

April 1, 2022: Advocacy Update other news

Submit your vaccine administration claims for reimbursement by the April 5, 2022 deadline

The COVID-19 Coverage Assistance Fund which reimburses for the claims for testing, treatment and vaccine administration is running out and the deadline to submit for vaccine administration claims is quickly approaching. Claims will be accepted through April 5, 2022, at 11:59 p.m. via the COVID-19 CAF portal. Claims submitted to the portal after the April 5, 2022, deadline will not be adjudicated. The Health Resources and Services Administration (HRSA) notes that claims submitted by the deadline will be paid subject to their eligibility and the availability of funds. The AMA has urged Congress (PDF) to appropriate more money to support the COVID-19 efforts.

The dedicated Coverage Assistance Fund customer support may be reached at 833-967-0770 (TTY number 888-970-2920) Monday through Friday from 8:00 a.m.–8:00 p.m. Eastern or at cafsupport@ssigroup.com.

Upcoming webinars on the overdose epidemic and out-of-network payment process

As part of its Advocacy Insights webinar series, the AMA is hosting two webinars on April 5 and April 21.

Most descriptions of the nation's worsening drug-related overdose epidemic highlight the more than 100,000 individuals who have died in the past year. Broad solutions supported by the AMA and many others point to the need to remove all barriers to medications to treat opioid use disorder, enforce mental health and substance use disorder parity laws, and greatly increase access to harm reduction efforts such as fentanyl test strips and naloxone. Within the tragic mortality figures, however, are unique effects of the epidemic on children and adolescents, historically marginalized and minoritized individuals, and patients with pain. "The nation's drug overdose epidemic: Helping children and families, patients with pain," will take place on April 5, at 1 p.m. Central, and will look closely at each of these areas from the perspectives of physicians who provide care to these patient populations.

Register now.

“Out-of-network payment process under the No Surprises Act,” will occur on April 21, at 11:30 a.m. Central, and will follow up on the AMA’s January webinar on the No Surprises Act. Speakers will focus on the payment process for physicians and other providers in surprise medical billing situations and discuss provisions of the NSA, such as the initial payment, open negotiations period and Independent Dispute Resolution process. Register now.

Potential cyberattack fact sheet

In a recent brief, the Biden-Harris administration urged the nation’s critical infrastructure, including health care organizations, to harden cyber defenses to prepare for potential Russian cyberattacks. “Based on evolving intelligence” the brief states “the Russian Government is exploring options for potential cyberattacks.” Organizations are advised to mandate multi-factor authentication, protect against known vulnerabilities, back up and encrypt data, and drill emergency plans to prepare for cyberattacks. Organizations are also encouraged to engage proactively with their local FBI field office or CISA regional office to establish relationships in advance of any cyber incidents.

For instance, your organization's information technology and security professionals should visit the websites of CISA and the FBI where they will find technical information and other useful resources to help strengthen your medical practice's cybersecurity. The AMA has compiled several resources and examples of cybersecurity best practices to support your medical practice. Find more additional information.

Gender differences in time spent on documentation and the electronic health record in a large ambulatory network

A new cross-sectional study published in JAMA Network Open shows that female physicians spend more time on electronic health records (EHR) than male physicians, providing a potential explanation for the gender gap in burnout. “Gender Differences in Time Spent on Documentation and the Electronic Health Record: A Cross-Sectional Study of Physicians in a Large Ambulatory Network,” which was supported by the American Medical Association, indicates that clinical documentation is the primary activity driving gender differences in EHR time. These findings suggest that women physicians, in particular, may benefit from policy changes, teamwork and workflow improvements, and technologies that reduce documentation burnout.

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