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July 8, 2024

VIA ELECTRONIC MAIL [marcus.wallace@bcbsnc.com](mailto:marcus.wallace@bcbsnc.com)

Marcus Wallace, MD, MBA, FACP,  
Chief Medical Officer & Vice President, Clinical Operations &  
Innovation

Blue Cross and Blue Shield of North Carolina  
1720 Guess Rd  
Durham, North Carolina 27701

**Re: Reimbursement Guidelines for E/M services on same date of service for same member by same group practice**

On behalf of the American Academy of Otolaryngology-Head and Neck Surgery (AAO-HNS)<sup>1</sup>, I am contacting you regarding Blue Cross Blue Shield of North Carolina's (Blue Cross NC) revised **Medicare Reimbursement Policy: evaluation and management services\_MA** that was intended to go into effect on July 10, 2024. The policy, as drafted, proposed to modify how reimbursement for a "Problem Oriented E/M Service (CPT 99202-215)" is allocated by reducing the reimbursement for E/M services up to a 50% reimbursement when submitted on the same date of service as an annual wellness visit or preventive medicine visit.

The AAO-HNS commends Blue Cross Blue Shield of North Carolina's decision to review and rescind Medicare Reimbursement Policy: **evaluation\_and\_management\_services\_MA**. The negative impacts of this policy would have been felt statewide by our North Carolina membership and it would ultimately have had a negative impact on patient care and fair reimbursement for physicians.

The AAO-HNS continues to urge entities who adopt the resource-based relative value scale (RBRVS) methodology to adhere to those relative values, global surgical periods, use of modifiers, and the National Correct Coding Initiatives (NCCI) edits. Failure to do so results in physicians not being reimbursed fairly for the procedures and services they commonly perform. Currently in the RBRVS physician work,

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practice expense, and malpractice inputs for E/M and otolaryngology specific codes, codes are purposely structured to ensure that there is no overlap in physician work and practice expenses between a same-day E/M service and a minor procedure with a 0 or 10-day global period.

For the reasons stated above, the AAO-HNS strongly believes that Blue Cross Blue Shield of North Carolina made the appropriate decision to rescind this policy. Moving forward, the AAO-HNS urges Blue Cross Blue Shield of North Carolina to publish policies that are consistent with CMS reporting rules, and the AMA Current Procedural Terminology (CPT) codes, guidelines, and conventions that are already in place.

We appreciate the opportunity to engage on this and any other policy moving forward in a more proactive manner and would welcome regular check-ins on issues impacting otolaryngology. Should you have any questions, please contact [healthpolicy@entnet.org](mailto:healthpolicy@entnet.org).

Sincerely,



James C. Denneny III, MD  
Executive Vice President and CEO