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COVID-19

Local Payer Updates

Update #6 from the NYS AAP - Chapter 2 & 3

PEDIATRIC COUNCIL

Your Pediatric Council addresses billing and payment issues with insurers. We strive to facilitate better working relationships between pediatricians and health insurance plans, and to improve quality of care for children.

Dear NYS AAP - Chapter 3 Member,

As we continue to deal with the effects of the National Health Emergency on our patients and our practices, it remains our goal to keep our members updated with information from the payers in our region. Regulations and instructions are constantly in flux, and the information herein is accurate to the best of our knowledge as of June 16.

A new release from HHS (<https://www.hhs.gov/about/news/2020/06/09/hhs-announces-enhanced-provider-portal-relief-fund-payments-for-safety-net-hospitals-medicaid-chip-providers.html>) announced a \$15 billion fund for payments to be made to Medicaid providers, among other groups. The release anticipates that payments will be at least 3% of annual gross patient care revenue, based on prior years, and the portal for application opened on June 10. The amount of money will not come anywhere near to making pediatricians whole as a result of the losses during the COVID-19 pandemic, but it does represent a start. The AAP continues to lobby for greater support for pediatricians who have suffered losses out of proportion to those borne by Medicare providers.

Update on payment for telehealth services from the AAP's Payer Advocacy Advisory Committee (PAAC) and The Verden Group:

Aetna: Member cost sharing for any in-network covered telemedicine visit – regardless of diagnosis – for its Commercial plan members is waived through June 4, 2020. However, the current Telemedicine Policy coverage has been extended through August 4, 2020. Therefore, effective June 5th, any copays allowed under the member's plan may be collected except as noted. From June 5, 2020 through September 30, 2020, Aetna is extending all member cost-sharing waivers for in-network telemedicine visits for outpatient behavioral and mental health counseling services only for Aetna-insured Commercial plan members. Aetna and self-insured plan sponsors, as appropriate, will continue to cover member cost-sharing for services included in the Families First Coronavirus Response Act (such as COVID-19 testing and visits resulting in a COVID-19 test). Self-insured plan sponsors offer this waiver at their discretion. See the Aetna FAQ at <https://www.aetna.com/health-care-professionals/provider-education-manuals/covid-faq/telemedicine.html>. Aetna will also stop payment for telephone calls as of June 4.

Cigna: Extending coverage through July 31, 2020. Includes cost sharing waiver. See <https://static.cigna.com/assets/chcp/resourceLibrary/medicalResourcesList/medicalDoingBusinessWithCigna/medicalDbwcCOVID-19.html>

UHC: Coverage for telehealth extended through June 18, 2020, unless United Healthcare extends the end date. Ending cost sharing waiver for non-COVID June 19; for COVID July 24.

Anthem: Will end cost sharing waiver for non-COVID services September 13; for COVID related care December 31.

Wellcare: No end date in sight as of now (no cost sharing for them as a Medicaid plan).

Humana: Cost sharing waiver continuing through December 31.

Paycheck Protection Program (PPP) Update:

The House and Senate have passed a bill with significant changes in the PPP.

The key provisions of the House bill are:

- Extending to 24 weeks (but not later than December 31, 2020) the period of time businesses have to use the funds (the current requirement is 8 weeks);
- Reducing the requirement to use 75% of the proceeds for payroll to 60%;
- Extending the repayment period from 2 to 5 years; and
- Allowing payroll tax deferrals to continue even once the loan is forgiven.

[This Forbes article summarizes these changes.](#)

The California Medical Association has put together a [financial toolkit for physicians](#). There are some good general guidelines as well as information specific to the CARES Act and the PPP. Note that the last revision was May 18, so some information may be out of date.

With our best wishes,

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Useful Info from the National AAP

There is a vast trove of useful information available from the National AAP. CEO Mark Del Monte shared information on many AAP initiatives in a recent email, available [here](#).

The Payer Advocacy Advisory Committee, chaired by Sue Kressly of PA, is dedicated to helping pediatricians address all manner of issues with insurance companies and other payers, including Medicaid. PAAC recently posted the following resources available through the National AAP:

- Payment Advocacy for Telehealth: https://downloads.aap.org/DOPA/Telehealth_2_rev.pdf
- State Notices about Telehealth in responses to COVID-19: <https://downloads.aap.org/DOCCSA/State-Telehealth-Notices.pdf>
- FAQs for Medicaid and CHIP responses to COVID-19: <https://www.medicaid.gov/state-resource-center/downloads/covid-19-faqs.pdf>
- Coding and Billing for Non-direct care: <https://downloads.aap.org/AAP/PDF/COVID%202020.pdf>

The AAP Coding Hotline is available to answer coding questions via email at aapcodinghotline@aap.org. In addition, a recording of a webinar on Coding During the COVID-19 Pandemic is available for viewing [here](#).

The NYS AAP - CHAPTER 3 is YOUR Local AAP Chapter

The New York State American Academy of Pediatrics (NYS AAP) is comprised of three local AAP Chapters, Chapters 1, 2, and 3, who work together as a coalition.

Your Chapter, the NYS AAP - Chapter 3, has over 1,700 members in 8 counties: Manhattan, the Bronx, Staten Island, Westchester, Rockland, Putnam, Orange and Dutchess.

To learn more about Chapter 3, please view our [Member Value Flyer](#), which describes the value of Chapter membership.

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