

June 10, 2022



## CRA Membership E-blast

Hello {First Name},

The California Rheumatology Alliance remains dedicated to providing updated news and resources to our membership. We appreciate and encourage any feedback to assist in our service to our members. What do YOU want us to talk about? We'd love for these newsletters to be used as an opportunity for us all to learn from each other, so if there's anything specific you're interested in learning more about from other people involved with the California Rheumatology Alliance, let us know by emailing [info@calrheum.org](mailto:info@calrheum.org).

[Visit our Website](#)

## UPDATE: Nationwide Pause on Downcoding

The CRA sent an e-blast last week sharing the efforts of the Coalition of State Rheumatology Organizations (CSRO) and their ongoing conversations with the Centers for Medicare and Medicaid Services (CMS). These conversations resulted in an announcement on June 10, 2022 that CMS has given "technical direction" to its Medicare Administrative Contractors (MACs) across the country to **stop sending additional documentation requests (ADR) after June 10, 2022**, when physician practices submit claims for chemotherapy administration services for the following drugs:

- **Cimzia® (J0717)**
- **Orencia® (J0129)**
- **Simponi Aria® (J1602)**
- **Stelara® (J3358)**
- **Prolia® (J0897)**

CSRO has been working with the Center for Program Integrity (CPI) at CMS on the complex vs therapeutic coding and billing issue following the announcement.

According to CPI, their technical direction would avoid the downcoding and allow claims for the chemotherapy administration codes to be processed while CSRO gathered the needed information to justify the complex coding of the above drugs.

However, CSRO has received numerous reports from practices around the country that their claims at the chemotherapy coding have been denied by their MAC.

**CMS (CPI) had been made aware that, despite its technical direction, the MACs continue to reject claims when the complex administration codes are submitted with the five drugs. CSRO continues to engage with CMS Headquarters to resolve this issue and will provide additional information once it is known.**

*Until then, practices should bill the code they think is appropriate* - If billing at the chemotherapy administration services codes and ADR letters are received, please notify CSRO at [info@csro.info](mailto:info@csro.info), as we are tracking these instances and will support practices in obtaining overrides.

## LEGISLATIVE UPDATE

### What is new in CRA advocacy:

We are getting to the end of the two-year session. The Legislature will leave Sacramento for the month of July for their Summer recess and return on August 1<sup>st</sup> for the final month of session. When they return bills will need to go through the Appropriations Committees to review their fiscal impact on the state. After Appropriations, all bills will need to pass out of the Legislature by August 31<sup>st</sup>.

Looking at bills CRA has been active on, we are co-sponsoring follow up legislation to AB 347 from last year to try and push through improvements to the step therapy and prior authorization processes that were taken out of AB 347. This bill is [AB 1880 \(Arambula\)](#) and contains the more controversial parts of AB 347 which should provide a challenging battle for us this year. These include

- Requiring health plans to use a clinical peer where someone of the same or similar specialty is reviewing the appeal of a step therapy exception request or prior authorization request (ex. a rheumatologist is reviewing a rheumatologist and an oncologists is reviewing an oncologist)
- Requiring reporting by health plans on their utilization management practices (such as how many prior authorization and step therapy requests they deny and approve each plan year)

**Status – Passed the Senate Health Committee and is in Senate Appropriations Committee**

\*\*\*\*\*

#### **SB 958 (Limon) – CRA Position – Support**

This bill addresses three growing areas of concerns as it relates to in-office injections:

- “White bagging” where payers are requiring patients to obtain their medications from a pharmacy specified by the payer and the medications are then sent to the physician for injection/infusion,
- “Brown bagging” where payers require patients to obtain their medications directly from a pharmacy and the patient brings them to the physician’s office for injection/infusion, and
- The growing trend where payers are requiring patients to have their medications injected/infusion at home.

SB 958 would make it more difficult for payers require patients to be subjected to the three situations described above.

**Status - This bill was not heard in the Assembly Health Committee so it is dead for this year**

\*\*\*\*\*

#### **SB 853 (Wiener) – CRA Position – Support**

This bill, sponsored by the Crohn’s & Colitis Foundation, requires health plans and insurers to cover denied medications, including the prescribed dose, for the duration of an appeals process. This bill also strengthens California’s prohibition on non-medical switching by applying that same prohibition to a prescribed dose or dose level of a drug. SB 853 continues our work to better ensure patients who are stable on their medications can stay on their medications.

**Status - This bill passed the Assembly Health Committee and is now in the Assembly Appropriations Committee**

\*\*\*\*\*

#### **AB 2352 (Nazarian) – CRA Position – Support**

The California Chronic Care Coalition, which CRA is a member, is sponsoring this bill to require health plans to provide patients and physicians, upon consent from the patient, access to a “real time benefit tool” that will assist the patient in understanding the cost to acquire the needed medication which will improve a patient’s ability to begin therapy without delay. CRA was asked to be one of two primary witnesses to testify in support of the bill at the Assembly Health Committee hearing on March 29<sup>th</sup>. The bill passed the Health Committee and is now headed to the Assembly Appropriations Committee.

**Status - This bill passed the Senate Health Committee and is now in the Senate Appropriations Committee**

The CRA advocacy team is excited for what lies ahead in 2022. If you would like to get involved in advocacy whether it be learning more about the bills, contacting your local legislator on important advocacy issues, or even testifying on bills being considered, please contact Tim Madden at [madden@mqadvocacy.com](mailto:madden@mqadvocacy.com)

## CORPORATE MEMBERS

### DIAMOND MEMBERS



abbvie



SANOFI GENZYME 



---

PLATINUM MEMBERS



---

GOLD MEMBERS



---

California Rheumatology Alliance | 5230 Pacific Concourse Drive, Suite 100, Los Angeles, CA  
90045

[Unsubscribe info@calrheum.org](mailto:info@calrheum.org)

[Update Profile](#) | [Constant Contact Data  
Notice](#)

Sent by [info@calrheum.org](mailto:info@calrheum.org) powered by



Try email marketing for free today!