Medicare Rule Changes and Medical SLP ISHA Programs

- **Reimbursement**
  - SLP and Audiology reimbursement rate reductions were reduced by 3.75% due the PHE (Public Health Emergency); however this rate is set to expire in 2022, which will affect 30+ Medicare provider groups.
  - These reimbursement reductions are to balance increases in reimbursement for office-based physicians for evaluation and management services (E/M).
  - ASHA is working with congress and CMS to mitigate these changes for 2022.
  - CMS uses an annual CF to calculate the Medicare Physician Fee Schedule (MPFS); CMS estimates that the CF will be $33.59, marking ~4% decrease from the $34.89 during 2021.
  - Regulatory Impact Analysis (RIA) of the 2022 proposal states that audiologists will see a decrease in payments and SLPs will see a 2% increase in 2022.
  - CMS has not factored in the temporary 3.75% increase into the proposal, resulting in potential, continuous SLP/Au.D. reimbursement without congressional intervention.

- **Telehealth**
  - 2021 MPFS final rule permanently expanded utilization of Communication Technology-Based Services to 30+ codes for SLP/Au.D. services.
  - Medicaid and private insurance are pulling back approval of telehealth services, and some are not including SLP/Au.D. services under covered telehealth for their new fiscal year.
  - ASHA is reaching out to various states’ Medicaid and private insurance companies to provide education regarding Medicare’s new telehealth covered services and the importance of healthcare access.
  - National, state, and individual insurance guidelines dictate coverage of telehealth services.
  - COVID’s affected on telehealth for Au.Ds/SLPs:
    - Before COVID
      - Au.Ds/SLPs could not be reimbursed for telehealth services.
      - Health and Human Services (HHS) placed authority restrictions on telehealth.
    - During COVID
      - Without changes in the law, Au.Ds/SLPs were added to telehealth services when physicians added these disciplines to care plans.
      - CARES act gave HHS authority to waive restrictions.
      - In May, CMS approved 4 Au.D. codes and 6 SLP codes, which did not reflect the breadth of services both disciplines provide.
    - After COVID (?)
      - CMS permits Au.Ds/SLPs to be reimbursed for telehealth services.
      - The PHE will most likely be extended through 2021- meaning new codes will continue to be reimbursed through the PHE.
      - ASHA is looking to protect and preserve access to telehealth post-COVID and post PHE.
• PDPM
  ○ The Office of Management and Budget (OMB) published a request for information (RFI) regarding PDPM, a Medicare payment model created and implemented in October 2019, which was meant to be redistributive/budget neutral.
  ○ SNFs:
    ■ PDPM data in rule with following numbers pertaining to OT/PT/ST services across the USA.
      ● Therapy provision dropped by ~30%; from 91 minutes to 62 minutes.
      ● SLP services did increase. Speech services are more lucrative, which is a factor CMS believes increased utilization is related to fraud, but can be related to policy choices rather than fraud.
      ● Group and concurrent treatment numbers increased; concurrent: 32%; group 29%; what does the increase mean and what does it mean that they’ve exceeded the limit of both types of tx
    ■ Despite COVID, SNFs made 5% more profit than when utilizing the RUGS payment model.
    ■ Medicare will be looking to collect the extra 5%, but not until 2022, and it may result in a reimbursement reduction across disciplines.
    ■ Due to a 5% increase with reduced treatment provided, audits may occur, strong documentation is warranted, and productivity standards may be negatively impacted.
    ■ No changes to quality metrics (e.g. falls, pressure ulcers, hospital admissions) were noted despite decrease in treatment minutes, COVID, and increase in group/concurrent treatment.

• ISHA Medical SLP Programs
  ○ Journal Club! First Journal is meeting on 09/29/2021 from 6-7 PM. We will be discussing Langmore, S. E., Terpenning, M. S., Schork, A., Chen, Y., Murray, J. T., Lopatin, D., & Loesche, W. J. (1998). Predictors of aspiration pneumonia: How important is dysphagia? Dysphagia, 13(2), 69-81. doi:10.1007/PL00009559. Save the date and more details to come!
  ○ Medical SLP Committee - ISHA is starting a committee to address issues Medical SLPs are facing, as well as looking for ways to advocate for our profession. More details to come!

Please feel free to reach out with any questions at ewandland@gmail.com. Thank you for the opportunity to serve the ISHA SLP community.