

AAP Private Payer Advocacy Update

November 2008

- 1. AAP clarifies recommendations for developmental and autism screens to payers; urges coverage and payment**
- 2. Payers notified of neonatal and pediatric E/M code revisions**
- 3. AHIP Medical Leadership Forum includes AAP representation**
 - Poster presentation on AAP QullN Safe and Healthy Beginnings**
 - Meeting with AHIP Medical Officer Leadership Committee**
- 4. Vaccine Cost Resources**
- 5. Pediatric Council Forum at NCE**
- 6. AAP News articles related to private payer advocacy issues**

Humana to enhance immunization payments, cover phone care

<http://aapnews.aappublications.org/cgi/content/full/29/11/34>

Billing for telephone care

<http://aapnews.aappublications.org/cgi/content/full/29/11/34-a>

Immunization Alliance fights vaccine misinformation

<http://aapnews.aappublications.org/cgi/content/full/29/11/16>

2009 brings changes to pediatric hospital CPT codes

<http://aapnews.aappublications.org/cgi/content/full/29/11/32>

1. AAP clarifies recommendations for developmental and autism screens to payers; urges coverage and payment

In a letter to carriers, the AAP clarified the recommendations for developmental and autism screening. Pediatricians have reported that some carriers continue to bundle the screens with the evaluation and management (E/M) service or are limiting the number of developmental screenings as reported by CPT code 96110 (*developmental testing; limited with interpretation and report*). A copy of the **letter is attached below** (<http://www.aapca3.org/law/ppa/carriers1108.pdf>) and, along with any carrier responses, will be posted on the private payer advocacy page on the AAP Member Center.

2. Payers notified of neonatal and pediatric E/M code revisions

The AAP notified payers regarding revisions to the neonatal and pediatric inpatient evaluation and management (E/M) codes and encourages payer to update their claims systems for recognition of the revised code numbers before January 1, 2009. Through the AAP Division of State Government Affairs, the letter will also be made available to AAP Chapters to share with their state Medicaid and SCHIP programs. A copy of the [letter is attached below \(http://www.aapca3.org/law/ppa/2009renumbering.pdf\)](http://www.aapca3.org/law/ppa/2009renumbering.pdf) and, along with any carrier responses, will be posted on the private payer advocacy page on the AAP Member Center. The December 2008 *AAP News* will also feature an article on this letter.

3. AHIP Medical Leadership Forum includes AAP representation Poster presentation on AAP QuIIN Safe and Healthy Beginnings

Staff from the AAP Quality Improvement Innovation Network attended the AHIP Medical Leadership Forum to present the work of their pilot improvement project, Safe and Healthy Beginnings, in a poster presentation. QuIIN staff took advantage of AHIP's interest in quality improvement and performance measurement through the inclusion of this topic as one of the poster presentation themes. The poster was presented during 3 assigned time slots and several individuals viewed the poster and took handouts that were made available.

The QuIIN was established in 2005 to test tools, strategies, and innovations to assist pediatricians in implementing evidence-based guidelines and improve care. The Safe and Healthy Beginnings project aimed to support implementation of the 2004 AAP Clinical Practice Guideline, "Management of Hyperbilirubinemia in the Newborn Infant 35 or More Weeks of Gestation." Additional information about QuIIN and the Safe and Healthy Beginning project is available at <http://quiin.aap.org>

Meeting with AHIP Medical Officer Leadership Committee

Anne Francis, MD, FAAP and chairperson of the Private Payer Advocacy Advisory Committee (PPAAC) and AAP private payer advocacy staff met with several carrier medical directors and specialty society staff during the AHIP Medical Leadership Forum. The meeting focused on discussions related to value-based purchasing, quality improvement, and efficiency. A significant portion of the discussion focused on value-based benefit design so that benefits could be tailored to achieve clinical value. There was a general consensus that a collaborative approach to quality improvement was imperative and that uniform standards to assess performance will help advance improvement efforts. Carriers were urged to provide feedback about patients and quality outcomes, not just cost. The specialty societies identified the need for increased access to data to help inform and improve performance.

4. Vaccine Cost Resources

Below are links and descriptions of public accessible resources on vaccine costs. As pediatricians look to negotiate appropriate payment for vaccines, it is important to know how carriers base their payments.

Average Sales Price (ASP): ASP is the average sales price reported by vaccine manufacturers to the Centers for Medicare and Medicaid (CMS) for a particular quarter. This includes special rates and volume discounts that may not be available to most pediatric practices. The link to the CMS ASP is:

<http://www.cms.hhs.gov/McrPartBDrugAvgSalesPrice/>

VFC/CDC Vaccine Price List: This lists the contract price for vaccines by VFC and private sector vaccine prices. The VFC/CDC Vaccine private payer price list is based on the manufacturer's catalogue price. The link is:

<http://www.cdc.gov/vaccines/programs/vfc/cdc-vac-price-list.htm>

TRICARE: TRICARE Maximum Allowable Charges (TMAC) are geographically based and generally are aligned with Medicare fee schedule. TRICARE contractors may negotiate fee discounts with participating providers resulting in payments less than the TMAC. The link is provided below and the user will need to specify the geographic location and CPT code. <http://www.tricare.mil/allowablecharges/>

5. Pediatric Council Forum at 2008 NCE

Members from 14 chapter pediatric councils met during the 2008 NCE to exchange ideas on pediatric councils. Several reported discussions with carriers on immunizations, as well as Bright Futures and non-face-to-face care. The New York chapter pediatric councils reported having some success with enhancing vaccine payments. A key to a successful meeting is having data to support the issue being discussed. The New Jersey pediatric council utilizes practice managers to collect data for its meetings. Most pediatric councils concurred that most results come after the meeting after the issues are presented and follow up with the individual carriers. Although some states have used the state's insurance commissioner to participate in meetings, this was not a common theme among the pediatric councils.

For information on chapter pediatric councils, including shared meeting summaries, access the pediatric council link on the private payer advocacy page on the AAP Member Center.

6. AAP News articles related to private payer advocacy issues

The following links are articles in the November 2008 *AAP News* related to private payer issues:

Humana to enhance immunization payments, cover phone care

<http://aapnews.aappublications.org/cgi/content/full/29/11/34>

Billing for telephone care

<http://aapnews.aappublications.org/cgi/content/full/29/11/34-a>

Immunization Alliance fights vaccine misinformation

<http://aapnews.aappublications.org/cgi/content/full/29/11/16>

2009 brings changes to pediatric hospital CPT codes

<http://aapnews.aappublications.org/cgi/content/full/29/11/32>

Pedialink Module on Contract Negotiations with Payers

This online course provides tools and techniques to help pediatricians and staff successfully negotiate payer contracts with confidence. *Contract Negotiations With Payers* features a four-step process model to help course registrants plan and prepare, use leverage when negotiating, make informed decisions, and monitor compliance to contract terms and agreements.

For a **FREE PREVIEW** of the module click on

http://pedialink.org/cmefinder/videos/Contract_Negotiations_Preview/index.htm

Register today and receive A Pediatrician's Guide to Managed Care FREE!

*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*

Louis A. Terranova, MHA

Senior Health Policy Analyst

Private Payer Advocacy

Division of Health Care Finance and Quality Improvement

American Academy of Pediatrics

141 Northwest Point Blvd.

Elk Grove Village, IL 60007

800/433-9016 ext. 7633

847/434-7633

Fax: 847/228/9651

E-mail: lterranova@aap.org

This document was created with Win2PDF available at <http://www.win2pdf.com>.
The unregistered version of Win2PDF is for evaluation or non-commercial use only.
This page will not be added after purchasing Win2PDF.