

American Society of Interventional Pain Physicians®

"The Voice of Interventional Pain Management"

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April 9, 2020

Honorable Secretary Alex Azar II
Secretary of HHS
U.S. Department of Health & Human Services
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Honorable Deputy Secretary Eric Hargan
Deputy Secretary of HHS
U.S. Department of Health & Human Services
200 Independence Avenue, S.W.
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Dear Honorable Secretary Azar and Deputy Secretary Hargan:

On behalf of the American Society of Interventional Pain Physicians (ASIPP), 50 state societies of interventional pain physicians, Society of Interventional Pain Management Surgery Centers (SIPMS), interventional pain management centers and pain physicians across the country, more importantly, millions of chronic pain patients, and finally the entire physician community and American public, we would like to commend your leadership on multiple issues.

First, concerning patient care and access to Medicare, Medicaid, and other governmental services, we admire the decision of President Trump, HHS, and CMS to make sweeping regulatory changes in reference to telehealth by allowing us to utilize phone only follow-up visits as if they were seen in the office using CPT codes 99211-99215. This has been a great help. However, this convenience and help, which is an extremely useful tool in fighting the coronavirus, has not been available to all Americans, especially those paying for private insurance premiums. We request that the Department of HHS and Administration require all commercial and private payers, HMOs, PPOs, and others, including all Managed Care Organizations, to add this feature to their coverage policies and provide coverage and payment for audio only telehealth visits with patients as visits, repayable at the same level as in-person visits, and extend this rule through August 6.

Next, one of our major concerns, which is extremely important not only to our membership, but all physicians and providers, is:

- ◆ The onerous audits and investigations by insurers even during COVID-19 epidemic and pandemic. Many of the companies funded by these insurers continue their onerous investigations and have no courtesy. In fact, some are even exacerbating their

investigations. They are following the dictum from Rahm Emanuel, “never let a crisis go to waste,” even in the middle of coronavirus pandemic.

Multiple physicians have concerns about these investigations in general. These do not include qualified and competent personnel doing the reviews. These reviewers do not follow any rules or regulations and they do not follow their own written clarifications. Their decisions are inconsistent with own decisions, often in the same cases, they do not provide us with opportunity for rebuttals, the insurer blindly follows and starts punishing the providers resulting in extensive increases in costs with reduced quality and access.

These audits are probably responsible for the majority of the burnout in physicians. As it is, it has been shown that pain physicians have burnout approximately 50-60%. Now that has increased to 95% with COVID-19 pandemic, along with increased risk of managing chronic pain patients, who also suffer with increased risk of coronavirus infection secondary to chronic pain itself, which reduces the immunity, multiple comorbidities, age, and comorbid drug therapy.

Consequently, we request you to require all insurers, audit organizations, and quality improvement organizations to suspend investigations for 3 months until physicians can stand on their own feet and start to be able to practice again. At this time, these audits and their insults are only adding fuel to the fire. Overall, even after the pandemic is completed, it appears that they may have to be regulated, either through executive orders or congressional action.

The above steps, combined with numerous other measures to make care affordable for patients at risk of COVID-19, are essential to slowing the spread of the virus and to treat them appropriately when they are infected. Please support physicians and other providers as we honor our sacred obligations to provide care to patients in need, including doing no harm to patients by eliminating elective visits and procedures to minimize patient exposure to the virus.

Thank you again. If you have any questions, please feel free to contact us.

Laxmaiah Manchikanti, MD

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