

Your Academy's Health Policy Advocacy Team at Work for You

The Academy's Health Policy Advocacy Team works closely and with the Physician Payment Policy (3P) Workgroup, Academy members, physician leaders and experts, Academy committees, the American Medical Association, and other medical societies to identify challenging policies that can be impediments to practicing otolaryngology-head and neck surgeons. Additionally, the team actively collaborates with the Academy's Coordinator of Advocacy, Lance A. Manning, MD, and Executive Vice President and CEO, Rahul K. Shah, MD, MBA. The Health Policy Advocacy Team works on behalf of the membership throughout the year. The highlights noted below cover the 2024-2025 yearly cycle.

AAO-HNS worked with the following payers to improve coverage for services:

- Blue Cross Blus Shield Association
- Blue Cross Blue Shield of North Carolina
- Blue Cross Blue Shield of North Dakota
- Blue Shield of California
- Centers for Medicare & Medicaid Services
- Evicore
- Highmark
- Point32Health
- UnitedHealthcare

AAO-HNS drafted comment letters on the following topics:

- Botox injections
- Debridements
- Drug-eluting sinus implants
- Modifier 25, 58, and 79
- Prior authorizations
- Same-day E&M services
- Septoplasty
- Sinus surgery

AAO-HNS published the following new and updated Position Statements:

- Empty Nose Syndrome
- Otolaryngologic On-Call Services
- Pay Parity in Otolaryngology
- Preserving Access to MRI for Patients with Implantable Hearing Devices
- Suppressors for Hearing Preservation
- Transgender Voice
- Universal Newborn Congenital Cytomegalovirus (cCMV) Screening

AAO-HNS, drawing upon expertise shared by several of its clinical committees, provided detailed reviews and input on the following services:

- Hyperbaric oxygen therapy compromised grafts and flaps
- Lingual frenotomy for ankyloglossia-related feeding difficulties
- Prefabricated external infant ear molding systems





- Vestibular function testing
- Whole genome sequencing, whole exome sequencing, gene panels, and molecular profiling

AAO-HNS joined other specialty societies in drafting updates to the following AMA's CPT Assistant Articles:

- Non-absorbable lateral wall implant
- Non-absorbable lateral wall implant / respiratory system
- Revision of a tympanoplasty without ossicular chain reconstruction with a mastoidectomy
- Thyroidectomy
- Thyroidectomy with neck dissections level 6 and 7
- Tissue transfer

AAO-HNS, through its work with the American Medical Association's (AMA) Current Procedural Terminology's (CPT) Editorial Panel, helped resolve the following inquiries:

- Group dysphagia therapy
- Nasal / sinus endoscopy bilaterally with debridement
- Reporting 42700 (incision and draining of peritonsillar abscess) and 42826 (tonsillectomy) together
- Reporting 60252 (thyroidectomy) and 60500 (parathyroidectomy or exploration of the parathyroid glands) together
- Septectomy
- Thyroidectomy / cervical lymphadenectomy
- TORs coding
- Uvulectomy, excision of uvula / digestive system

The Academy's Health Policy Advocacy Team continues communicating coverage wins and announcements as notifications are received. If you have questions regarding national or local private payer challenges, contact healthpolicy@entnet.org.



http://www.entnet.org/content/private-payer-advocacy

