

WSSA Advocacy Update  
06/25/2019

The third installment of our legislative and advocacy update again comes during a relatively quiet time in Olympia. Nevertheless, rulemaking continues on important issues.

The Centers for Medicare & Medicaid Services (CMS) launched its Patients over Paperwork Initiative in 2017 to streamline regulations and reduce “red tape” for clinicians. CMS is seeking ideas on solutions to

- Reporting and documentation requirements.
- Coding and documentation requirements for Medicare or Medicaid payment.
- Prior authorization procedures.
- Policies and requirements for rural providers, clinicians, and beneficiaries.
- Policies and requirements for dually enrolled (i.e., Medicare and Medicaid) beneficiaries.
- Beneficiary enrollment and eligibility determination.
- CMS processes for issuing regulations and policies.

You can submit your comments to [ReducingProviderBurden@cms.hhs.gov](mailto:ReducingProviderBurden@cms.hhs.gov) by Aug. 12.

As mentioned previously, the Washington Medical Commission is undertaking an allopathic rules re-write that will focus on technical and policy-based changes. As opportunities for advocacy arise, we will keep the WSSA membership posted through our website and emails.