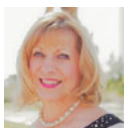


UCAdvocacy!

■ LAUREL STOIMENOFF, PT, CHC

The Urgent Care Association's Health & Public Policy (H&PP) Committee remains one of our most active volunteer groups. Chaired by Bob Graw, Jr., MD, FCUCM, and supported by Camille Bonta, UCA's lobbyist, the committee's tireless work deserves recognition. A sampling of their recent activities includes:

- **The Emergency Triage Treat and Transport (ET₃) model:** Announced by the Centers for Medicare & Medicaid Services (CMS) in February, this 5-year pilot will compensate select Emergency Medical Service providers to treat nonemergent patients with either the support of telehealth technology or transport to appropriate settings, including urgent care centers. UCA remains engaged in ongoing conversations with CMS and representatives of the emergency transport industry to prepare our members for a 2020 launch.
- **Urgent care in rural communities:** Rural healthcare access is a hot item legislatively at both the state and federal level. Urgent care centers are a viable solution for many of these communities, yet they may struggle financially due to lower volume and staffing challenges. A task force has been convened to frame our message and strategy. We are committed to pursuing the right incentives so urgent care operators can confidently enter rural markets.
- **Urgent care centers serving our nation's veterans:** Urgent care is now an option for eligible veterans enrolled through Veteran Affairs. UCA successfully advocated to ensure urgent care centers were included under the VA Mission Act and supported TriWest Health's efforts to build a nationwide network of contracted urgent care centers.
- **UCA Political Action Committee advances a state-level strategy:** In 2018, the UCA Board approved the formation of an independent political action committee (UCAPAC). State-level PACs were formed to correlate with escalating activity in key battleground areas. John Kulin,



Laurel Stoimenoff, PT, CHC is Chief Executive Officer of the Urgent Care Association.

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DO, FACEP, FCUCM awarded our first state-level donation in July. A major election year is imminent and UCAPAC will seek opportunities to fund select candidates supportive of the urgent care sector.

- **Fair reimbursement for urgent care access and services:** A position statement has been posted and distributed on fair payment for urgent care services. Despite the fact that urgent care centers provide a substantial amount of primary care, patient copays often not only exceed those of primary care providers, but also those for specialists—clearly, a disincentive to utilize urgent care. We are advocating for greater parity in patient financial responsibility for urgent care and primary care services. Additionally, we encourage payers to eliminate arbitrary restrictions on scope of practice, including wellness care and services, and make the case that global payment rates stifle innovation and growth. Urgent care owners and operators should establish their scope of care based on clinician skill sets and the needs of the community, as opposed to retrofitting their scope into contractual boundaries.
- **Urgent care and CMS's Merit-based Incentive Payment Program (MIPS):** Recognizing that the majority of urgent care centers provide episodic illness and injury care, the association has advocated for urgent care-appropriate MIPS activities. UCA has also submitted a request to CMS to recognize UCA accreditation as an improvement activity based on clinician onboarding, credentialing, and privileging standards.

We continue our quest to move from a defensive to an offensive strategy and are pleased to be reporting some wins. I want to express my most sincere gratitude to those who support UCA via membership, event attendance, and PAC contributions. We cannot do our work without you. ■