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LEGISLATIVE UPDATE

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Other	

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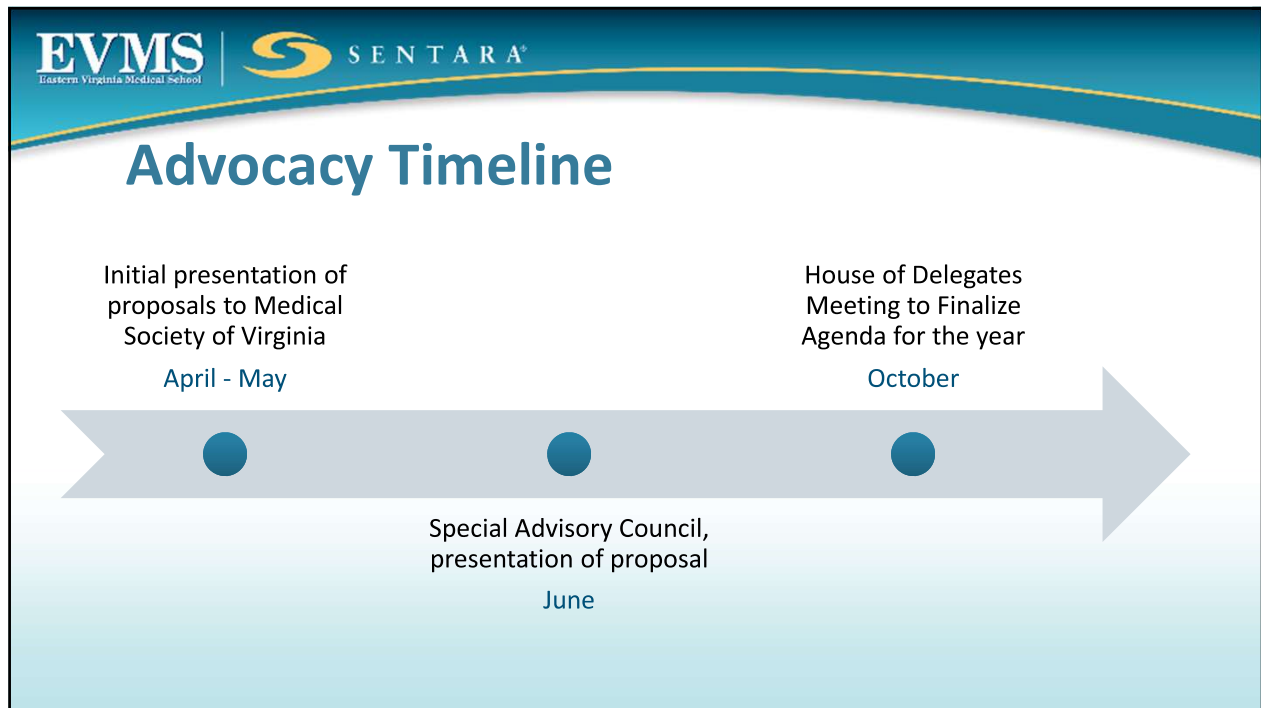
Accreditation Statement

- This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint providership of The American Academy of Sleep Medicine and The Virginia Academy of Sleep Medicine. The American Academy of Sleep Medicine is accredited by the ACCME to provide continuing medical education for physicians.

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Advocacy Background

- MSV is the Virginia chapter of AMA
- Legislature receives innumerable proposals
- Difficult to identify the most pressing health related
- Individuals and small groups have difficulty navigating the process and voicing concerns
- MSV aims to help physicians advocate for themselves
- Goal: focus on the areas of greatest need and impact



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Legislative Issues affecting Sleep Medicine

Top priorities for the MSV in recent years:

1. Prior Authorizations
 - NOT peer to peer reviews
 - Time constraints with 24 hrs to complete
2. Step therapy
 - Medication denials if switch insurance companies or medications

Prior Authorization Reform

- Legislation passed in 2019
 - PA not required for dosages of approved Rx
 - PA not required when patients change tiers within current plan
 - 30 day grace period if plan changes

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Step Therapy Reform

- Legislation passed in 2019
 - Faster exemption process
 - Bill (HB 2126) requires a *“clear, readily accessible, and convenient process to request a step therapy exception”*
 - Need to evaluate real world changes

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Other Recent Agenda Items

- **Balanced Billing**
 - Out-of-network ER visits
 - Passed Senate, but Tabled in house; working on modifications
- **Medicaid Reimbursement Rates Passed**
 - Medicaid expansion improved access, but rates too low so not enough physicians
 - Compromise of 70% of Medicare (not adjusted annually, just set at 2018/19 number) for Primary Care & Preventive
 - Mental Health set to 100% of Medicare
 - No sub-specialty rate adjustment
- **Copay Accumulator Bill Passed**
 - Any payment toward medication (regardless of source) counts toward deductible
 - Pharmaceutical company co-pay cards should count toward deductible
- **Tobacco age changed to 21**

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Proposals for 2020

- **Dominated by COVID**
- **22 Proposals**
 - Full list:
https://www.msv.org/sites/default/files/2020_proposal_packet_post-summit-bk.pdf
- **Top 4 selected by Specialty Advisory Council:**
 - Health Equity in Vulnerable Populations During COVID
 - Reusable PPE
 - Telehealth Super Proposal (combination of 5 proposals)
 - Truth in Advertising

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Health Equity in Vulnerable Populations

- Legislation to address racism and racial disparities in health care by:
 - 1) Expanding access to physician-led healthcare for underserved communities and communities of color
 - 2) Enhancing supports for healthcare systems serving predominately low-income or underinsured individuals and communities of color
 - 3) Collecting data that accurately captures rates of COVID-19 testing, infection, hospitalizations and deaths among varying demographics
 - 4) Developing interventions to bolster the health of marginalized populations whose health has been adversely affected by racism

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Reusable PPE

- Legislation to encourage and provide financial assistance to health care systems to transition to reusable personal protective equipment

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Telehealth Super Proposal

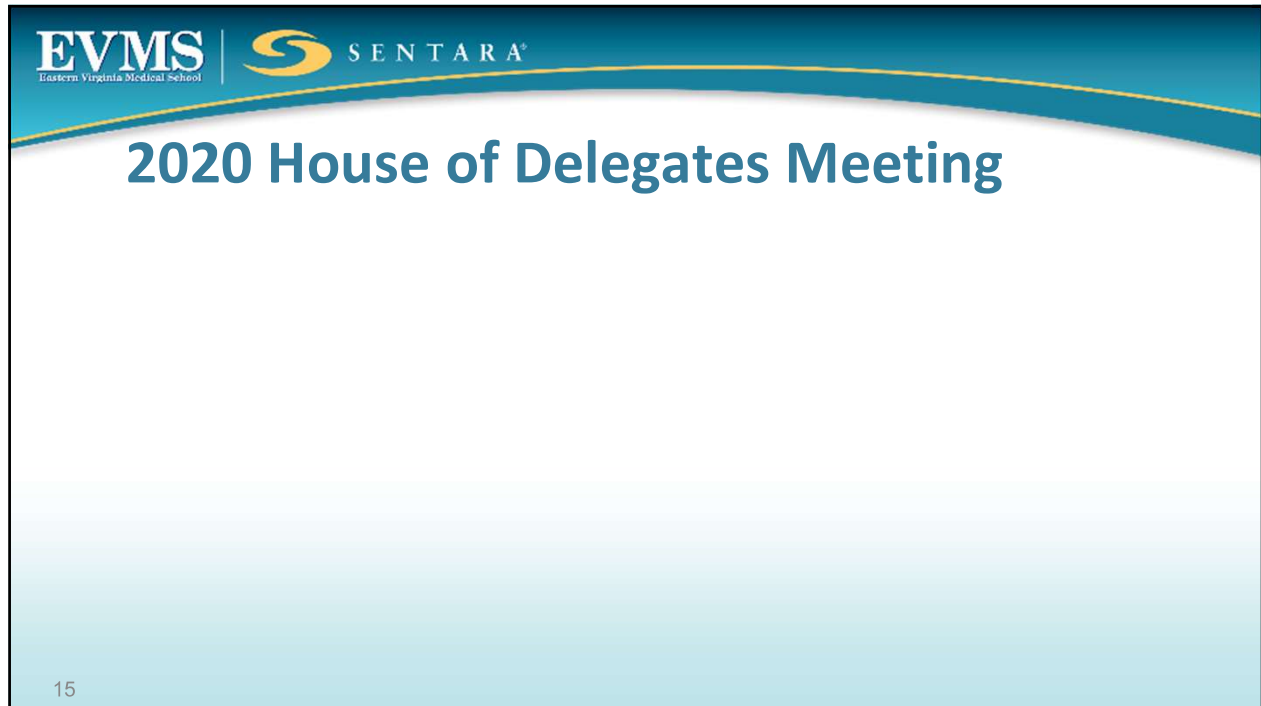
- Proposed legislation to:
 - Extend the temporary emergency waivers pertaining to telehealth for at least 12 months in order to ensure continuity of care and to develop sound long-term telehealth policy
 - Require payers, including Medicaid, to cover and reimburse for telehealth visits at the rate of an in-person visit, including coverage for mental and behavioral health services
 - Expand coverage and reimbursement for audio-only visits, especially for populations who may lack access to the necessary technology or broadband needed for a video consultation
 - Require payers to allow physicians to utilize any HIPAA compliant platform when conducting telehealth visit
 - Prohibit health plans from providing different reimbursement rates including when a provider does not use that plan's specific telemedicine product

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Truth in Advertising

- MSV policies protecting patients against false advertising of board certification
 - A physician may not hold oneself out as a board certified specialist unless the physician has received formal recognition as a specialist from a specialty board of the ABMS or other recognizing agency that has been approved by the medical board
 - MSV policies prohibiting the dissemination of information or advertisement that is false, deceptive, or misleading, including if that information:
 - (a) States or implies that the physician has received formal recognition as a specialist in any aspect of the practice of medicine unless the physician has in fact received such recognition and such recognizing agency is approved by the Board
 - (b) Conveys the impression that the physician disseminating the advertising or referred to therein possesses qualifications, skills, or other attributes, which are superior to other physicians
 - (c) Fails to conspicuously identify the provider by name in the advertisement
 - (d) Misrepresentation or absence of license credential information on identification materials
 - (e) Includes reference to specialty certification without identifying the name of the specialty board that has awarded specialty certification

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Issues raised by VASM members

- School start times
- Dentists cannot order dental orthotics for OSA
 - Results in physicians being required to do P2P
 - Denials often go to the DDS but P2P must be MD
 - Often time limit for P2P
- Anthem/AIM allows only 1 type of MAD...Herbst
 - “One size fits all” approach is flawed

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What Can I Do?

- Work with the legislative committee to create a new proposal for April Advocacy summit
 - Sample proposals available on the MSV website
- Research data on scope of problem
- Examples of impacts on individual patients
- Join the VASM legislative committee
- Get involved with the MSV

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Summary

- VASM working with MSV to advocate for physicians and patients
- VASM proposals have been the top priority of the MSV in past years & resulted in legislation on PA & step reform
- Current priorities may affect sleep medicine, especially with regards to telehealth legislation
- Accepting ideas for new proposals
- Feedback on how well new legislation is working

THANK YOU!!!

Legislative Committee

- Joshua Sill, MD – silljm@evms.edu
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