2020 Legislative Activities

AAAAI Virtual Advocacy Day
On June 3, AAAAI members joined the Board of Directors, the Office of Practice Management, and the Advocacy Committee to urge federal lawmakers to expand access to telemedicine beyond the pandemic; to enact H.R. 2468, the School-Based Allergies and Asthma Management Program Act; and, to increase food allergy research funding during the AAAAI’s first-ever Virtual Advocacy Day. In support of these issues, a video from AAAAI President Mary Beth Fasano, MD, MSPH, FAAAAI was distributed to every member of Congress, and email templates made it easy for AAAAI members and leaders to contact their own federal lawmakers. Social media messaging from the AAAAI and members across the country built excitement for the day and for our issues with more than 325,000 social media impressions in one day, including more than 77 hashtag tweets.

AAAAI COVID-19 Task Force Advocacy
The AAAAI achieved U.S. Department of Health and Human Services (HHS) extension of application deadlines for CARES Act Provider Relief funds for physicians who received insufficient relief based on small Medicare patient populations. The AAAAI also urged Congress to:
- Make permanent new telehealth flexibilities provided by the Center for Medicare and Medicaid Services (CMS), and further requested the same of private payers, nationwide, in written correspondence;
- Alter the tax treatment of funds provided under the CARES Act Provider Relief Fund (PRF) and loan forgiveness under the Paycheck Protection Program (PPP).

H.R. 2468, the School-Based Allergies and Asthma Management Program Act
On January 5, 2021, H.R. 2468, the School-Based Allergies and Asthma Management Program Act became law to enhance the safety of students with allergies and asthma in the school setting. This budget-neutral law requires that the Department of Health and Human Services (HHS) award grants first to those states that have a school nurse or other trained personnel on premises who is aware of and ready to assist students in the school with allergies and asthma, and that those students have individualized action plans on file. First introduced in support of the AAAAI’s SA3MPRO™ program by Majority Leader Steny Hoyer (D-MD) and Representative Phil Roe, MD (R-TN), the signing of this bill is result of tremendous effort by many dedicated physician and patient advocates.

Food Allergy Research
The AAAAI continued its longstanding priority of increasing food allergy research in the 116th Congress. A Congressional briefing in 2019, co-hosted by the AAAAI with Representative Khanna (D-CA) and Representative Phil Roe, MD (R-TN), and coupled with AAAAI member Hill visits and collaborative efforts with other organizations, led to increased federal funding for food allergy research in 2020. The National Institute of Allergy and Infectious Disease received an additional $362 million, with House Committee Report language directing “further investment” in the Consortium of Food Allergy Research (CoFAR). The Department of Defense (DOD) Peer Reviewed Medical Research Program (CDMRP) also received a $10 million boost to its Fiscal Year 2020 program budget, reinstated food allergy as a covered condition, and received additional increased funding in Fiscal Year 2021.

In support of its mission to advance the knowledge and practice of allergy, asthma and immunology for optimal patient care, the AAAAI works constantly to create effective advocacy on issues impacting our members, the specialty, and its patients.
Penicillin Allergy Testing as One Component of Antibiotic Stewardship

The AAAAI continued its leadership in promoting penicillin allergy testing as a public health measure to combat antimicrobial resistance.

- February 27, David Khan, MD FAAAAI, presented before the Presidential Advisory Council on Combating Antibiotic-Resistant Bacteria on the important role penicillin allergy testing can play in antibiotic stewardship and antimicrobial resistance.
- April 8, with the Stakeholders Forum on Antimicrobial Resistance, the AAAAI wrote to the Centers for Disease Control and Prevention (CDC) to urge increased antibiotic stewardship surveillance and to the Biomedical Advanced Research on Development Authority (BARDA) to request additional support for antibiotic research and development.
- April 15, the AAAAI wrote to the Food and Drug Administration (FDA) encouraging use of some COVID-19 emergency supplemental funding to further advance penicillin allergy testing as an important component of antibiotic stewardship.
- September 9, the AAAAI was joined by the Infectious Diseases Society of America (IDSA) to write CMS to urge that it require U.S. hospitals to include verification of penicillin allergy in antibiotic stewardship programs required under Medicare Conditions of Participation.
- National Penicillin Allergy Day emails were sent to more than 700 Congressional staff to complement member and social media outreach on September 28, in addition to social media and member outreach.

Advocacy in Collaboration with the American Medical Association

The AAAAI consistently engages with the AMA to support a broad range of issues including personal protective equipment (PPE) supplies, telemedicine expansion, practice financial support, the Medicare Advanced Payment Program, Medicare and Medicaid reimbursement rates, support for resident physicians and students, hazard pay in the pandemic, Emergency Medical Treatment and Labor Act (EMTALA) concerns, liability protections for physicians, and support for broad health insurance access.

2020 Cooperative Advocacy Partners:
- Coalition to Advance Maternal Therapeutics
- Asthma and Allergy Foundation of America
- Allergy & Asthma Network
- American College of Allergy, Asthma & Immunology
- American College of Physicians
- American Partnership for Eosinophilic Disorders
- The Cognitive Specialties Coalition
- Campaign Urging Research in Eosinophilic Disorders
- Congressional Childhood Asthma Leadership Coalition
- FARE: Food Allergy Research and Education
- Food Allergy & Anaphylaxis Connection Team
- I-FPIES
- Immune Deficiency Foundation
- Medical Society Consortium on Climate and Health
- The Mast Cell Disease Society, Inc.
- US Hereditary Angioedema Association
- Trust for America’s Health
- Friends of AHRQ

Regulatory Activities

Physician Reimbursement

In early January, 2021, the Centers for Medicare and Medicaid Services (CMS) released its updated Addendum B Schedule for the 2021 Physician Fee Schedule (PFS), revised its conversion factor to $34.89 and delayed implementation of the complexity add-on code G2211 for three years. It retained earlier provisions for telehealth, flexibilities for clinician supervision of staff, and reimbursement for Evaluation and Management (E/M) codes. The AAAAI provided feedback to CMS on the proposed rule and also submitted comments following the final rule. Overall, the AMA estimates that the financial impact of these changes is estimated to be an increase of +10% for allergy/immunology.

Quality Payment Program

CMS approved The AAAAI Registry as a Qualified Clinical Data Registry for the Merit-based Incentive Payment System (MIPS) under the CMS Quality Payment Program for 2021. In response to updates to its Quality Payment Program, the AAAAI:
- Urged CMS to retain multiple specialty measures in the AAAAI QCDR;
- Opposed the CMS proposal to increase the overall MIPS performance threshold in 2021.

Drug Pricing/Drug Shortages Update

Engaged in drug pricing policy discussions, the AAAAI submitted feedback on an interim final rule on the Trump Administration’s Most Favored Nation (MFN) Model expressing concerns for physician practices’ ability to sustain patient treatment under the model. Subsequently two federal judges have blocked its implementation.

Diversity and Inclusion

Advocacy leadership have reached out to the AAAAI Committee on the Underserved to collaborate to address healthcare disparities in the specialty through our advocacy activities. The AAAAI has urged leadership of the House of Representatives to study healthcare disparities and inequities demonstrated and exacerbated by the pandemic.