



Change Healthcare breach: Financial relief, resources and next steps for physicians with Todd Askew

AMA Update covers a range of health care topics affecting the lives of physicians, residents, medical students and patients. From private practice and health system leaders to scientists and public health officials, hear from the experts in medicine on COVID-19, medical education, advocacy issues, burnout, vaccines and more.

Featured topic and speakers

What physicians need to know about the Change Healthcare cyber security incident including financial support from CMS, AMA advocacy efforts and when service might be restored.

Our guest is American Medical Association Senior Vice President of Advocacy, Todd Askew. AMA Chief Experience Officer Todd Unger hosts.

- Stay up to date on the latest Change Healthcare news.
- Find out how to prevent cyberattacks on private practice and use U.S. Department of Health and Human Services #HHS Security Risk Assessment Tool.
- Can EHR systems be hacked? Learn more about health IT and medical cybersecurity.
- Stay up to date on all the latest advocacy news by subscribing to AMA Advocacy Update.
- The AMA is your powerful ally in patient care. Join now.

Speaker

- Todd Askew, senior vice president, advocacy, AMA

Transcript

Unger: Hello, and welcome to the AMA update video and podcast. Today I'm joined by the AMA Senior Vice President of Advocacy, Todd Askew, to discuss some new developments in the government's response to the cyberattack on Change Healthcare, a UnitedHealth Group subsidiary



that's affected so many physicians and patients. I'm Todd Unger, AMA's chief experience officer. Todd, thanks so much for joining us today.

Askew: Glad to be with you, Todd.

Unger: So most of us now know about the cyberattack on Change Healthcare that took place in late February. It certainly made its share of headlines, but I think it's probably best to start with a little bit of brief background on the attack and the overarching impact that it's had on physician practices and patients in the week since then.

Askew: Sure, Todd, so as most people are aware, in late February Change Healthcare, which as you mentioned is a subsidiary of Optum, which is part of the UnitedHealth Group, was the victim of a cyberattack. When that occurred, they immediately severed Change Healthcare systems from the rest of their network.

But that has ripple effects, not just with United, has ripple effects throughout the entire health care system. Change is essentially a clearing house, in part. Many physicians submit their claims through Change. Many physicians receive payment through Change. But Change is also involved in many, many ways throughout the health care system, for instance, eligibility, determinations, pharmacy services. We've seen prior authorizations disrupted. So when that system went offline, it really paralyzed a lot of functionality throughout the entire health care system, and for many, many physicians and other health care providers, brought those processes to a standstill.

Unger: That is a lot of impact across the board that you just outlined. Recently UnitedHealth provided a potential timeline for a fix. And I know that that transparency was appreciated by many, but it also did raise some new concerns. Tell us a little bit more about that.

Askew: So they have been bringing pieces of their system back online over the last week. They've also been encouraging workarounds, having physicians go to another clearinghouse or submit claims manually, on paper even, paper prescriptions. So a lot of functionality is there. But it's much more difficult. It's much more expensive to do without the functionality that Change previously had.

So pharmacy services they say are mostly back online. We're expecting more payment processes to come online this week. The claims issue is a bigger deal, though. They have announced that they expect about March 18 to begin testing the functionality of claims, so that physicians and other providers can go back to submitting claims through the Change architecture. But that will almost be a full month of delay, and it's not even clear exactly when it will be up and fully functioning again. So we are not done with this by any means.

Unger: And of course, claims tied very closely to payment, which has put a huge disadvantage for a lot of practices out there already operating on thin margins, a huge reason why the AMA has put the full force of its advocacy behind this issue. Todd, can you outline some of the steps that the AMA



advocacy team has taken to help physicians who are in such dire need of it right now?

Askew: Well, you're absolutely right. And we have to remember, this is coming on top of a reduction in Medicare reimbursement rates. Just on January 1, last week, part of that reduction was ameliorated going forward. But we're looking at extremely thin margins in the Medicare line of business but across physician practices, across all lines of business as well.

One of the number one things we've been pressing that the administration can do, that the federal government can do, is in the Medicare line of business to provide accelerated and advance payments for physicians, for claims that they normally would be being paid for now that just can't be processed through the normal avenues.

And that happened this weekend. The administration was able to identify some authority they have to provide advance payments for physicians on their Medicare claims. Essentially, they're going to look at—for physicians who qualify—they will look at a typical 30-day payment amount and advance those funds. And then once the claims start to be processed again, it will be a 100% recoupment. They will offset that advance payment by recouping the dollars from claims that are processed within 90 days, probably a lot faster than that. So that is really the avenue the federal government has.

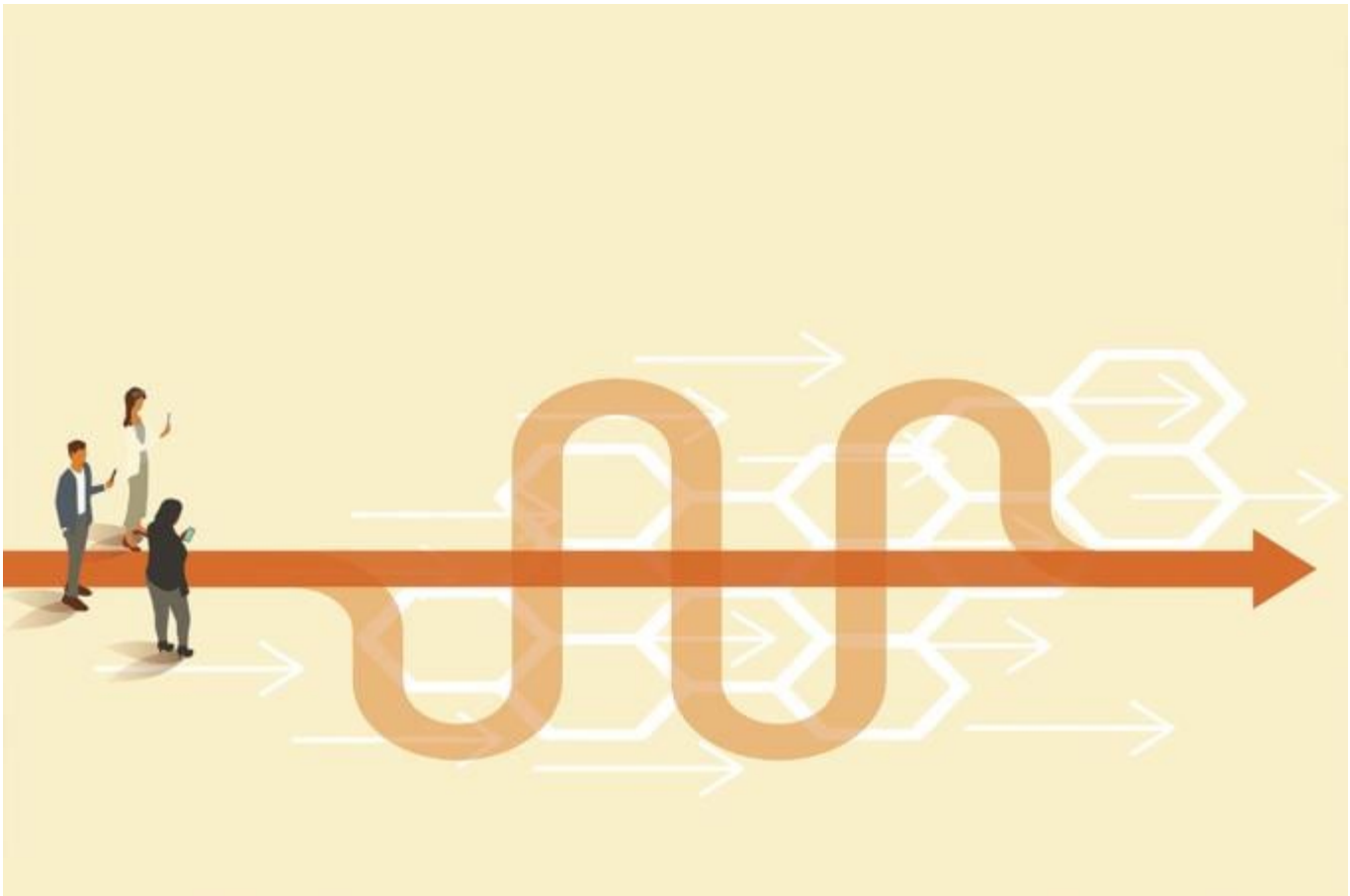
Now, obviously physicians, many physicians, the majority of their payments don't come just from Medicare. They come from a number of other sources. And the administration has been very aggressive in pressing payers, United, but other payers as well whose claims processes were impacted by this to advance funds to physicians to help them meet payroll, help them pay their bills.

We've seen instances even of electronic medical records being locked down, because they couldn't pay the service fees. So it is getting to a crisis point. And the administration has really been pushing with our support and with our urging to have payers across the board advance funds to physicians and other providers, so that they can help meet payroll and continue to function.

Get the latest news on physician well-being

Subscribe for insights and real-world solutions delivered straight to your inbox.

[Subscribe Now](#)



Unger: Well with the announcement of that program to help physicians over the weekend from CMS, that is a big step forward and I know there's a lot more work to be done. And Todd, I know the terms of the payments that were outlined are a bit complicated. Is there anything that physicians need to know in addition to what you've covered already?

Askew: Well, the information on this particular program is available on our website. It's available on CMS' website. You know, we'd also encourage physicians to contact other payers, because there are payers out there who are offering options for physicians to receive advance payments. A lot of them unfortunately have not been very well publicized. But it's important to reach out to other payers to find out what options are available, in addition to seeking workarounds.

The workarounds are not cheap. It's not it's not easy in a lot of cases to file your claims in an alternative way. But people need to be reaching out to their payers, to their vendors, to understand what their options are. And it's going to vary by different practices, different vendors, different clearinghouses, are all going to have variable processes for helping physicians.



But there is help out there. But the number one thing is obviously encouraging United to move as quickly as possible to resolve this, to be as transparent as possible, so that physicians can understand when they can expect to return to functionality and when we're going to have the claims process back fully functioning.

Unger: And note, everyone out there listening, you can find everything that you need to get more information on the AMA site. We're going to put links to everything that Todd Askew is talking about in this episode in the description of this particular episode. Todd, I know this program doesn't mean the end of AMA's efforts here. How is the AMA continuing to advocate for relief for physicians affected by this attack?

Askew: We're continuing to have daily conversations, as you mentioned. All through the weekend and every day this week, we'll be having conversations with the administration. We'll be having conversations with Congress, if there are options that need to have some new statutory authority.

And we're continuing to talk to payers. We're talking to United. We're talking to the representatives of other payers as well to encourage them to take the steps that are necessary to keep physician practices functioning, so that physicians can continue to serve their patients.

There's no easy answers here. There's no switch that we can just flip and suddenly have everything back functioning again. But we will continue to press at every level and at every time we have an opportunity to push all the players involved here to move as quickly as possible to find a resolution, but also to be as flexible as possible and creative as possible in finding ways to support physicians as they continue to try and keep their doors open.

Unger: Todd, final question. Just kind of more broadly, this issue of cyberattacks, ransomware, you name it, we seem to be reading more and more about it in the news and more frequently in regard to health care. What's your advice to physicians and institutions out there about protecting themselves from an attack like this?

Askew: Sure, while we don't know exactly how this particular attack happened, what the vulnerability was, certainly there are many, many points of vulnerability throughout the health care system and physician offices and practices are no exception. Everything we do, from claims eligibility, claims filing, benefit determinations, prior authorization, it's all done electronically now. So there's a lot of different points of entry where those who would seek to interrupt physician services, ransomware groups, et cetera have opportunities.

The AMA has an extensive amount of resources on considerations for physician practices. I think we'll provide the link for those as well. Physicians need to be actively engaged and proactive in examining their systems, examining where those vulnerabilities could be, and making sure that they are taking the steps that are necessary to keep those systems as secure as possible.



Health care is almost 20% of GDP. It's a massive target for those who would seek to profit off those vulnerabilities in the system. And so it's the responsibility of everybody engaged, from the largest corporations down to the smallest physician practice to do what they can and be proactive in keeping their systems secure.

Unger: Todd, thank you so much for updating us on all this information and for the continuing work that you and your team are doing to advocate for physicians on this and so many other issues. Again, you can find links in the description of this episode for all the help that you need to find out more about the new CMS program.

Advocacy like this, where we come together as physicians to really fight for the benefit of physicians and patients, that's what it's all about. I encourage you to support the AMA's advocacy work by becoming an AMA member at ama-assn.org/join.

That wraps up today's episode. And we'll be back with another AMA update. Be sure to subscribe for new episodes and find all your videos and podcasts at ama-assn.org/podcasts. Thanks for joining us. Please take care.

Disclaimer: The viewpoints expressed in this video are those of the participants and/or do not necessarily reflect the views and policies of the AMA.

Subscribe to AMA Update

Get videos with expert opinions from the AMA on the most important health care topics affecting physicians, residents, medical students and patients—delivered to your inbox.

[Subscribe Now](#)

AMA UPDATE