



MEDICAL SOCIETY OF THE STATE OF NEW YORK

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MSSNY Fights for Physician Relief from Change Healthcare Debacle

MSSNY staff have participated in numerous meetings with state and federal officials to urge relief for physician practices across New York State that have been adversely impacted by the Change Healthcare ransomware debacle, preventing health care claims from being submitted and paid, and threatening to shutter these practices from being able to deliver patient care. Meetings were held this week with the New York Department of Financial Services (DFS), the US Health & Human Services and Administration and representatives of Optum and United Healthcare.

In response, the DFS has issued the following circular letter [Insurance Circular Letter No. 2 \(2024\): Department of Financial Services \(ny.gov\)](#) setting forth that certain preauthorization, concurrent, and retrospective review requirements (collectively, "utilization review requirements"), appeal timeframes, reconsideration timeframes, claim submission timeframes, and eligibility verifications should be suspended or tolled when necessary, and that plans and PBMs "should ensure that there are no delays in health care services and that prescription drugs remain accessible to insureds"

Moreover, United Healthcare issued a status update late Thursday [Information on the Change Healthcare Cyber Response - UnitedHealth Group](#) noting the following timeframes for various systems to be available for use again:

- **Timeline to restore functionality to Change Systems**
 - Pharmacy- E-prescribing is fully functional, with claim submission and payment transmission available.
 - Payment platforms- electronic payments will be connected by March 15th.
 - Medical Claims submission- anticipate beginning to restore functionality the week of March 18th.
- **Expanded funding programs.**
 - UHC will provide advance funding for provider partners that represents the difference between historical funding levels and levels post-attack.
 - Optum will provide funding to providers who have exhausted connection options and work with a payer that is not providing funding advances.
 - Repayment date for all funding programs will be 30 days.
- **Prior authorization/UM**
 - Prior authorizations will be suspended for MA and DSNP plans for most outpatient services through March 31st.

On this page, under the heading "Claims", they have also suggested use of an EDI as a claims submission alternative.

MSSNY working together with other physician and hospital advocacy associations are urging the DFS to require health insurers to waive various requirements for prior authorization, eligibility verification and timely submission, as well as advocating for mechanisms for interim payments to keep practices and hospitals afloat until the

ransomware attack can be remedied. MSSNY has also been working closely with the American Medical Association on efforts to waive various Medicare claim submission requirements, including MIPS reporting, and to make available interim payments until the problem is resolved. The AMA has maintained a page [Change Healthcare cyber outage \(ama-assn.org\)](https://www.ama-assn.org/change-healthcare-cyber-outage) to provide various updates on efforts to address this crisis.

DFS is asking for a list of physician offices who are having a cash flow crisis due to the Change Healthcare cyber incident for the purposes of helping formulate relief from health insurers. If you use Change Healthcare and your cash flow is in crisis, please provide your office's full name and address along with NPI # to hlopez@mssny.org and we will forward to DFS.

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