Advocacy in action: Supporting telehealth

What’s at stake

Before the pandemic hit in March 2020, the Medicare program only paid for telehealth services in very limited circumstances:

- Patients had to reside in rural areas.
- Patients could only receive telehealth services at a medical facility.
- Two-way audio-video telecommunications equipment had to be used.
- A limited number of services were on the Medicare Telehealth List.
- Because payments were at facility rates, they were about 30% below in-office visit rates.

COVID-19 sparked policy change and led to dramatic increases in adoption of telehealth by patients and physicians. Early in the pandemic, with strong support from the AMA, such restrictions on coverage for telehealth services were lifted by Medicare and other health plans.

That move continues to benefit patients. According to an AMA survey of more than 1,300 physicians, 80% of physicians used televisits in 2022. That’s up from just 14% in 2016 and nearly triple from 2019.

Nearly 70% of doctors say they want to keep providing telehealth services. That should come as no surprise. Not only does telemedicine give more patients access to care, but research shows that telehealth and in-person diagnoses match up nearly 90% of the time.

Un fortunately, many of the telehealth flexibilities that have greatly improved patient access to care throughout the pandemic are set to expire five months after the end of the national public health emergency.

The AMA’s position

Telehealth is critical to the future of health care, which is why the AMA continues to lead the charge to aggressively expand telehealth policy, research and resources to ensure physician practice
sustainability and fair payment. And that’s why supporting telehealth is an essential component of the AMA Recovery Plan for America’s Physicians.

Policymakers must seize the opportunity to make permanent policy that supports many of these advancements for the long haul.

Achieving permanent Medicare coverage of telehealth services for patients—including allowing them to continue receiving these services in their homes—is important for patient access to care. The AMA is working to ensure physicians have the tools, resources and support to seamlessly integrate telehealth into their practices without financial risk or penalty.

That’s why the AMA supports congressional action that includes provisions to:

- Lift limitations on the locations of patients and physicians or other clinicians.
- Remove in-person requirements for telemental health.
- Ensure continued access to clinically appropriate controlled substances without in-person requirements.
- Increase access to telehealth services in the commercial market.

**AMA advocacy in action**

The AMA has:

- Secured telehealth flexibilities in Medicare through at least June 2023 by extending coverage of both audiovisual and audio-only services for five months after the COVID-19 public health emergency designation ends.
- Launched an updated model for—and helped to advance—state telehealth legislation and policy.
- Achieved House passage of legislation to extend telehealth flexibilities through the end of 2024.

The AMA is:

- Advocating Senate passage of bipartisan legislation that extends Medicare telehealth flexibilities through the end of 2024.

**Advocacy resources**

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Recently adopted AMA policy on telehealth and telemedicine.

- The AMA digital health care 2022 study findings detail physicians’ motivations and requirements for adopting digital clinical tools such as telehealth.
- The AMA Return on Health Framework and in-depth case studies show how a wide range of telehealth programs generate positive impact for patients, doctors, payers and society.
- The AMA Telehealth Immersion Program helps physicians, practices and health systems optimize and sustain telehealth at their organizations.
- Equity in Telehealth: Taking Key Steps Forward (PDF) outlines how to advance health equity in the emerging virtual care landscape.

Learn more

Visit AMA Advocacy in Action to learn more about the advocacy priorities the AMA is actively working on.