpatient and partial-hospitalization settings. The AAO-HNS will continue to defend the practice of medicine against this and other inappropriate scope of practice expansions that threaten patient safety.

Regulatory Reports

AAO-HNS Comments on 2021 HOPPS Proposed Rule

On October 5, the AAO-HNS <u>submitted a comment letter</u> on the Calendar Year 2021 Medicare Hospital Outpatient Prospective Payment System (HOPPS) proposed rule. The Academy's comments addressed proposals impacting the specialty, including opposition to the proposed APC assignment for certain eustachian tube balloon dilation codes, support for assigning a C-code for the SINUVA (mometasone furoate) Sinus Implant, and concerns with proposed changes to the inpatient only list and ambulatory surgical center covered procedure list. The Academy expects the final rule to be published at the end of November with an effective date of January 1, 2021.

HHS Provider Relief Reporting Requirements

On September 19, HHS <u>released additional information</u> about data reporting requirements for Provider Relief Fund recipients who received aggregated payments of more than \$10,000. The notice includes the data elements and information that recipients will need to report to comply with the <u>Terms and Conditions</u> of receiving and using the funds. Providers should note the additional detail and changes to the expense and lost revenue categories.

MIPS Hardship Exception Applications Open for 2020 Performance Year

The Centers for Medicare & Medicaid Services (CMS) <u>announced that clinicians</u> have the option to opt-out, either completely or partially, from the 2020 Merit-based Incentive Payment System (MIPS) Performance Year by completing a Promoting Interoperability Hardship Exception or Extreme and Uncontrollable Circumstances Exception application. The application allows clinicians impacted by the public health emergency to request reweighting for any or all performance categories. Clinicians may apply for the MIPS Promoting Interoperability Performance Category Hardship Exception and request reweighting of the Promoting Interoperability performance category if specific criteria are met. Applications for both exceptions must be submitted to CMS by Thursday, December 31, 2020 at 8:00 pm (ET).

AMA Announces New COVID-19 Related CPT Codes

On September 8, the AMA approved two new CPT codes in response to the current public health emergency (PHE). The first new CPT code, 99072, reimburses providers for the additional supplies and clinical staff time required to mitigate transmission of respiratory infectious disease while providing evaluation, treatment, or procedural services during a PHE. The second new CPT code, 86413, is for reporting quantitative antibody tests for SARS-CoV-2.

Reminder: New Medicare Prior Authorization Requirements for Hospital Outpatient Departments

On July 1, <u>CMS began requiring prior authorization</u> for certain procedures commonly performed by otolaryngologists in the hospital outpatient department for payment under the Medicare Hospital Outpatient Prospective Payment System. For example, rhinoplasty procedures reported with CPT 20912 (nasal cartilage graft) are now subject to these prior authorization requirements. The prior authorization requirement only

applies to hospital outpatient departments and does not apply to procedures performed in physician's offices, critical access hospitals, or ambulatory surgery centers.

Action Requested

Ask Congress to Support Otolaryngologists in Fourth Relief Package

As Congress works to negotiate another COVID-19 stimulus legislative package, we want to ensure this legislation includes much-needed relief for otolaryngologist-head and neck surgeons and the patients you serve. Your representatives and senators need to hear from you about the impact of COVID-19 on your practice and why further relief is required. <u>Please click here</u> to access the action alert on the AAO-HNS Advocacy website. The alert includes a sample letter you can use to make your voice heard!

Check Out AAO-HNS's Resources on COVID-19

The <u>Coronavirus Disease 2019: Resources</u> page on the AAO-HNS website is a comprehensive list of resources for members on COVID-19 issues impacting the specialty. Here you will find podcasts on COVID-19-related topics, research and Academy statements on anosmia as a COVID-19 symptom, Position Statements, federal and state financial assistance links, telemedicine updates, articles published in *Otolaryngology–Head and Neck Surgery*, and resources from other specialties and federal and state agencies. Please check this website regularly for the latest updates and information on coronavirus from the Academy.

Sincerely,

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

For more information, contact govtaffairs@entnet.org. Don't forget to bookmark The ENT Advocate!

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