March 26, 2020

The Honorable Seema Verma
Administrator
Centers for Medicare & Medicaid Services
Washington, DC 20201

Dear Administrator Verma:

As the SARS-CoV-2 pandemic continues to spread and more Americans become infected with the COVID-19 virus, it is imperative that our health care system be positioned to provide care in the most appropriate and timely manner. The American Academy of Family Physicians (AAFP), which represents 134,600 family physicians and medical students, thanks you for the significant steps you and the agency have taken to assist the thousands of family physicians who are on the frontlines of this pandemic providing care to patients and assisting communities in this time of crisis.

In recent days, CMS has acted to create new coverage and payment policies that have facilitated the widespread implementation and use of telemedicine and telehealth technologies. In return, family physicians have quickly responded to guidance issued by CMS and others to transition a majority of their patient visits and workflows to virtual platforms. You also have reduced the administrative burden of participating in the Medicare program and issued guidance that makes it easier for patients to obtain pharmaceuticals and other treatments.

Despite these bold steps you have taken, significant challenges persist. The primary challenge is the lack of access, among Medicare beneficiaries, to video technology. The Pew Research Center reports that over 90% of seniors have cellphones, less than 40% of those phones are smartphones with video capabilities. This essentially means that over one-third of Medicare beneficiaries do not have telehealth capabilities. However, an overwhelming majority of seniors have a telephone capability. The lack of payment for telephone-based visits is hindering family physicians’ ability to provide this option to their patients. Now, our members are conducting visits via telephone when it is the only option because it is the appropriate thing to do for the patient. However, the lack of payment for this patient encounter is not without consequences. This dynamic is a primary contributor to the downward economic pressures that is currently threatening closure of thousands of primary care practices across the country.

We need CMS to continue taking bold actions to extend access to care and provide viable care delivery and payment options to physicians who are seeking to provide quality care to their patients in a manner that reduces their risk of obtaining the COVID-19 virus. To this end, the AAFP requests that:

The Centers for Medicare & Medicaid Services (CMS) take the appropriate actions to classify codes 99441, 99442 and 99443 as covered services in the Medicare program and that CMS begin allowing physicians to bill for these services and that CMS issue payment for these services when billed by physicians.
The AAFP and our members urge you to immediately make these codes a covered service and begin paying primary care physicians for their use. Your bold leadership will extend access to timely care for beneficiaries and allow our members to maintain their practices in this time of crisis. Again, we urge CMS to take immediate action on this request. Please contact R. Shawn Martin, Senior Vice President at smartin@aafp.org with any questions you may have regarding this policy recommendation.

Sincerely,

John S. Cullen, MD, FAAFP
Board Chair