

Speak Up! Help Establish the Value of Your Professional Services

By Paul Pessis and Kate Thomas

Each November, the Centers for Medicare and Medicaid Services (CMS) publishes the Medicare Physician Fee Schedule (MPFS) final rule that lists the payment rates for all Current Procedural Terminology (CPT)[®] codes across specialties for the upcoming year. The MPFS not only impacts reimbursement from Medicare, but it also can be used as the model for establishing payment across many private payers.

Audiologists want to ensure they receive fair and appropriate payment for their services, especially under the Medicare program. Do you know that you can (and need to) take an active role in determining how audiology codes and services are valued under this system?

Now for the specifics...

The annual updates to work values made in the MPFS final rule are determined based on recommendations from the American Medical Association's Relative Value Scale Update Committee (RUC). The AMA works with specialty societies, like the American Academy of Audiology (the Academy), to develop and propose recommendations for valuation to CMS for new or revised CPT codes. Code revisions come as a result of periodic review from both CMS and the RUC.

The Academy takes an active role in both the development of CPT codes and the valuation of those codes through the AMA CPT Editorial Panel and RUC processes, with the help of Academy assigned

representatives. These representatives, better known as advisers, use the information supplied by you, the practitioner, to advocate for a fair value of each CPT code performed within our scope of practice. Simply, the system is designed to engage you in the process and we encourage every Academy member to participate.

How Can You Help?

To properly determine valuation for codes, the AMA RUC partners with specialty societies to conduct surveys from providers who regularly provide the services under review. Beginning this summer and extending through 2019, you may receive an e-mail asking you to participate in a survey that relates directly to a new or revised CPT code used in your daily practice. Participating in this survey gives you a voice. It is your opportunity to communicate and quantify the value of professional work.

Audiology RUC advisers report the survey results and related recommendations directly to the AMA RUC, and the information from your survey contributes to and impacts the Medicare payment rates for services surveyed. Your participation in the survey/process is crucial and should be considered a professional privilege and obligation.

The Academy is working with the American Speech-Language-Hearing Association (ASHA) to disseminate these AMA RUC surveys as they

relate to new and revised CPT codes for audiology services. If you receive an e-mail from the Academy or ASHA requesting your participation in a survey, we strongly urge you to review the survey carefully and participate assuming you meet the requirements for taking the survey.

To participate, you must be a practicing audiologist who is familiar with and regularly performs the procedure described by the CPT code. You can participate even if you don't currently bill Medicare or other third-party payers.

Remember—this is your chance to describe the professional work for the services you perform and to shape the valuation of those services. Audiologists are best qualified to communicate the value of our professional skills, cognition, and clinical judgment performed in providing the service under review. The survey

process is the platform that allows your input to be shared with key decision makers assigned by the RUC.

What Should You Look For?

As mentioned, check your e-mail inbox for the AMA RUC surveys mentioned earlier from the Academy and ASHA, and tell your colleagues to be on the lookout for the surveys, as well. The surveys are meant to assess key elements of the service you provide including the time, intensity, and complexity of the work performed.

For more information on the survey process, view this educational video from the AMA at www.youtube.com/watch?v=kaw6-OhwbaM.

We hope you will take the opportunity this summer (and anytime a survey comes to you) to give your profession a voice in the valuation process! 

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Overview of the RUC Survey Process

- The Academy will send an e-mail invitation for you to participate in the survey. The e-mail will contain an embedded link to an RUC survey for a specific service. If you provide this service, we strongly encourage you to participate in taking the survey.
- Keep in mind that the surveys should be completed based on your “typical” case. We are collecting information based on the patient you see most frequently and not one that is the exception.
- Survey results are compiled and discussed by the Academy, ASHA, and other stakeholders to determine appropriate recommendations for valuation. Recommendations are then presented to the RUC.
- At the RUC meeting, the Academy’s RUC adviser Paul Pessis, AuD, works with ASHA’s RUC adviser Leisha Eiten, AuD, to present the survey results of work, time, intensity, and complexity.
- The RUC reviews and discusses the survey results and recommendations prepared by the audiology community. The RUC then determines the final relative value unit (RVU) and practice expense (PE) recommendations to take to CMS.
- CMS can either accept the RUC’s recommendations or modify the recommendations based on their own internal review process. CMS publishes their approved values in the Medicare Physician Fee Schedule (MPFS) proposed rule published annually in July. They seek public comments on their proposals. Final values are published in the MPFS final rule in November.