ACEP/EDPMA Frequently Asked Questions (FAQs) regarding the NSA Implementation Task Force QPA Reporting Project—

- 1. Q--What is the ACEP/EDPMA NSA Implementation Task Force (NSA ITF) and what is its purpose?
 - A: The NSA ITF was formed by both organizations soon after passage of the federal No Surprises Act on 12/27/20 (with an effective date of 1/1/22) to assist in coordinating regulatory responses and advocacy regarding the anticipated rule making and regulatory guidance. The task force has written numerous comment letters to rule making, technical responses to issues at the request of CMS' CCIIO and has continually updated the leadership of both organizations and their membership.
- 2. Q--What is the "qualifying payment amount" (QPA)?

A: The QPA is the plan's determination of the median in network rates that it reimbursed as of 1/31/19, adjusted by the CPI-U. The QPA serves two main purposes: 1. It is used as the "recognized amount" and for determining patient cost sharing; 2. It is used as a factor in "independent dispute resolution" (IDR) along with other factors specified in the law for IDR entity (IDRE) to determine the final reimbursement, e.g. prior contract rates for 4 years prior and quality and outcome measurements. While the QPA is not mandated to be the initial reimbursement by the health plan—the regulations state that the plans are required to reimburse an amount

that reasonably could be the final payment—there is at least initial evidence that plans are reimbursing at the QPA.

3. Q--What are the technical requirements for the QPA?

A--The health plans are required to disclose the QPAs in writing for each CPT with each initial payment or denial under the CMS regulations. The plans must also inform the clinicians that the QPA was the recognized amount based on the plan's calculations and that each QPA was determined in compliance with the law. As a separate project, the NSA ITF will be collecting data and information regarding the extent of the health plans' compliance or non-compliance with these regulations.

4. Q—What is the QPA Reporting Project?

A--The Project seeks to gather 100 evaluation and management (E/M) services claims per physician group or RCM, across their top 3-5 states, e.g. 20 claims per state for a multi-state group or RCM, and to determine the QPA by health plan, whether the QPA was the initial out of network (OON) reimbursement and relevant "Remittance Advice Remark Codes" (RARCs) regarding the remittance advice (RA) provided by the health plan.

5. Q—How do we know that this project will not violate anti-trust laws and regulations?

A—ACEP and EDPMA have jointly requested their anti-trust counsel provide advice regarding these issues and believe that each organization will take measures to reduce exposure to anti-trust issues. The US DOJ and FTC have well established guidelines for healthcare activity falling within

established "safety zones" and each agency has stated that it will not challenge these activities if the guidelines are followed-
https://www.justice.gov/atr/page/file/1197731/download. While such regulatory risks may rarely be reduced to zero, both organizations are confident that they will comply with the safeguards and guidelines.

6. Q—How will physician groups be rest assured that their raw data will not be shared with other groups?

A—One of the anti-trust safeguards from the DOJ and FTC is that the information is managed by a third party, e.g. a consultant, and that there can be no sharing of the raw data with members of the EDPMA or individual ACEP members. The raw data will be gathered by the consultant, compiled with other submitters and reported in a blinded method (see attached spreadsheet) that will not name or otherwise identify the groups or RCMs who submit the raw data. Finally, the spreadsheets will be stored on the servers of the consultant and access to the raw data will be strictly limited that individual.

7. Q—How will the data be used?

A—ACEP and EDPMA will consider using the data in their ongoing regulatory and advocacy regarding the NSA, including members of Congress. Other specialty societies and stakeholders are considering QPA data and compliance issue collection projects at this time and the de-identified data may be used in conjunction with joint stakeholders.