CMS OKs pay parity for telephone visits during COVID-19 crisis

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What’s the news: The Centers for Medicare & Medicaid Services (CMS) responded to physicians’ concerns and will raise payments for audio-only telephone visits to match rates for office and outpatient visits.

Previously, payments for audio-only telephone services for Medicare beneficiaries ranged between $14 and $41. This has been raised to a range between $46 and $110 with the higher rate retroactive to March 1, 2020.

Additionally, as physicians requested, CMS is waiving a requirement that certain evaluation and management (E/M) services delivered via telemedicine contain a video component. Now beneficiaries who don’t have access to or don’t wish to use interactive audio-video technology can still communicate with their physicians.

The AMA has had numerous conversations with senior CMS officials over the past several weeks advocating for these changes.

“With physicians reporting that Medicare patients are canceling needed medical appointments because of physical distancing and transportation challenges, the AMA commends CMS for allowing Medicare beneficiaries in underserved areas to access care from their homes,” said AMA President Patrice A. Harris, MD, MA.

While key changes have been made to telehealth guidelines to boost COVID-19 care, these last two issues were critically important and were noted in an April 8 letter to CMS Administrator Seema Verma from the American College of Physicians that was also signed by the AMA and 40 other physician groups.

The AMA and other groups also worked to produce a bipartisan letter signed by 37 senators that was sent to Verma and Health and Human Services Secretary Alex Azar addressing these same concerns.

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This letter called on CMS to immediately provide guidance to Medicare Administrative Contractors to ensure that the new rules are followed appropriately to enable the payment of telephone E/M claims.

**Why it’s important:** The letter highlighted how the lower rates for telephone E/M visits created financial hardships for practices and disproportionately affected physicians who care for Medicare beneficiaries and underserved patients.

“This is a major victory for medicine that will enable physicians to care for their patients, especially their elderly patients with chronic conditions who may not have access to audio-visual technology or high-speed Internet,” Dr. Harris said. “This change will help patients address their health challenges that existed before COVID-19.”

The patients affected by the new policy are precisely those “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,” the physician sign-on letter states.

**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.

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