



EDPMA Advocacy Activity & Successes in 2021

In 2021, EDPMA:

- Sent over 125 letters:
 - * 60 on Down Coding (1 complaint was filed with 50 insurance commissioners)
 - * 8 on Implementation of the No Surprises Act
 - * 8 on Medicare reimbursement
 - * 46 on Medicaid Reimbursement (1 letter was sent to 44 Medicaid directors)
 - * 2 on COVID Provider Relief
 - * 1 on State-Level Surprise Billing
- Held over 25 Meetings with Key Decisionmakers on:
 - * Implementation of the No Surprises Act
 - * Impending Medicare Cuts
 - * Down Coding Based on Diagnosis
- Sent 7 action alerts
 - * 6 on Medicare Sequestration Cuts
 - * 3 on Surprise billing
 - * 1 on Medicaid Reimbursement
- Filed an amicus brief supporting lawsuit challenging the problematic Surprise Billing Rule

Our advocacy met with some success:

Medicare

- Early in 2021, the **2% Medicare Sequestration Cut was delayed** through 12/31/21 as requested by EDPMA and others.
- The 2022 Medicare Physician Fee Schedule (MPFS) final rule maintains the ED E/M codes set on the **List of Medicare Approved Telehealth Services** through the end of 2023.
- The 2022 MPFS final rule modifies the proposal in line with EDPMA's comments, for 2022, to allow for performance of MDM to identify the practitioner who provided the "substantive portion" of a visit for purposes of determining the billing practitioner of a **split (or shared) E/M service**.
- The 2022 MPFS final rule reverses course on its proposal to bundle all **critical care services** into surgical global periods (if the case is in a global period).
- The 2022 MPFS final rule reverses course on its proposal to ban billing separate **E/Ms on the same day as critical care services**.
- The 2022 MPFS final rule continues to delay **Advanced Imaging Appropriate Use Criteria (AUC) requirements**.
- The 2022 MPFS final rule **delays requirements mandating subgroup reporting** under a TIN as part of its package of policies regarding the new MIPS Value Pathways (MVPs).
- The 2022 Outpatient Prospective Payment System (OPPS) Final Rule halts the elimination of the **Inpatient Only (IPO) List** and proceeds more cautiously.
- In December 2021, Congress passed legislation **delaying most of the 9.75% cut that was scheduled to take effect in 2022**. Instead, there will be a 0.75% cut for the first 3 months of 2022, a 1.75% cut for the next three months, and a 2.75% cut for the last six months of 2022.

No Surprises Act

- First Interim Final Rule reiterates **Prudent Layperson Standard Prohibition** against denying emergency claims based on diagnosis after we raised concerns.
- First Interim Final Rule provides that **state law does not apply unless it applies to the item or service at issue** as we requested.
- Over 120 Members of **Congress sent a letter to the agencies opposing the problematic interim final rule** implementing the No Surprises Act.

Down Coding Policies

UHC delayed its problematic down coding policy (based on diagnosis) for a second time after EDPMA sent a letter and filed complaints with 50 insurance commissioners.

Medicaid Reimbursement

Wisconsin will increase Medicaid emergency reimbursement by 15% after EDPMA worked with coalition partners on an action alert.

Prompt Processing by Veterans Administration

After raising concerns last year regarding processing delays, this year the Veterans Administration opened a portal to **improve processing times for emergency claims.**