

Final Committee Objectives 2020-21

Reimbursement Committee

Chair: Heather A. Marshall, MD, FACEP

Board Liaison: L. Anthony Cirillo, MD, FACEP

Staff Liaison: David McKenzie, CAE

1. Identify and analyze the governmental reimbursement environment as it pertains to emergency medicine and assist in positioning the College appropriately on issues of importance. Concentrate on audit activity and payment policies throughout the Medicare system.
2. Continue to identify and analyze reimbursement challenges that impact emergency medicine and recommend strategic solutions. Continue to monitor private payer practices such as balance billing and fair payment, and challenge health plan claim bundling practices. Track out of network payments and payer mix shifts based on the ACA and databases such as FAIR Health.
3. Continue to support the efforts of the liaisons to the AMA RBRVS process, and advocate for improvement of work, practice expense, and malpractice relative values. Participate in any episode of care development activity in that venue.
4. Identify and develop educational materials such as articles, webinars, and Frequently Asked Questions (FAQs) to provide members with practical information on developing reimbursement trends. Develop specific content for residents and young physicians. Create tools to assist medical students with documentation that facilitate the integration of the medical student's documentation in the medical record with the supervision of the attending physician. Explore innovative ways to provide educational material to members.
5. Develop a strategy for emergency medicine to be represented in alternate payment models, including episodes and population health, to prepare for the transition from fee-for-service reimbursement to value-based reimbursement. Provide analysis of new payment models for emergency physician services that may replace or supplement the predominant fee for service model and offer advice on how ACEP members should prepare for these new models (ACOs, bundled payment, value-based reimbursement, etc.) Collaborate with the Alternative Payment Models Task Force. Expand the AUCM analysis to other payers. Monitor ED telehealth use and coverage. Monitor Telehealth payments and coverage.
6. Monitor Medicaid reforms at the state level and provide resources as appropriate. Monitor the impact of reimbursement changes in rural areas. Advise on the implementation of developing a model to implement the AUCM framework at the state level for Medicaid payors. Collaborate with the State Legislative/Regulatory Committee to coordinate with state chapter stakeholders in drafting the implementation process. (Reimbursement is the lead committee).
7. Provide input to the Federal Government Affairs Committee in responding to federal legislative and regulatory action related to out of network billing. (Federal Government Affairs is the lead committee.)
8. Provide input to the Federal Government Affairs Committee to develop strategies to address Amended Resolution 38(19) Standards for Insurance Denials. (Federal Government Affairs is the lead committee.)
9. Provide input to the State Legislative/Regulatory Committee to revise the Out-of-Network Consensus Principles and Proposed Solutions documents. (State Legislative/Regulatory is the lead committee.)