



July 6, 2020

Welcome to America's Physician Groups' "Healthcare on the Hill," where you can get the latest on healthcare happenings in our nation's capital--and with a special focus on the value-based care movement.

As our nation--and the world--continues to face the many challenge presented by COVID-19, we are working to ensure you have the very latest information on the virus and our rapidly changing healthcare landscape.

*Think someone else may enjoy "Healthcare on the Hill?" **Forward this email and have them click [here](#) to be added to our subscription list.** And remember, you can always visit our [website](#) for more news and resources.*

Valinda Rutledge
Senior Vice President of Federal Affairs
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APG Files Comments in Response to CMS's Second COVID-19 Interim Final Rule

Last week, APG filed [comments](#) to the Centers for Medicare and Medicaid Services (CMS) on the agency's second interim final rule outlining regulations in response to the COVID-19 Public Health Emergency (PHE). The rule offered policies addressing a variety of issues resulting from the pandemic. APG expressed its support for many of the new policies including allowing ACOs to extend their agreement period and allowing ACOs in the BASIC track to maintain their current level of participation. APG also outlined a host of recommendations in response to the rule including:

- Using a two-year look back period analyzing data from both 2019 and 2020 years in determining 2021 attribution
- Implementing the MSSP extreme and uncontrollable circumstance policy through December 2020
- Continuing reimbursement parity for audio-only telehealth after the PHE, where statutorily allowable

HHS Announces the Extension of PHE

In a [tweet](#) last week, the Department of Health and Human Services (HHS) Spokesman Michael Caputo announced that the agency expects to extend the public health emergency due to COVID-19 before its expiration on July 25. The PHE was previously extended for 90 days in advance of its expiration in late April. If the coming extension is for another 90-day period, that would extend the PHE into late October.

The extension will allow for the continuation of the recent flexibilities and regulations aimed at providing financial relief and stability for healthcare providers in the wake of the COVID-19 pandemic including:

- Expanding the list of services conducted by audio-only telephone between beneficiaries, their doctors, and other clinicians that are eligible for payment to include many behavioral health and patient education services
- Increasing payments for telephone visits to match payments for similar office and outpatient visits, retroactive to March 1, 2020
- Waiving the video requirement for certain telephone evaluation and management services and adding them to the list of Medicare telehealth services
- Payment for Medicare telehealth services provided by rural health clinics and federally qualified health clinics

CMMI Announces New Policy Changes to the Direct Contracting

Last week, the Center for Medicare and Medicaid Innovation (CMMI) announced two new policy changes to the current Direct Contracting (Professional and Global) Request for Applications (RFA). The current policies are:

- Standard Direct Contracting Entities (DCEs) are able to split and form a separate High Needs Population DCE (RFA – Page 53)
- A High Needs Population DCE that has high numbers of beneficiaries that can be used to construct a credible benchmark may or may not be allowed to (the RFA was unclear on this policy). (RFA – Page 53)

CMMI has implemented the following policy revisions:

- Standard DCEs **are not** allowed to split and form two separate DCEs – one High Needs DCE for their High Needs beneficiaries and one Standard DCE for their remaining beneficiaries
- High Needs DCEs that reach 3,000 claim-based aligned beneficiaries **can** convert to a Standard DCE for purposes of their benchmark, similar to New Entrant DCEs
- These High Needs DCEs will still have the flexibility to focus only on High Needs beneficiaries but their benchmark will incorporate a historical baseline component for claims-aligned beneficiaries

The revisions follow feedback to CMMI from various stakeholders. CMS will work with organizations that have applied as split entities to consolidate their application and plans under the Standard DCE option, including adding the providers submitted with the High Needs DCE to the Standard DCE submitted provider list. Applicants may also email the help desk at DPC@cms.hhs.gov if they have further questions. The application for performance year 1 closes today.

APG sent a [letter](#) to CMMI last week outlining our recommendations for strengthening the direct contracting model and will continue to advocate for and monitor developments surrounding direct contracting and other innovation models, keeping you up-to-date on any and all changes.

Upcoming Physician Fee Schedule Regulations Expected to Address Telehealth Proposals

The 2021 proposed Physician Fee Schedule rule is expected to be released by the Centers for Medicare and Medicaid Services (CMS) sometime in the coming weeks once it finishes the Office of Management and Budget's internal review process. Last week, an official with CMS' Division of Practitioner Service said that the proposed rule may move to make some of the recent telehealth provisions addressing the COVID-19 pandemic permanent. Despite some of the telehealth waivers requiring Congressional intervention, stakeholders and other interested parties have called on the Department of Health and Human Services to explore which could possibly be made permanent.

Senate Committee on Health, Education, Labor, and Pensions Chair Lamar Alexander (R-TN) has expressed his support for permanently eliminating the Medicare telehealth originating site requirement and expanding the types of providers that can be reimbursed for telehealth. Emily Yoder of CMS has stated the importance of stakeholder feedback in response to the proposed rule in offering the clinical perspective on telehealth, how to balance patient safety, and determining which provisions may remain.

APG Host Webinar "Racism: A Public Health Crisis in America"

The COVID-19 pandemic has exposed the health inequities toward communities of color in

our country. Additionally, the recent deaths of George Floyd, Breonna Taylor and Ahmaud Arbery have highlighted that racism is an urgent threat to our public health. The anguish of our communities has torn at the fabric of our society.

America's Physician Groups would like to invite you to an open, nonjudgmental dialogue on **Friday, July 17 at 2:00 pm ET** about racism in our country—and how we all have to elevate this public health concern to mission critical status to improve health, offer hope and advance healing for every patient. To do better as a society, we should learn together to build a healthier tomorrow.

[Register today](#) and hear from our expert panel including **Patrice A. Harris, MD, MA, Immediate Past President, American Medical Association, Marya T. Mtshali, Ph.D., Lecturer in Studies of Women, Gender and Sexuality Harvard University, and Osehotue Okojie, MD, Chairwoman DFW Healthcare Partners IPA, APG Member.**

[Register Now!](#)

Friday, July 17 at 2:00 pm ET / 11:00 am PT



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