

AAP Private Payer Advocacy Update May 2009

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Academy devoting resources to four major vaccine issues

<http://aapnews.aappublications.org/cgi/content/full/30/5/6>

Payment for non face to face care critical to success of patient centered medical home

<http://aapnews.aappublications.org/cgi/content/full/30/5/16>

1. AAP drafts letter clarifying renumbered codes

To assist chapters and members in advocating against decreased payments of the 2009 renumbered CPT codes, the AAP developed a letter and attachments to send to payers. Some state Medicaid programs and private sector payers have used the 2009 CPT code renumbering as an opportunity to classify these renumbered codes as "new" codes, effectively lowering payment associated with them. AAP chapters and pediatric councils experiencing reductions in payment for these codes in Medicaid and with other payers are encouraged to use this letter and attachments to seek reinstatement of payment. This letter is available on the AAP Member Center at <http://www.aap.org/moc/> and can be accessed through the State Government Affairs site as well as the Private Payer Advocacy page (under AAP letters to carriers).

2. UHC updates contacts list

UnitedHealthcare has recently updated its Web site to include the appropriate contact information for problem resolutions in each geographical area. This information can be found by going to UnitedHealthcareOnline.com > Contact Us > Network Contacts or just click on this link: http://www.uhc.com/contact_us.htm

3. BCBS compliance dispute resolution process in effect

As of April 21, 2009, all the provisions in the Blue Cross Blue Shield Settlement Agreement have taken effect. The settling Blue Cross Blue Shield plans agreed as part of the settlement:

- May not seek overpayment recovery beyond 18 months
- Must use a clinically based definition of medical necessity
- Must adhere to most CPT© coding rules including payment for E&M codes appended with a 25 modifier and payment for add-on codes
- Must provide 90 days advance notice of material adverse change
- May not require physicians to participate in all products
- Must disclose their methodology for determining UCR amounts

If you believe a Blue Cross Blue Shield company (or any of the other settling insurers) has violated a provision of the settlement agreement, you should file a compliance dispute by completing the two page form available on <http://www.hmosettlements.com>. There is absolutely no cost to physicians to file disputes.

In addition to the Blue Cross Blue Shield Settlement Agreement, settlements with Anthem/WellPoint, HealthNet and Humana remain in effect. For more information, please go to <http://www.hmosettlements.com>, <http://www.ama-assn.org/go/settlements> or contact the compliance dispute facilitators, Deborah Winegard at dwinegard@npmlaw.com for Blue Cross Blue Shield and Humana disputes or Cameron Staples at cstaples@npmlaw.com for Anthem/WellPoint and HealthNet disputes.

4. AAP News articles related to private payer advocacy issues

The following articles related to private payer advocacy issues are in the May 2009 AAP News:

Academy devoting resources to four major vaccine issues

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Have an issue with Carriers or Retail Based Clinics? Complete the AAP Hassle Factor Form on the AAP Member Center at <http://www.aap.org/moc/reimburse/hasslefactor/> (requires member log in).

The AAP and chapters use the data to identify issues and discussion points with payers.

For additional information on AAP private payer advocacy, contact Lou Terranova, Senior Health Policy Analyst at lterranova@aap.org or 800/433-9016 ext 7633

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