



Dear ENT Advocacy Network Member:

August 31, 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

Call to Action: Ask Congress to Stop Medicare Reimbursement Cuts

Unless Congress intervenes before the end of the year, physicians are facing a 9.75% Medicare reimbursement reduction on January 1, 2022. Representatives Ami Bera, MD (D-CA-07), and Larry Bucshon, MD (R-IN-08), leading Congressional champions on physician issues, are circulating a sign-on letter to Congressional leadership urging passage of legislation to avert these Medicare cuts. Please contact your U.S. Representative today using the [Academy's Advocacy website](#), asking them to sign the Bera/Bucshon letter and support fair reimbursement for practicing otolaryngologist-head and neck surgeons.

[CONTACT YOUR REPRESENTATIVE!](#)

Legislative and Political Reports

Federal Legislative Update

As August comes to a close, we are now more than seven months into the Biden Administration and the 117th Congress. Thus far in 2021, the Biden Administration and Democratic leadership in Congress have prioritized COVID-19 relief and broad infrastructure initiatives. The U.S. House and Senate both recently passed a budget resolution that, among many other things, would potentially create a path forward for expanding Medicare to include hearing, vision, and dental benefits. With potential cuts to Medicare physician reimbursement looming, coupled with Congress' upcoming consideration of numerous bills impacting the house of medicine, the Academy and our grassroots advocates must continue our joint efforts to protect practicing physicians and ensure that the specialty's key legislative issues are prioritized by Congress and the Administration.

AAO-HNS Leads Efforts to Oppose Audiology Direct Access Legislation

The [AAO-HNS recently spearheaded coalition letters](#) to House and Senate leadership expressing strong opposition to the Medicare Audiologist Access and Services Act, H.R. 1587 and S. 1731. These letters, signed by over 110 national, state, and local physician organizations, expressed joint patient safety concerns for Medicare beneficiaries. The Academy will continue to emphasize that hearing and balance disorders are medical conditions that require a full patient history and physical examination by an MD/DO in accordance with appropriate patient care standards and lead efforts to defeat this unnecessary legislation.

AAO-HNS Endorses Legislative Solution to Burdensome Prior Authorization Process

The [Academy offered its strong endorsement for H.R. 3173](#), the "Improving Seniors' Timely Access to Care Act." This bipartisan legislation, which currently has 195 cosponsors, would help protect Medicare patients

from delays in care by streamlining and standardizing the use of prior authorization in the Medicare Advantage program. The process for obtaining prior authorization approval is another redundant regulatory burden facing otolaryngologist-head and neck surgeons, typically requiring physicians or their staff to spend two or more days each week negotiating with insurance companies. The Academy is committed to working with the authors of H.R. 3173 and other Congressional champions to ensure its enactment into law.

Second Quarter “Your PAC Dollars at Work” Report Now Available

ENT PAC is an invaluable tool that strengthens the Academy’s overall legislative advocacy efforts. We understand the importance of providing transparency and a greater understanding about how decisions are made regarding the specialty’s political action committee, so in 2018 ENT PAC launched a new quarterly report titled, “Your PAC Dollars at Work.” [Click here to view “Your Q2 2021 PAC Dollars at Work”](#) summarizing ENT PAC activities to date in 2021. To invest in the future of the specialty, click [here!](#)

Regulatory Reports

CMS Releases CY 2022 Medicare Physician Fee Schedule Proposed Rule

On July 13, the Centers for Medicare & Medicaid Services (CMS) released the [Calendar Year \(CY\) 2022 Proposed Rule for the Medicare Physician Fee Schedule](#), which was published in the *Federal Register* on July 23. The rule also includes proposals related to the Quality Payment Program. In the rule, CMS proposes a conversion factor for 2022 of \$33.58, which is a \$1.31 decrease from the CY 2021 conversion factor. The AAO-HNS subsequently signed-on to letters coordinated by the American College of Radiology and E/M Coalition expressing opposition to the adverse cut. The Academy will continue its advocacy efforts in Congress to prevent this harmful proposal and protect patient care. The AAO-HNS will submit comprehensive comments by the September 13 deadline on [elements of the rule impacting otolaryngology-head and neck surgery](#).

CY 2022 Hospital Outpatient Prospective Payment System Proposed Rule Is Issued

The Centers for Medicare & Medicaid Services (CMS) released the [Calendar Year \(CY\) 2022 Proposed Rule for the Hospital Outpatient Prospective Payment System](#) (HOPPS) on July 19, which also includes proposals related to the Ambulatory Surgical Center (ASC) Payment System. The proposed rule was published in the *Federal Register* on August 4. In the rule, CMS outlines two major policy changes: 1) to reverse the phased elimination of the Inpatient Only (IPO) list and restore the procedures that were removed during CY 2021, and 2) to reinstate the patient safety criteria that CMS uses to evaluate whether a procedure should be payable in the ASC setting, which were also removed under the CY 2021 rule. The AAO-HNS will submit comprehensive comments by the September 17 deadline on elements of the rule impacting the specialty.

CMS Releases Updated 2020 MIPS Performance Feedback and 2022 Payment Adjustments

On August 3, the Centers for Medicare & Medicaid Services (CMS) announced the release of Merit-based Incentive Payment System (MIPS) performance feedback and final scores for performance year 2020 and associated MIPS payment adjustment information for payment year 2022. The payment adjustment is applied to the eligible clinician or group’s paid amount for professional services covered by Medicare and performed in 2022.

On August 16, CMS notified providers that certain MIPS participant scores for 2020 were inadvertently miscalculated due to a technical issue. As a result, CMS is recalculating all scores to ensure accuracy and plans to update both the 2020 scores and related 2022 payment adjustment information in the coming weeks. Due to CMS’ error, the deadline to submit an appeal, or targeted review request, will be extended. More details on the corrected scores will be released as they become available.

Action Requested

New Volunteers Needed to Strengthen PROJECT 535

Successful legislative advocacy starts with a solid grassroots foundation. Given Congressional focus on legislation addressing health policy and physician reimbursement in the 117th Congress, it’s now 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 personal relationships with federal elected officials. Federal lawmakers want to hear from YOU—their physician constituents! The commitment is minimal, but the impact is immense. To help further strengthen our collective advocacy efforts, [sign up](#) today or contact govtaffairs@entnet.org for more information.

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!](#)

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.

American Academy of Otolaryngology–Head and Neck Surgery
1650 Diagonal Road, Alexandria, VA 22314-2857
Phone: 1-703-836-8444 | Fax: 1-703-683-5100