

# Amid pandemic, CMS should level field for phone E/M visits

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**What's the news:** The AMA and dozens of other physician organizations are calling on the Centers for Medicare & Medicaid Services to provide payment parity for patients who are only able to consult with their physicians by telephone and cannot or will not visit in person or conduct an audiovisual telehealth appointment using videoconferencing technology.

While key changes have been made to telehealth guidelines to boost COVID-19 care, a sign-on letter from the American College of Physicians, the AMA and many others notes that “many patients are unable to connect via telehealth with their physicians, as they may not have devices compatible to facilitate the use of telehealth.”

Doctors have reported that they “have been able to conduct successful audio-only telephone visits with patients, in lieu of in-person or telehealth visits, obtaining about 90% of the information they would collect using audio and video capable equipment.”

Over the past month, the AMA has had several conversations with senior CMS officials urging Medicare to provide parity for telephone calls.

**Why it's important:** The problem, says the physician organizations' letter to CMS Administrator Seema Verma, is that payment rates for evaluation-and-management (E/M) visits conducted by phone are much lower than those conducted by telehealth or in person.

That “creates a financial hardship for practices using these audio-only calls at a time when they are already struggling to stay afloat,” says the letter.

The payment disparity “disproportionally affects physicians and practices taking care of elderly and underserved patients,” the doctors' letter says.

“Many of these patients are managing multiple chronic conditions, do not have smartphones, or may have a smartphone, but do not know how to use FaceTime or Skype. These individuals are the ones

who most need to practice social distancing from physician practices and clinics—and in some cases, from their own family members—to protect themselves from exposure to the virus while still receiving uninterrupted care.”

Physicians are strongly encouraging CMS to at least temporarily provide parity between office visit codes 99201–99215 and phone E/M codes (99441–99443). That would “ensure that patients have maximum ability to engage with their doctors during this public health emergency.”

Relatedly, despite CMS’ announcement of payment for phone-only consults, physicians have reported that some Medicare administrative contractors (MACs) have denied claims for phone E/M services.

Physicians are asking CMS to instruct MACs to “to transmit reimbursement for these claims now that they are billable under Medicare.” The letter also urges “CMS to include within this guidance, instruction to MACs to remedy telephone E/M claims that were rejected.”

**Learn more:** The AMA quick guide to telemedicine in practice and the AMA Telehealth Implementation Playbook been developed to help physicians swiftly ramp up their telemedicine capabilities and serve patients while

Stay up to speed on the AMA’s COVID-19 advocacy efforts and track the fast-moving pandemic with the AMA’s COVID-19 resource center, which offers a library of the most up-to-date resources from JAMA Network™, the Centers for Disease Control and Prevention, and the World Health Organization.