

February 10, 2020

Carol Blackford, Director
Hospital and Ambulatory Policy Group
Centers for Medicare and Medicaid
7500 Security Boulevard
Baltimore MD 21244

Submitted electronically

RE: Audiology-Specific Perspective on CY 2021 Payment Policies under the Physician Fee Schedule (PFS) and Other Changes to Part B Payment Policies Proposed Rule

Dear Director Blackford:

On behalf of the American Academy of Audiology, we are writing to provide the Centers for Medicare and Medicaid (CMS) additional information and background on some of the existing Medicare restrictions relative to audiology billing and coding. To supplement related comments that we are submitting collectively with other physician and non-physician provider groups about the impact of the expected 2021 reimbursement reductions, we offer this information to highlight the nuances of these reductions in relation to providing audiological care. The Academy is the world's largest professional organization of, by and for audiologists. Representing the interests of approximately 14,000 audiologists nationwide, the Academy is dedicated to providing quality hearing care services through professional development, education, research, and increased public awareness of hearing and balance disorders.

In the 2020 Physician Fee Schedule (PFS) final rule, CMS accepted the AMA RUC recommendations for increased payment for the office/outpatient evaluation and management (E/M) codes. However, in an effort to maintain budget neutrality and offset the E/M increased payments, CMS also announced significant decreases in Medicare reimbursement in 2021 that will directly impact providers with low utilization of E/M services and providers who do not bill office/outpatient E/M codes. Given the existing disparities between the actual reimbursement rates prior to the application of any reductions and the access or lack thereof to particular

billing codes among different providers, the actual impact of the expected reductions will not be uniform across all providers.

Audiology-Specific Distinctions and Concerns

With respect to audiology, we would like to highlight some of the unique circumstances and distinctions that will compound the effect of the planned reimbursement reductions:

- Current regulations prohibit audiologists from billing Medicare for E/M codes.
- Audiologists are not permitted to use the new G codes for E/M services.
- Audiologists do not have any dedicated E/M codes at this time. In contrast, some other non-physician providers have created their own dedicated E/M codes.
- The AMA drafted a listing of E/M services performed by HCPAC providers. However, this listing only identified the word “evaluation” in the code descriptor.
 - Audiology codes identified are procedural services which have “evaluation” in the descriptor. This is an erroneous assumption as “evaluation” in these CPT codes defines cognitive work, not management.
 - The closest approximation of audiology E/M codes may be based on payment for cognition within the RVU.

In light of the aforementioned considerations, the proposed 6% cut for budget neutrality and additional 2% sequestration cut will have a disproportionate effect on audiologists.

Audiologists do not have access to E/M services to offset the expected 8% reimbursement reduction. We have concerns that these reductions will have an unfortunate impact on patient access to services and care.

We highlight these concerns to CMS in hopes that the Agency will consider an alternate approach with respect to achieving budget neutrality to offset the E/M increases in a way that takes into account the inherent differences between provider types. We would appreciate the opportunity to discuss these concerns in greater detail at your convenience. If you have any

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questions about the information included in this letter, please contact Susan Pilch, Senior Director, Government Relations at spilch@audiology.org or at (703) 226-1036.

Sincerely,

A handwritten signature in black ink, appearing to read "Catherine Palmer". The signature is fluid and cursive, with the first name "Catherine" being more prominent than the last name "Palmer".

Catherine V. Palmer, PhD
President, American Academy of Audiology

Cc:

Gift Tee, Director, Division of Practitioner Services, Hospital and Ambulatory Policy Group
Liz Richter, Deputy Center Director