April 28, 2021

The Honorable Lloyd Doggett
Chairman
United States House of Representatives
Ways and Means Subcommittee on Health
Washington, DC 20510

The Honorable Devin Nunes
Ranking Member
United States House of Representatives
Ways and Means Subcommittee on Health
Washington, DC 20510

Re: Statement for the Record: Charting the Path Forward for Telehealth

Dear Chairman Doggett and Ranking Member Nunes:

On behalf of AMGA and our members, I appreciate the opportunity to contribute testimony for the record to the House Ways and Means Committee Subcommittee on Health regarding the use of telehealth in medical groups and integrated delivery systems.

Founded in 1950, AMGA represents almost 450 multispecialty medical groups and integrated delivery systems, representing approximately 177,000 physicians who care for one in three Americans. Our members work diligently to provide innovative, high-quality, affordable, patient-centered medical care, and they remain a resource to identify the best ways to care for their patients as we continue to battle the novel coronavirus (COVID-19) pandemic.

The onset of the COVID-19 pandemic severely disrupted medical groups’ and integrated delivery systems’ ability to deliver onsite care. As a result, AMGA members have seen a paradigm shift in the way that members incorporate telehealth services in their practices. Recent AMGA survey data found that many of our members moved from modest telehealth utilization to significant increases in telehealth services, with some members going from zero telehealth appointments to almost 2,000 appointments per day. This increase in telehealth utilization has led to greater provider and patient interactions due to the ability for providers to create meaningful connections with patients through the screen and increased chronic disease management through remote patient monitoring.

As medical groups and health systems have adapted to COVID-19, they have permanently transformed how care is delivered to the populations they serve. They also recognize that telehealth services have become a fixture of our nation’s healthcare system and that patients now expect and in some cases prefer this appointment model. In turn, we urge Congress to consider the following recommendations to ensure that patients will have continued access to telehealth services beyond the public health emergency (PHE).
Permanently Waive Geographic Limitations and Originating Site Regulations
As a result of the Coronavirus Preparedness and Response Supplemental Appropriations Act, 2020, Congress waived Medicare’s telehealth originating site and geographic limitation regulations during the PHE. The removal of the geographic restrictions allows patients who do not live in a rural or health professional shortage area to continue to receive care from their providers during the PHE, when in-person appointments were significantly reduced. AMGA members noted that waiving the geographic limitations led to increased coordination of care and could potentially reduce costs through eliminating the need for duplicative care and reducing emergency room and inpatient utilization.

AMGA members also noted that waiving originating site regulations has had an additional positive impact. Because patients were allowed to receive care virtually in their homes, our members were able to help ensure that patients continued to have needed access to care safely and conveniently. We urge Congress to eliminate the geographic and originating site of service limits post-PHE in order to ensure all patients have access to the best care, regardless of their location.

Payment Parity for In-Office and Telehealth Services
Throughout the course of the pandemic, AMGA members have made significant investments in telehealth modalities and platforms in order to ensure that their patients have access to needed care. Congress must recognize the need for reimbursement policies that support the ability of medical groups and integrated delivery systems to reach their patients via telehealth. Without payment parity, telehealth will be disincentivized, even if the geographic and originating site restrictions are eliminated. In addition, our members report that the resources and staffing needs for telehealth are equivalent with in-office care. As a result, Medicare reimbursement should be the same.

Audio-Only Services
To ensure equitable access to care, Medicare should continue separate payment for audio-only (telephone) services beyond the PHE. Reimbursement for these services should be equivalent to video telehealth and in-person care permanently, as the resources needed to deliver this care are the same. In addition, it is important that audio-only visits satisfy the face-to-face requirement for collecting diagnoses for risk-adjustment and care coordination purposes. Risk adjustment affords providers a clear picture of a patient based upon accurate diagnoses, leading to a more patient-centered approach to care.

To that end, we support the Ensuring Parity in MA Audio-Only Telehealth Act, (H.R. 2166/S. 150), which would permit audio-only diagnoses that are made via telehealth to be used for purposes of determining risk adjustments to payments under Medicare Advantage (MA).

Remove State Licensing Restrictions for Telehealth Services
AMGA members provide care in a collaborative manner and need standardized federal licensing and credentialing for telehealth to ensure that the most appropriate member of the care team can provide or suggest the most appropriate therapy to a patient, regardless of the state in which a provider or patient resides.

We urge Congress to pass the Temporary Reciprocity to Ensure Access to Treatment (TREAT) Act (H.R. 708/S. 168) to ensure that patients are able to continue to receive interstate telehealth
services during the PHE. We also urge Congress to establish a national standardized licensing and credentialing system for telehealth so patients can have access to care where quality, value, and cost are the main drivers.

We appreciate the opportunity to comment on this important issue. If we can provide you with any more information, please feel free to contact me or AMGA’s Chief Policy Officer Chet Speed at cspeed@amga.org.

Sincerely,

Jerry Penso, M.D., M.B.A.
President and Chief Executive Officer
AMGA

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2 Ibid.