



College Advantage

A Publication of the American College of Allergy, Asthma & Immunology

ACAAI.ORG

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Accurate coding for maximum payments

The College's top-notch coding education, information and resources are essential for your practice's reimbursement and quality patient care.

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American College of Allergy, Asthma & Immunology



Gailen D. Marshall, Jr., MD, PhD, FAAAAI, President, American College of Allergy, Asthma and Immunology

Summer is upon us! It is hard to believe that 2024 is almost half completed. I have been your ACAAI president for a little over six months now, and I continue to be impressed with how this incredible organization works on a day-to-day basis to make the College and, by extension, our individual members, specialty and patients stronger and more effective.

ACAAI's internal activities make the College stronger, and external efforts affect us as practicing allergists-immunologists (whether community-based or academic), the health of our specialty and the welfare of our patients.

Internally, education is the linchpin of College activities. A prime example is our fun and valuable Annual Scientific Meeting, packed with cutting-edge Podium-to-Practice® information that ultimately makes us better clinicians, researchers and educators. Plan to attend our meeting in Boston this Oct. 25-28, with the theme "Advancing Allergy/Immunology Discovery." Don't forget Thursday's all-day session on asthma on Oct. 24. I think this will be our best meeting yet. See page six for Annual Meeting highlights.

Other educational opportunities are offered through the College Learning Connection (education.acaaai.org). This member benefit offers a large and ever-evolving collection of CME and non-CME educational activities and modules.

You can find pragmatic education for your office in the Practice Management Center (college.acaaai.org/practice-management/). It's our one-stop-shop for tools and resources to help make your practice as successful as possible. Start with our practice assessment quiz to evaluate your strategies and policies, and get recommended College resources based on your quiz results.

The College fully engages in external outreach as well, reaching the public through programs such as Allergy and Asthma Awareness Month, our Marketing Toolkit for members, our popular patient website (ACAAI.org), and frequent news releases resulting in thousands of mentions each year for the College and our experts.

One of the most important external activities we do is advocacy for our members, specialty and patients through the Advocacy Council (college.acaaai.org/advocacy/) led by Dr. Allen Meadows, Executive Director of Advocacy and Government Affairs, Dr. Travis Miller, Chair, and Dr. Wes Sublett, Vice Chair. The Council functions as the leading national advocacy voice for the College and our entire specialty to patient groups, payers, governmental regulators and policy makers. They seek to influence policy and practice and, if necessary, fight directly for our interests.

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Connect with us at acaai.org or through:



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COMMUNITY ADVANTAGE (CONTINUED)

Recently, I was pleased to participate with Advocacy Council leadership in ACAAI's annual Strike Force visit to Washington, DC. We met with officials from HHS and other relevant agencies and committees as well as our own local representatives in Congress to advocate for our specialty and patients on important issues. We asked for laws/policies that ensure access to affordable inhalers for our patients; strongly supported the No Fees for EFTs Act; and provided solid economic rationale for avoiding any further Medicare cuts. We teamed up with patient advocates from the Allergy & Asthma Network on many of the visits. I was gratified to see that we were very well received by our national leaders. I look forward to seeing the positive results of our efforts.

I commend the massive efforts of our member volunteers who make all the things I described above happen for all of us. I know there are many of you who are interested in volunteering or who would like to do more. I encourage you to get more involved. If you do not know where to go or whom to contact to volunteer, reach out directly to me (gmarshall@umc.edu). I will get you to the right people in order to get you plugged in.



Your practice can save money and adopt environmental sustainability with My Green Doctor's easy-to-use program.



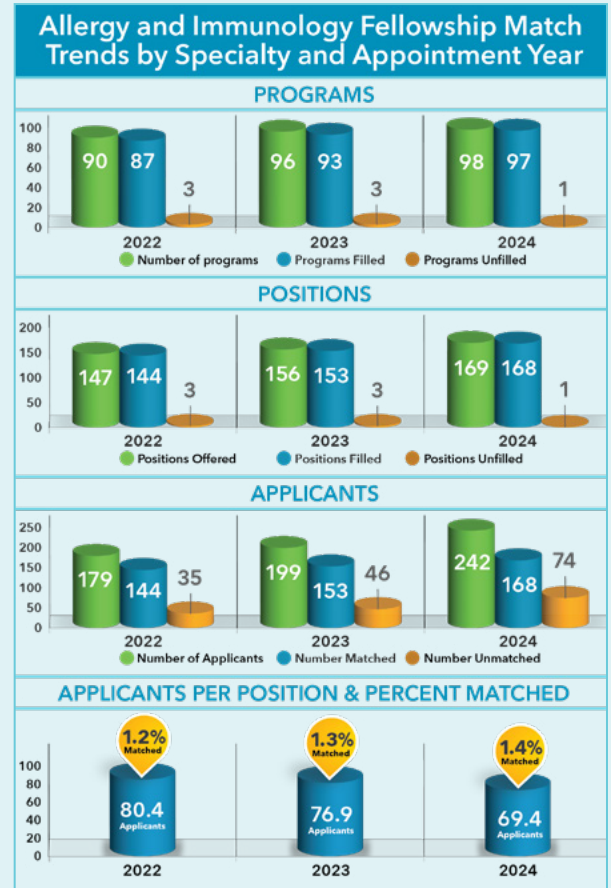
ACAAI is a partner in the program. College members can participate for free! Visit mygreendoctor.org for more information.

COMMUNITY ADVANTAGE

Trending upward

The number of fellowship applicants for allergy/immunology increased significantly in 2024.

The latest data from the National Resident Matching Program demonstrate that allergy/immunology is a sought-after specialty, showing continued positive growth heading into the 2024 fellowship year.



Data is from the National Resident Matching Program

The number of applicants for the specialty increased significantly - from 199 (for the 2023 fellowship year) to 242 for 2024.

The number of available A/I training positions increased nearly 9% from 156 to 169. Of those, 168 were filled through the match. This continues an upward trend over the last several years.

Another positive sign is the establishment of three new fellowship programs in the past year; those are at University of Chicago Medical Center, University of Nebraska Medical Center, and Oregon Health Sciences University Hospital. (Two of these programs were included in the match activities that occurred in October - December 2023.)

These numbers are encouraging, as the need for allergy and asthma specialists is likely to increase in the future.



ADVOCACY ADVANTAGE

By J. Allen Meadows, MD, FAAAAI, Executive Director, Advocacy and Governmental Affairs



J. Allen Meadows, MD, FAAAAI

The College's Advocacy Council – working overtime for you

The ACAAI Advocacy Council has been working overtime for College members this year on issues that are important to practicing allergists.

Drug Costs

Inhalers

The staff for the Senate HELP Committee met with College representatives to get information on asthma inhaler use and prices. They were looking for:

1. General information about different inhaler products for asthma, their cost, what they treat, how they are prescribed for different patients, etc.
2. The benefits of inhalers to patients - e.g., keeping them out of the E.D., quality of life, etc.

3. Information about barriers related to access, cost, reimbursement, and coverage.
4. Details on how these barriers impact patients and whether they impact specific populations.

HELP Committee members were appreciative of the information the College leaders provided. The Advocacy Council intends to continue building that relationship and to be an ongoing resource to the Committee on a range of health issues in the future.

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ADVOCACY ADVANTAGE (CONTINUED)

In addition, the Senate HELP Committee Chair Bernie Sanders (D-VT) sent letters to leading inhaler manufacturers asking to know why the costs of their products are so high when the same products are sold in other countries for much less.

Senator Ben Ray Lujan (D-NM) supports the Senate HELP Committee's bill. College representatives met with his senior staff person to provide information on the high costs of inhalers; how they affect treatment outcomes; and how replacement medications are not always comparable.

Epinephrine

The Senate Commerce, Science, and Transportation Committee adopted Senator Tammy Duckworth's (D-IL) amendment requiring the FAA to regularly update emergency medical kits (EMKs) on airplanes. The goal is for these reviews to lead to user-friendly epinephrine delivery products for anaphylaxis being added to the EMKs.

MVP Pulmonary Care Summary

CMS is replacing MIPS with a new program called MIPS Value Pathways (MVP), which is intended to focus on measures and activities that are more meaningful to a clinician's specialty. Late last year, CMS publicly released draft candidates for the 2025 MIPS Value Pathway, including the proposed Pulmonary Care MVP¹. The following are key takeaways from the proposed MVP:

- The proposed MVP does not provide adequate reporting options for allergists. In a joint ACAAI/AAAAI comment letter² to CMS last fall, we requested the addition of two quality measures to the Pulmonary Care MVP to address the lack of sufficient reporting options for allergists. CMS rejected both proposed measures, even though these same measures are included in several other specialty MVPs.
- Large practices (> 15 clinicians) will be required to report four of the following quality measures from the MVP. However, two of these measures (Q487 and Q047) do not apply to many allergy practices and may require practice workflow changes to implement.
 - **Q398:** Optimal Asthma Control – Composite measure of the percentage of pediatric and adult patients whose asthma is well-controlled as demonstrated by one of three age-appropriate patient-reported outcome tools and not at risk for exacerbation.
 - **Q128:** Preventive Care and Screening – Body Mass Index (BMI) Screening and Follow-Up Plan - Percentage of patients aged 18 years and older with a BMI

documented during the current encounter or within the previous 12 months AND who had a follow-up plan documented if most recent BMI was outside of normal parameters.

- **Q226:** Preventive Care and Screening – Tobacco Use: Screening and Cessation Intervention – Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within the measurement period AND who received tobacco cessation intervention during the measurement period or in the six months before the measurement period if identified as a tobacco user.
- **Q487:** Screening for Social Drivers of Health – Percentage of patients 18 years and older screened for food insecurity, housing instability, transportation needs, utility difficulties, and interpersonal safety.
- **Q047:** Advance Care Plan – Percentage of patients aged 65 years and older who have an advance care plan or surrogate decision-maker documented in the medical record or documentation in the medical record that an advance care plan was discussed but the patient did not wish or was not able to name a surrogate decision-maker or provide an advance care plan.

ACAAI and other health care organizations have submitted comments on several iterations of the Pulmonary Care MVP, beginning in February 2023.

After CMS publicly released its final draft of the MVP last December, the ACAAI/AAAAI joint comment letter reflected the fact that we are disappointed with the proposed MVP and do not believe it is a viable reporting option for allergists. We recommended the inclusion of three additional quality measures to remedy this issue. Barring this change, we requested CMS develop a separate, allergy-specific MVP that is meaningful to allergists.

If CMS moves forward with the current version of the Pulmonology Care MVP, we plan to urge CMS to consider developing an allergy-specific MVP.

The Advocacy Council - ADVOCATING FOR ALLERGISTS AND THEIR PATIENTS.

¹ college.acaaai.org/wp-content/uploads/2023/12/6_Pulmonology-Care-MVP.pdf.

² college.acaaai.org/wp-content/uploads/2023/12/7_ACAAI-AAAAI-Comments-re-Revised-Pulmonology-MVP-100623.pdf



ANNUAL SCIENTIFIC MEETING ADVANTAGE

More in 2024!

The ACAAI 2024 Annual Scientific Meeting - you'll get more in 2024

The ACAAI 2024 Annual Scientific Meeting will be a meeting of "more!" Plan to attend Oct. 24-28 in Boston. You'll get everything you're looking for in a meeting, plus more - science, networking, Podium to Practice® takeaways, and ways to improve patient care. Join us as we Advance Allergy/ Immunology Discovery this fall.

We're planning a meeting that will exceed your expectations! Here are just a few highlights:

- **A day dedicated to asthma** - our all-day Thursday program will explore the full spectrum of asthma diagnostics and management from world-renowned experts.

- **Sessions that address the changing landscape of allergy/immunology** - artificial intelligence in health care, biologics, immune disorders, skin conditions and more.

“

I was highly impressed by the collection of curated knowledge and the faculty/colleagues who made this possible.

- 2023 Annual Meeting attendee

”

ANNUAL SCIENTIFIC MEETING ADVANTAGE (CONTINUED)

- **Pragmatic practice management advice** - solutions to issues your team encounters every day, plus information on “what if” situations that you need to be ready for.
- **Literature Review** - Get updated on the latest clinical developments. Our Literature Review covers research published November 2023 through September 2024.
- **Workshops** - Hands-on instruction from allergy/immunology experts.
- **Programs for your team** - The Advanced Practice/Allied Health Professionals Program and the Practice Management Program are powerhouses of information vital to providing allergy and asthma care and running an efficient practice.
- **Scientific discovery** - stay on top of the latest research through ePosters, oral abstracts and late-breaking abstracts.
- **Energizing conversations** - our meeting is the best opportunity to network and catch up with more than 2,000 allergy/immunology professionals.

“

It was a great and practical meeting that really has provided very useful information to my daily practice.

- 2023 Annual Meeting attendee

”

The ACAAI meeting is known for its practical information that attendees can immediately apply to individual patient care decisions. Plan to join your friends and colleagues for the ACAAI 2024 Annual Meeting! The educational event of the year will give you more in 2024! Registration will open this summer.

Oct. 24: A full day of asthma

Our Thursday program during the 2024 Annual Scientific Meeting explores the diagnosis and management of asthma.

Spend a full day learning about the latest developments in asthma care. Our stand-out Thursday program, during the 2024 Annual Scientific Meeting, explores the diagnosis and management of asthma. World-renowned speakers will deliver the latest information.

When you make plans to attend the Annual Meeting, make sure they include the Thursday program!

“Thursday’s program starts with how best to utilize current asthma diagnostic strategies,” said 2024 Annual Meeting Program Chair Jay Lieberman, MD, FAAAAI. “Later sessions explore novel ways to best treat both the adult and pediatric patient with asthma.”

The lunch presentation will examine the latest practice parameter on severe asthma. The day will continue with

afternoon sessions on asthma management, including how to individualize patient therapies across ages and ethnicities, defining asthma remission and more.

End the day with our fun and spirited ProCon debates and hear A/I experts answer the questions *Should biologics actually be used as first line therapies?* and *If you had to choose only one diagnostic test, which one would it be?*



Sign up for the Thursday program when you register for the ACAAI 2024 Annual Meeting, Oct. 24-28, in Boston. Registration will open this summer.

We're seeking dynamic research and unique medically challenging cases

Submit your abstract for the ACAAI 2024 Annual Scientific Meeting

Submit your compelling Scientific Research Abstract or Medically Challenging Case for presentation at the ACAAI 2024 Annual Scientific Meeting, Oct. 24-28 in Boston.

The abstract submission site is open and the deadlines are:

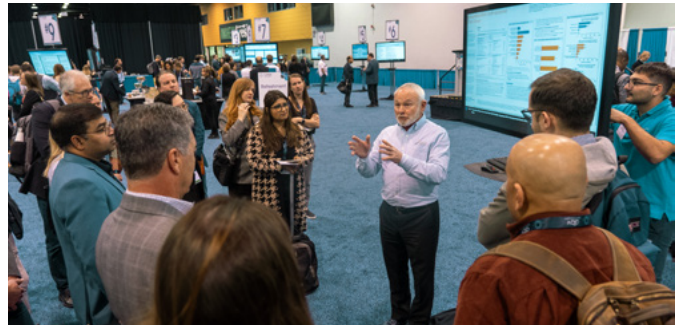
- Scientific Research Abstracts: **July 8, 2024**, 5:00 pm CDT.
- Medically Challenging Cases: **Aug. 1, 2024**, 5:00 pm CDT.

Late-breaking Abstracts are returning in 2024! If you have innovative research results that weren't available by the regular abstract deadline, you may qualify to submit your results as a Late-breaking Abstract. This special category of abstracts must feature the latest information on clinical research. Submit between **Aug. 26 - Sept. 25, 2024**, 5:00 pm CDT. *A maximum of six abstracts will be accepted.*

Submit your abstract online at annualmeeting.acaai.org/2024/submit_abstract.cfm.

More details:

- There is a \$60 fee for each Research Abstract and Medically Challenging Case submitted. The fee for submitting Late-breaking Abstracts is \$250.



- All abstracts accepted for oral or ePoster presentation at the ACAAI 2024 Annual Scientific Meeting **must be presented in person.**
- ACAAI only accepts original abstracts.
- Abstracts selected for oral and poster presentations will be published in an online October supplement to the *Annals of Allergy, Asthma & Immunology*.
- FITs who submit a Research Abstract may apply for a Clemens von Pirquet award. Visit annualmeeting.acaai.org/2024/submit_abstract.cfm for more details.

Nominate a FIT for research

The ACAAI *Annals* Fellows-In-Training Award recognizes the best article published by a FIT.

The ACAAI *Annals* Fellows-In-Training Award Program, established in 2022, will continue this year. FITs who publish the best article (original research or review) in *Annals* will receive a cash award of up to \$2,500. Multiple winners are possible. Program Directors, please let your FITs know about this award and consider nominating a worthy FIT.

The specific rules of this award are:

1. The FIT must be the first or senior author on the paper.
2. The FIT must have been in fellowship training at the time of the original submission of the paper.

3. The paper must appear in a print edition of *Annals* between July 1, 2023, and June 30, 2024. Papers that appear online but not yet in print are not eligible (they will be eligible for future year award cycles).
4. The FIT must be nominated to be considered for the award.
5. The FIT must be a member of the American College of Allergy, Asthma & Immunology.

ANNUAL SCIENTIFIC MEETING ADVANTAGE

FITs – Apply for Annual Meeting awards and scholarships



Fellows-in-Training (FITs): Be recognized for your outstanding research and apply for a FIT scholarship to attend the 2024 Annual Scientific Meeting, Oct. 24-28 in Boston!

Clemens von Pirquet Awards - Up to three FITs will be recognized for the best research abstracts on any aspect of allergy/immunology or related fields. To be considered, you must indicate that you wish to apply for a Clemens von Pirquet Award on the abstract submission site. Information on the criteria and application requirements are available at annualmeeting.acaai.org/2024/submit_abstract.cfm.

Applications and materials must be received by **July 8, 2024 at 5:00 pm CDT**.

The Abstract Review Committee selects the award-winning abstracts. Award winners present their research during educational sessions in the general meeting. Winners will receive cash awards from \$1,000 to \$2,500 and are also eligible for a scholarship to attend the Annual Meeting. Questions? Contact education@acaai.org.

FIT scholarships - The College provides scholarships to FITs in North American accredited training programs to attend the Annual Meeting. FITs who have completed their fellowship in 2024 are still eligible for these scholarships. The application, due by **Aug. 23, 2024**, is available at annualmeeting.acaai.org/2024/submit_abstract.cfm. For more information, contact Karla Kaschub, Director of Membership, at karlakaschub@acaai.org.

International FIT Travel Scholarship - The Allergists' Foundation is offering travel scholarships for up to two international Fellows-in-Training with an accepted research abstract to attend the College's 2024 Annual Scientific Meeting, October 24-28, in Boston. Research Abstracts must be fully submitted by the **July 8, 2024** deadline to apply. Find the application at annualmeeting.acaai.org/2024/document/ACAAI_IntlFITscholarshipApp_24.pdf.

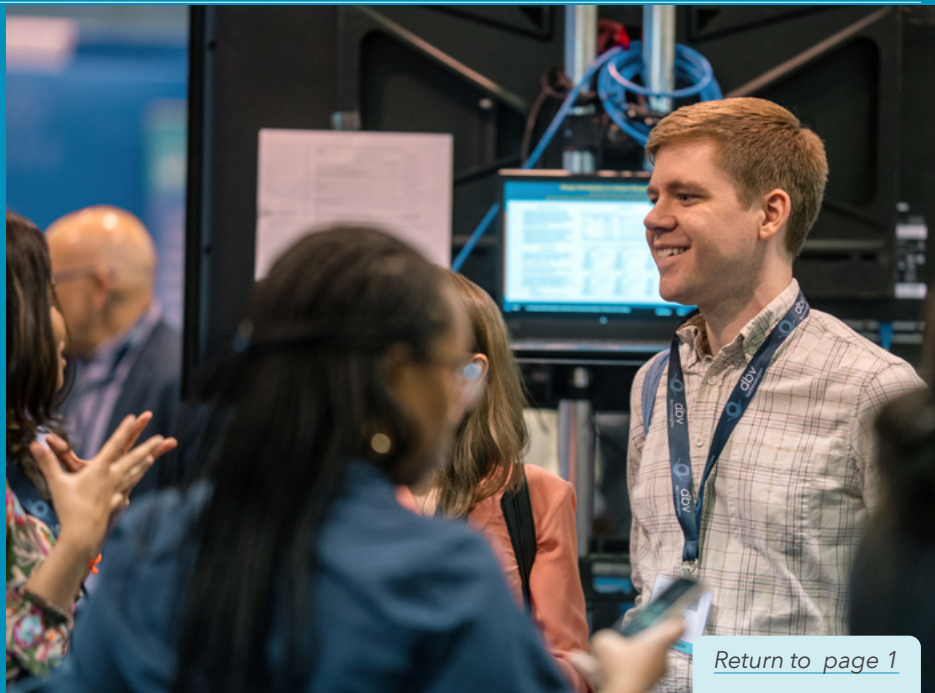
Ready to nominate a FIT?

Send an email to annals@acaai.org and include the following information:

- Nominee's name
- Full publication reference
- Statement of the FIT's role in the work
- Nominator's name and contact information

Nominations must be received by Aug. 15, 2024 to be considered for this year's awards.

If you have any questions, please email the *Annals* editorial office at annals@acaai.org.





PRACTICE MANAGEMENT ADVANTAGE

Looking for allergy coding resources? We have them

Your College membership gives you access to coding updates, toolkits, tutorials, and more!

Accurate coding is essential for your practice's reimbursement and quality patient care. The College is dedicated to supporting our members on coding issues from high-level government aspects to specific coding issues for allergists. The ACAAI Billing and Coding Committee, the Advocacy Council and the Practice Management Committee make coding issues a priority and make sure College members are kept up to date.

"If you are a new allergist, an NP or PA new to allergy, or have new billing staff, the College's coding resources are the perfect way to learn about coding for allergy," said Melinda Rathkopf, MD, MBA, FACAIA, Chair of the Practice Management Committee.

The College has a treasure trove of coding information specifically for allergy practices. And as a College member, you have access to all of it. Our resources are updated regularly, so you can be confident you're getting the latest information.

With so much coding information out there, where do you start?

Your first stop is the **Coding Toolkit** (college.acaaai.org/toolkits/coding-toolkit). It features coding issues unique to allergists, such as how to code for extract preparation, venom immunotherapy, food challenges, adverse effects of drugs and more. You'll find:

- Explanations of the most recent E & M coding changes.
- Current ICD-10 codes.
- Common CPT codes for allergy/immunology.

The Top Five

What are the top five coding areas College members are asking about?

- Coding 95165
- Modifier -25
- E/M plus skin testing
- Allergenic Extract Quiz
- Coding 95180

PRACTICE MANAGEMENT ADVANTAGE (CONTINUED)

One of our most valuable coding resources is our **Frequently Asked Questions** database, where you can find answers to common allergy coding questions at college.acaaai.org/resource-frequently-asked-questions/. Questions are organized by topic so you can quickly find the answer you're looking for.

Still have a question that isn't covered in FAQs? Experts in the College's Advocacy Council can help! **Email your question** to advocacycouncil@acaai.org.

Spotlight on the Advocacy Council

The College's Advocacy Council is advocating for practicing allergists! It keeps our members informed on regulatory issues, assists in resolving complex payment disputes, and lobbies state and federal elected officials and government agencies.

"We are often the face of the allergy/immunology specialty," said Dr. Travis Miller, Chair of the Advocacy Council. "We represent the profession before payers, managed care, and other health care entities."

Coding is just one area the Advocacy Council monitors. Look for advocacy articles each week in the College's weekly e-newsletter, *College Insider*. Many of the articles address coding issues, including "Coding Conundrums," which answer in detail a specific coding question.

If you want to learn about a specific coding topic, try our interactive **Allergy Office Modules**. We have three 15-minute modules dedicated to coding: 95165, allergy testing and immunotherapy. Find them at education.acaaai.org/aomodules.

Our collection of **webinars** explores coding further. College experts provide detailed, up-to-date information. View these coding webinars:

- 2024 Coding Update

- Correct Documentation Helps Reduce Denials
- Allergy Testing Coding and Billing Essentials
- Beyond E & M Coding: Procedures and More
- Immunotherapy Coding Essentials

Find them at education.acaaai.org/pmwebinars.

Coding books

Look up specific codes easily in coding books - available to members at discounted prices. Here's how to order: Email the order form (found in the Coding Toolkit at college.acaaai.org/toolkits/coding-toolkit) to Jace Wirick of Optum360 at jace.wirick@optum.com. **Include #300486 to receive the ACAAI member discount.** To complete your order, call 801-963-7043 - with your credit card number.

The College is here to help you navigate the coding maze! Use the tools your College membership provides to ensure accurate coding for maximum payments.

Spotlight on 2024 Coding Update for Allergists

You'll want to watch (or rewatch) this webinar that addresses new ICD-10 and CPT codes for 2024. Speakers are Gary Gross, MD, FACAAl, and Razi Rafeeq, MD, FACAAl. Dr. Gross is a consultant for the ACAAI Advocacy Council and Dr. Rafeeq is Chair of the ACAAI Billing and Coding Committee. Find it here: education.acaaai.org/pmwebinars

Drs. Gross and Rafeeq cover:

- New E/M complexity add-on code G2211.
- New Social Determinants of Health (SDOH) Codes.
- Telehealth, RPM and RTM coding.
- Supervision - virtual vs. direct.
- Coding for E&M visit with Skin Testing.

These topics and more are covered in our FAQs. Find them at college.acaaai.org/resource-frequently-asked-questions/.

SDOH

Social
Determinants
of Health



PRACTICE MANAGEMENT ADVANTAGE

Improve patient care by doing a risk assessment for social determinants of health – and get paid for it

How often do you get a chance to improve the quality of care for your patients *and* get paid for it? Screening for Social Determinants of Health (SDOH) is one opportunity! SDOH issues impact asthma disparities, childhood risk of asthma and asthma morbidity, among other things.¹ As a result, CMS encourages physicians to incorporate SDOH risk assessment into your practices – and now they are paying you to do it.

“It is not always apparent to physicians when a patient has social determinants of health that may impact their treatment,” said Gary Gross, MD, FACAIAI, coding consultant for the Advocacy Council. “I believe we should all get a ‘read’ on our patients at least once and certainly if we suspect situations have changed (like the real estate or oil crash in Texas earlier in my career when many of my patients were out of work).”

Beginning in January, CMS started reimbursing stand-alone code **G0136** for the **administration of a patient SDOH Risk Assessment**. Here are the facts:

- G0136 can be billed once every six months, with a duration of 5-15 minutes.
- The CMS national payment amount for nonfacility reimbursement of this code is \$18.97.
- Any standardized, evidence-based SDOH risk assessment tool that has been tested and validated through research may be used. The tool must include the domains of food insecurity, housing insecurity, transportation needs and utility difficulties. Google some of the tools below or find most of them in Health Equity Services in the 2024 Physician Fee Schedule Final Rule.²
 - Accountable Health Communities Health-Related Social Needs Screening Tool
 - American Academy of Family Physicians Social Needs Screening Tool
 - HealthBegins
 - Protocol for Responding to and Assessing Patients' Assets, Risks, and Experiences (PRAPARE)



- G0136 can be billed with an outpatient E/M visit and can be provided via telehealth.
- Physicians are not required to have the capacity to furnish care management services or have partnerships with community-based organizations to bill this code. However, CMS does expect physicians to consider the results of the assessment in their medical decision-making or diagnosis and treatment plan for the visit. In addition, CMS encourages follow up or referral to appropriate resources where available.
- Medicare covers this code, but allergists should check to see if their Medicaid and commercial plans cover it as well.
- G0136 is subject to cost sharing (co-pay and deductible).

There are several ways to incorporate SDOH screening into your workflow:

- Have patients complete SDOH risk assessment questions at check-in.
- Make SDOH risk assessment questions part of the rooming process for medical assistants or nurses.
- Once you’ve collected the results, use them to have a focused conversation with the patient about SDOH needs.
- Document how the SDOH is interfering with patient care.

Let’s walk through a sample visit with SDOH codes (see table in next column).³

How would you code SDOH for this patient?

- Single mother of three school-aged children in her mid-20’s.

- Children’s father was incarcerated, resulting in loss of public housing.
- Works two part-time jobs and does not have health insurance.
- Cannot always afford to fill prescriptions and misses appointments.

Here are the relevant SDOH codes for this patient:

- Z59.7, Insufficient social insurance and welfare support
- Z56.0, Unemployment, unspecified
- Z91.120, Patient’s intentional underdosing of medication regimen due to financial hardship

When the effects of a patient’s SDOH are significant, like the patient above, it can also increase the level of the patient’s office visit due to increased risk. When using MDM to determine the E/M level, risk may increase due to a diagnosis or treatment significantly limited by SDOH.

Screening for SDOH can also help you with MIPS. There is a new MIPS Quality Measure 487: Screening for Social Drivers of Health.

Screening patients for SDOH can be a win-win for you and your patients. It’s an opportunity to improve both the health of your patient and the financial health of your practice.

SDOH Code	Description
Z55	Problems related to education and literacy
Z56	Problems related to employment and unemployment
Z57	Occupational exposure to risk factors
Z58	Problems related to physical environment
Z59	Problems related to housing and economic circumstances
Z60	Problems related to social environment
Z62	Problems related to upbringing
Z63	Other problems related to primary support group, including family circumstances
Z64	Problems related to certain psychosocial circumstances
Z65	Problems related to other psychosocial circumstances

¹ "Asthma and Social Determinants of Health", Ann Allergy Asthma Immunol 128 (2022) 5–11.

² www.cms.gov/files/document/mln9201074-health-equity-services-2024-physician-fee-schedule-final-rule.pdf-0

³ www.cms.gov/files/document/zcodes-infographic.pdf

FELLOW-IN-TRAINING ADVANTAGE

Vinh Nguyen, MD, Senior FIT Rep



Vinh Nguyen, MD

Navigating the world of medical billing and coding for FITs

As Fellows-in-Training embark on our journey toward becoming fully autonomous health care professionals, we're encountering various facets of

the health care system, including medical billing and coding. These essential components of health care administration affect countless aspects of patient care and ensure that medical services are accurately documented, coded, and billed for reimbursement.

Understanding the basics of billing and coding is fundamental for providing quality patient care and for accurate reimbursement for the services we provide. Unfortunately, we most likely didn't get a lot of training in coding and billing in medical school or in our post-graduate training. I recall the apprehension and anxiety of having to code my first clinic visits as a first-year attending. It turns out I was under-billing many of my first visits (oops), but that was quickly corrected after internal auditing.

Mastering medical billing and coding can be daunting, as it requires understanding complex coding systems and staying updated with ever-changing regulations. However, proficiency in this area can help you provide continuity of care for your patients and maximize reimbursements (while minimizing billing errors) for your practice.

Never fear - the College has resources available for FITs to help with coding - at no charge.

A great place to start is the Coding Toolkit. Find it at college.acaai.org/toolkits/coding-toolkit. This comprehensive resource has tips and information to simplify coding. If you have a specific coding question, ask it via email at advocacycouncil@acaai.org and a member of the College's knowledgeable Advocacy Council will help you. In addition, significant coding changes and updates are sent to College members whenever they occur.

For a list of the College's coding resources, read the article on page 10.

Medical billing and coding are important components of the health care system. As the health care landscape continues to evolve, the importance of billing and coding expertise will only continue to grow, making it a valuable skill for medical trainees to acquire early on and to keep updated in our careers.



The College: Guiding excellence with evidence, answers and best practices

Each year, the College leads or participates in the process to provide new and updated guidance on a wide range of allergy/immunology conditions and treatments. These documents take the form of practice parameters, definitions, guidelines, statements and other recommendations.

Often, College experts collaborate with those from other national or international organizations to come to consensus on these documents. All are intended to aid the allergist/immunologist in keeping up to date on best practices in order to provide optimal management and treatment for patients with these conditions. In some cases, they also provide guidance to payers and other entities who approve treatments and medications for individual patients.

College statements and guidelines reflect the most current information and clinical/scientific advances at the time of publication. They are not intended to dictate a course of action, but to help guide diagnosis and treatment taking into consideration the unique situation of each patient as well as the medical judgment of the treating health care professional.

Often, these guidelines or recommendations are developed using stringent methodologies for evaluating the strength of evidence and interpretation of data, such as the GRADE method (Grading of Recommendations, Assessment, Development, and Evaluations), or systematic reviews of data by Delphi panels.

Among the most formal guidelines are those developed by the Joint Task Force on Practice Parameters, which is a partnership between the American College of Allergy, Asthma & Immunology (ACAAI) and the American Academy of Allergy, Asthma & Immunology (AAAAI). For each parameter that is newly developed or updated, members of

both groups serve as expert authors. New parameters are published in *Annals of Allergy, Asthma & Immunology* or *Journal of Allergy Clinical Immunology* on a rotating basis. All current parameters can be found at www.allergyparameters.org.

The most recently published Practice Parameters include:

- 2023 Anaphylaxis Update (December 2023)
- Atopic Dermatitis Guidelines (GRADE) (December 2023)
- 2022 Sinusitis GRADE Parameter (November 2022)
- 2022 Drug Allergy Update (September 2022)

In the works: a new parameter on severe asthma (attend the session giving a preview of this guideline at the ACAAI Annual Scientific Meeting in October).

Examples of other types of guidance include consensus papers and definitions that respond to, and provide clarification around, advances in the field. In the past year, the College endorsed a systematic review of data related to co-administration of dupilumab with live vaccines. ACAAI also worked with several other

allergy-related organizations to develop a working definition of asthma remission. And the College lends expertise to international panels and work groups who develop definitions and guidance as well, including an urticaria guideline currently in progress.

Once introduced to our members, new or updated guidelines help to inform and enhance ongoing College educational and other resources, including learning modules, podcasts, practice management tools, patient education content and much more.

To learn more, visit college.acaa.org/publications and visit the JTFFP site at allergyparameters.com.



EDUCATION ADVANTAGE

By David Stukus, MD, FAAAAI, ACAAI Education Council Chair

A commendation for those behind the scenes



David Stukus, MD, FAAAAI

If you've ever attended the College's Annual Scientific Meeting, visited the vast educational offerings available through our **College Learning Connection**, or watched an ACAAI webinar, then you have seen the end product of countless hours of work behind the scenes. According to the College's member website, the Education Council "formulates and oversees the

implementation of the College's education strategy and curriculum, provides leadership to education committees and ensures the development of education leadership."

As Chair of the Education Council, I will gladly explain this in terms I didn't fully understand until I was nominated for the position: Our staff and committees work their tails off to bring high quality continuing medical education to our members.

As a testament to their countless hours of work, ACAAI was recently awarded **Accreditation with Commendation** by the Accreditation Council for Continuing Medical Education. **This is the highest level of accreditation awarded, and we are the only professional allergy/immunology organization to currently hold this designation.** The accreditation file preparation and submission took more than a year to complete, and the process included hundreds of CME programs offered (or jointly accredited) by the College between 2018 and 2023. This simply would not have happened without the dedication, vision, and tremendous effort of our education staff.

The Education Council works continuously behind the scenes to approve proposals for new online educational offerings as well as our in-person meetings. In April, we gathered in Las Vegas with hundreds of attendees for the second annual **North American Pediatric Allergy and Asthma Congress**, a joint meeting co-sponsored with our colleagues in the Canadian Society for Allergy and Clinical Immunology. The sold-out **ACAAI Allergen Extract Mixing Course** was also held in April and continues to garner significant interest from our members and beyond. For those studying for the allergy/immunology boards, stay tuned for an updated fifth edition of our ACAAI review for the boards, which will be available this summer.

I hope you're all looking forward to our **Annual Scientific Meeting** in Boston, Oct. 24-28, 2024. The abstract submission site is open! There is no need to wait until

October to take advantage of all the educational opportunities the College has to offer. If you haven't visited the **College Learning Connection** recently, I encourage you to take a few minutes to see the courses, webinars, and other offerings available for our members. See them all at education.acaaai.org.

Albert Einstein once said, "Intellectual growth should commence at birth and cease only at death." New treatment breakthroughs for allergic conditions are occurring at an exciting pace. New paradigm shifts in our understanding and management of anaphylaxis, atopic dermatitis, cough, food

allergy, hereditary angioedema, and other conditions have dramatically changed the care we can offer our patients. In order for any of us to understand and incorporate this rapidly changing array of evidence-based information into our practices, we're going to need to commit to lifelong learning and intellectual growth. The ACAAI is here to support you every step of the way.



COMMUNITY ADVANTAGE

Community Grant Spotlight:**Food allergy transitions of care for adolescents**

The Allergists' Foundation Community Grant Program inspires practicing allergists to find creative ways to address barriers to allergy care within their communities. The Foundation, thanks to the generosity of College members and other donors, has funded 17 innovative projects since the program's establishment in 2021, including several led by Fellows-in-Training (FITs).



Dr. Jessica Macdougall

Jessica Macdougall, MD, MS (2022 grantee) led a 12-month project as a FIT to determine if a dedicated 'transitions of care' education visit for adolescents and young adults would improve their knowledge and comfort around self-management of their food allergies. She worked with her mentors to develop an evidence-based curriculum covering topics such as recognizing and treating allergic reactions; using an epinephrine auto-injector; navigating social events

(parties, dates, etc.); and preparing for college/living away from home. Read more about Dr. Macdougall's project and her findings below.

Q. What inspired you to apply for the Community Grant?

Throughout the first year of my fellowship training, I received numerous pages while on call from parents with concerns about their college-aged students' ability to self-manage their food allergies. We know from previous studies that adolescents are less likely to carry their epinephrine auto-injectors and more likely to engage in risky behaviors. That inspired me to develop a 'transitions of care' education project to improve knowledge and self-management of food allergies for this patient population as they prepare to live away from home.

Q. What challenges did you come across and how did you overcome them?

The first challenge was the timeline for the project, as it took longer than anticipated for our IRB to be approved. While waiting for approval, we created the curriculum and updated recruitment listings in preparation for the start of the project. The second challenge

was recruitment of participants. The recruitment listing had many views, but the team became inundated with bots rather than real participants. We switched our recruitment tactic and sent personalized emails to all families with adolescents and young adults aged 13 to 25 years old with food allergies who had been seen in our allergy clinic. This allowed us to recruit 50 participants within two months.

Q. What did you learn that may be of benefit to other allergists?

Fewer than half of our study participants felt comfortable using their epinephrine auto-injector or ready to manage their food allergies on their own prior to their online educational visit. However, they were eager to learn how to do so, especially within a group setting. They were especially interested in how to navigate and manage social events, dating, alcohol, and drug use when they are away from home. Once they completed the online educational visit, they showed improvement in their comfort level under all topics covered. Unfortunately, many adolescents and young adults with established food allergies stop coming to our clinics at this vulnerable time when transitional visits may be most needed. As such, it is important to emphasize the need for yearly visits and to start these conversations early. In my own clinic, I set aside time during each office visit to discuss one aspect of transitioning care, whether that be learning to read labels, going to social events, preparing for college, or transferring care to a new allergist.

To learn more about the Community Grant Program, visit college.acaa.org/grants. Have an idea you'd like to get funded? Look for the call for applications this fall, or email us at foundation@acaai.org.



Building a foundation for great leadership

This spring, 20 College members attended the ACAAI 2024 Leadership Summit. This popular annual event helps attendees build a foundation for great leadership and gain skills that can immediately be put into practice.

Sessions covered topics such as communicating effectively, preventing and dissolving conflict, coaching others, discovering and working with different behavior styles, and much more.

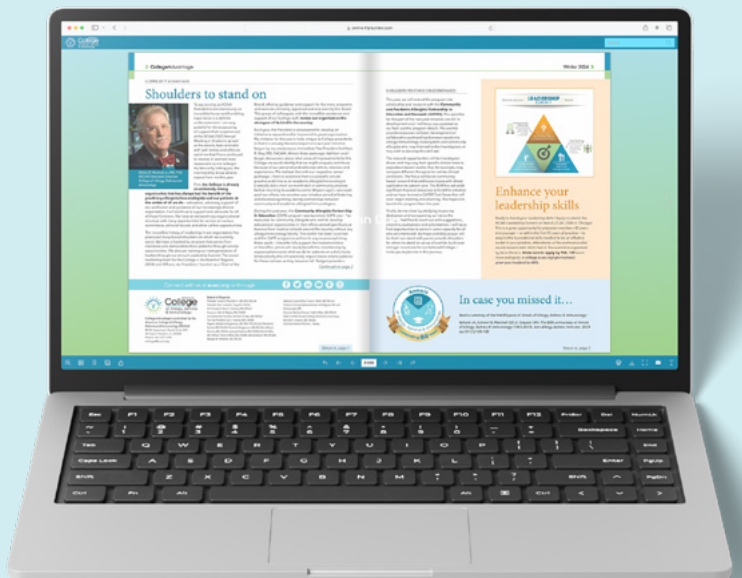


New online format for College Advantage

According to the recent member survey, our members are reading a healthy percentage of the content in *College Advantage*. As part of a recent “refresh” of the look of ACAAI communications, each issue of *College Advantage* will now be available as an online flip book.

This member news magazine has been available as an online publication for several years, but the new format provides a truly page-turning experience. Whether you prefer to read the print version that arrives in your mailbox or the online version, this publication is a great way to keep up with ACAAI highlights and events.

Find current and past issues on the member website, college.acaa.org, under “Publications.” While you’re there, check out the many other College titles, from *Annals of Allergy, Asthma and Immunology* to *AllergyWatch, College Insider* and more.

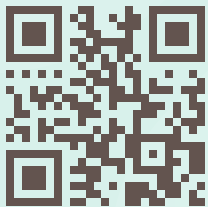


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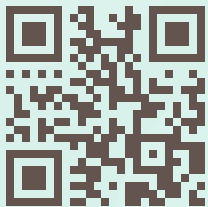
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