

# Preventive care: As pandemic stretches on, “no more time to wait”

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Preventive care visits have fallen off during the COVID-19 pandemic, and while there were understandable reasons for patients to avoid visiting their physicians in person when so much was still unknown about SARS-CoV-2 transmission, the start of the flu season provides a reminder that patients mustn't go without care forever.

In a recent “AMA COVID-19 Update” video, a panel of experts discussed how to assuage patients' concerns about making appointments for preventive care visits, as well as how to keep patients from getting socked with bills for services that are mandated, under the Affordable Care Act, to be offered with zero-dollar patient cost-sharing.

The AMA is closely monitoring the COVID-19 pandemic. Learn more at the [AMA COVID-19 resource center](#), consult the [AMA's physician guide to COVID-19](#) and check out [other episodes](#) of the AMA COVID-19 daily video update.

## Big drops in peds, adult visits

“Despite the incredible importance of preventive care, we do have data recently showing just how much preventive care declined during the height of the pandemic,” said Julie Marder, a senior policy analyst in socioeconomic policy development at the AMA, citing research from the Health Care Cost Institute. “And some of the results were really striking.”

Childhood vaccinations, for example, were down roughly 60% in mid-April 2020 compared with 2019. Mammograms and pap smears were off nearly 80%. Colonoscopies declined almost 90% and were still down roughly 30% in June.

But, experts noted, there are many preventive services that can be provided via telehealth.

“For example, patients who might need a colorectal cancer screening ... can actually get a consultation via telemedicine, and then you get a Cologuard test sent over to your house,” said Alexander Ding, MD, clinical assistant professor of radiology at University of Louisville School of Medicine and chair-elect of the [AMA Council on Science and Public Health](#). “You can do the test at home, send it right back in the mail for analysis.”

## Need for urgency, assurance

“It's really important to get [patients] back on track with their preventative care services,” Dr. Ding added. “I think the main point to make is, after six months in a pandemic ... there's no more time to wait.”

One reason for that is COVID-19 itself, said A. Patrice Burgess, MD, family medicine physician at Saint Alphonsus Medical Group, in Boise, Idaho, and member of the [AMA Council on Medical Service](#).

Physicians should emphasize immunizations, such as those for pneumonia and flu, “because you don't want to have another respiratory illness and then be more susceptible to COVID,” she said. “Even the Tdap, which protects against pertussis, can be an important thing.”

For those preventive services that require in-person visits, care has to be taken to acknowledge patients' concerns about SARS-CoV-2 transmission in health care facilities and summarize safety measures in place, Dr. Burgess noted. Her practice, like many others, has implemented dedicated COVID-19 pathways, mandatory temperature screenings and universal use of face masks.

“A health care facility is one of the safest places you can go to right now because, I think, everyone who's working there is taking safety so seriously,” Dr. Ding added.

Learn how to [help patients navigate their concerns about COVID-19 risk](#).

## Protect patients from charges

The Affordable Care Act requires insurers to cover certain preventive care services at no cost to the patient, although confusion abounds over which services qualify and for which patients.

Two new [coding guides](#) from the AMA—one regarding Medicare and another on private payers—eliminate the guesswork. Available for free on the AMA website, each coding guide provides

an alphabetical list of zero-dollar evidence-based preventive services—including screenings and vaccinations, as well as counseling and other interventions—along with details of the relevant at-risk populations and the pertinent billing codes.

It's crucial that physicians, other health professionals and their staffers communicate clearly with insurers when coding zero-dollar preventive services "to ensure that the coding matches up with the service that was provided and that it signals to the insurance company that a zero-dollar service was provided," Marder said. "Therefore, they, the insurance company, are solely responsible for paying that patient's bill."