



Dear ENT Advocacy Network Member:

December 3, 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

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. U.S. Representatives Ami Bera, MD (D-CA), and Larry Bucshon, MD (R-IN), leading Congressional champions on physician issues, have introduced legislation, H.R. 6020, to avert these scheduled Medicare cuts. [Contact your U.S. Representative today](#) and urge them to support fair reimbursement for practicing otolaryngologist-head and neck surgeons by cosponsoring H.R. 6020.

Legislative and Political Reports

U.S. House of Representatives Moves to Reauthorize Early Hearing Detection and Intervention Programs

On November 17, the U.S. House of Representatives Committee on Energy and Commerce unanimously passed [H.R. 5561, the Early Hearing Detection and Intervention Act](#). This bipartisan legislation reauthorizes and provides new funding for the Early Hearing Detection and Intervention (EHDI) programs at the Centers for Disease Control and Prevention (CDC) and the National Institutes of Health (NIH). The AAO-HNS has long supported full funding for the EHDI program, which supports statewide plans that identify infants/children with hearing loss and provides the appropriate early intervention services. The Academy will continue its advocacy efforts with Congressional champions and the hearing health community on passage of this important legislation.

Build Back Better Act Passes the House

The [Build Back Better Act \(H.R. 5376\)](#), President Biden's approximately \$1.75 trillion social spending package, passed through the U.S. House of Representatives on November 19. It now faces potential consideration by the U.S. Senate this month. The Build Back Better Act would expand the Medicare program to include coverage of hearing aids under Medicare Part B for individuals with moderately severe to profound hearing loss. Importantly, the legislation does not change the existing physician referral currently in place under Medicare. The bill would also make changes to the Medicare program to cover aural rehabilitation and treatment services from "qualified audiologists," and hearing assessment services from "qualified hearing professionals." These changes would take effect on January 1, 2023. The Build Back Better Act still faces significant hurdles on its path to passing through Congress and signature into law. The Academy's Advocacy team is now focusing its efforts on the Senate to ensure that the priorities of the specialty are understood and taken into consideration as the debate continues.

Third 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. Therefore, in 2018 ENT PAC launched a new quarterly report titled "Your PAC Dollars at Work." [View your "Q3 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 2022 Physician Fee Schedule/Quality Payment Program Final Rule

On November 2, the Centers for Medicare & Medicaid Services (CMS) [released a final rule](#) implementing changes to the Physician Fee Schedule and Quality Payment Program for 2022. The regulation includes new values for hypoglossal nerve stimulation and drug-induced sleep endoscopy, procedures commonly performed by otolaryngologist-head and neck surgeons. The agency heeded the Academy's concerns regarding proposed updates to clinical labor pricing. In the final rule, CMS opted to phase in the changes over a four-year period. CMS also revised its proposals on critical care services. The agency will not bundle the services with other unrelated procedures next year. As expected, the 2022 fee schedule does not address the scheduled 9.75% cut to all physician services effective January 1, 2022. The AAO-HNS will continue to urge Congress to seek immediate action to reverse these cuts before the end of the year as well as to address long-term solutions for physician payment reform.

CMS Releases 2022 HOPPS/ASC Final Rule

On November 2, the Centers for Medicare & Medicaid Services (CMS) released the calendar year [2022 Hospital Outpatient Prospective Payment System \(HOPPS\)/Ambulatory Surgery Center \(ASC\) Payment System final rule](#). Key provisions affecting otolaryngologist-head and neck surgeons include pausing the elimination of the inpatient-only (IPO) list, reversing changes to the ASC covered procedures list, implementing pass-through payment for HCPCS code J7402 to describe the Sinuva implant, and exceptions to the "2 times" rule. Following advocacy efforts and input from the AAO-HNS, CMS revised its proposed policy to remove CPT codes 60512 and 69660 from the ASC covered procedures list. For 2022, each of these procedures will remain on the list of services, which can be performed in an ASC under Medicare. Finalized changes in the rule take effect on January 1, 2022.

CMS and OSHA Release Regulations Mandating COVID-19 Vaccination for Certain Health Care Workers

On November 5, the Centers for Medicare & Medicaid Services (CMS) and the Occupational Safety and Health Administration (OSHA) [released Interim Final Rules](#) establishing COVID-19 vaccination requirements. The CMS rule covers staff, including independent contractors, working at certain Medicare and Medicaid certified providers, including Ambulatory Surgery Centers, Critical Access Hospitals, Hospices, Hospitals, Rural Health Clinics/Federally Qualified Health Centers, and Long-Term Care facilities ("Covered Facilities" or "CMS Certified Providers"). Physician offices are exempt from the CMS rule but may be bound by the OSHA rule covering employers with over 100 employees or state law. The CMS rule requires vaccination without an accompanying testing option. The OSHA rule requires that employees either be vaccinated or receive weekly testing. Both rules require in-person staff to receive the first dose of a multi-dose vaccine or single-dose vaccine by December 6 and to complete a vaccine regimen by January 4, 2022. Medical and religious vaccine exemptions may be granted on a case-by-case basis.

CMS to Apply MIPS Automatic Extreme and Uncontrollable Circumstances Policy for 2021 in Response to COVID-19 PHE

On November 10, CMS [announced](#) it will apply the Merit-based Incentive Payment System (MIPS) automatic extreme and uncontrollable circumstances (EUC) policy to all individually MIPS eligible clinicians (ECs) for the 2021 performance year. The automatic EUC policy only applies to MIPS clinicians participating as individuals; it does not apply to groups, virtual groups, or Alternative Payment Model (APM) entities. Individual ECs do not need to take any action. CMS will automatically identify them and reweight all four MIPS performance categories to 0%. This means individual ECs will receive a neutral payment adjustment for the 2023 MIPS

payment year, unless they submit data for two or more categories or have a higher final score from group or APM entity participation.

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,

Yolanda L. Troublefield, MD, JD
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.

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

*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