Whereas, the impact of the COVID pandemic on the daily functioning of patients and healthcare providers has been documented and evident\textsuperscript{1-6}; and

Whereas, barriers of care erected by the COVID pandemic has limited patient attendance rates in outpatient visits as well as emergent/urgent care visits\textsuperscript{7-10}; and

Whereas telemedicine has exhibited certain successes in diagnosis and management of disease, with cost-effectiveness and efficiency\textsuperscript{11-15}; and

Whereas telemedicine also has noted disadvantages including notably difficulties in ensuring patient information protection, patient utilization, and patient/provider access\textsuperscript{16-18}; and

Whereas there is currently limited research in the impact of telemedicine on patients and providers; and

Whereas existing AMA policy does not clearly advocate for research in regard to the patient’s ability to access healthcare via telemedicine; and

Whereas the COVID-19 pandemic has catalyzed the rise of many telemedicine initiatives in order to deliver healthcare and comply with safe distancing measures\textsuperscript{19}; therefore be it

RESOLVED, That our AMA will advocate for studies that provide analysis on the access of telemedicine for patients; and be it further

RESOLVED, That our AMA will advocate for further study in the efficacy of different telemedicine platforms; and be it further

RESOLVED, That our AMA will advocate for policy and measures that make telemedicine a more broadly available tool in the healthcare system for patients, when feasible.

Fiscal Note:

References:


Relevant RFS Position Statements:

240.001R Telemedicine and Medical Licensure
That our AMA study how guidelines regulating medical licenses are affected by telemedicine and medical technological innovations that allow for physicians to practice outside their states of licensure. (Resolution 4, I-07)

294.001R Telemedicine in Graduate Medical Education
That our AMA: (1) advocate for educating resident and fellow physicians during their training on the use of tele-health technology in their future practices; (2) study the barriers to optimizing the use of tele-health technology for the purposes of tele-education and specifically tele-precepting in Graduate Medical Education and the solutions to overcoming these barriers; and (3) that this resolution be forwarded to the House of Delegates at A-15. (Resolution 16, A-15)

Relevant AMA Policy:

H-480.974 Evolving Impact of Telemedicine
Our AMA:
(1) will evaluate relevant federal legislation related to telemedicine;
(2) urges CMS, AHRQ, and other concerned entities involved in telemedicine to fund demonstration projects to evaluate the effect of care delivered by physicians using telemedicine-related technology on costs, quality, and the physician-patient relationship;
(3) urges professional organizations that serve medical specialties involved in telemedicine to develop appropriate practice parameters to address the various applications of telemedicine and to guide quality assessment and liability issues related to telemedicine;
(4) encourages professional organizations that serve medical specialties involved in telemedicine to develop appropriate educational resources for physicians for telemedicine practice;
(5) encourages development of a code change application for CPT codes or modifiers for telemedical services, to be submitted pursuant to CPT processes;
(6) will work with CMS and other payers to develop and test, through these demonstration projects, appropriate reimbursement mechanisms;
(7) will develop a means of providing appropriate continuing medical education credit, acceptable toward the Physician's Recognition Award, for educational consultations using telemedicine;
(8) will work with the Federation of State Medical Boards and the state and territorial licensing boards to develop licensure guidelines for telemedicine practiced across state boundaries; and
(9) will leverage existing expert guidance on telemedicine by collaborating with the American Telemedicine Association (www.americantelemed.org) to develop physician and patient specific content on the use of telemedicine services--encrypted and unencrypted.


H-510.982 VA Technology-Based Eye Care Services
Our AMA encourages the Department of Veterans Affairs to continue to explore telemedicine approaches that increase access to quality health care to U.S. veterans, including the Technology-Based Eye Care Services (TECS) program; and will work with Congress to ensure that U.S. veterans can access eye care through the TECS program.
Res. 111, A-17

G-615.035 Technology and the Practice of Medicine
Our AMA encourages the collaboration of existing AMA Councils and working groups on matters of new and developing technology, particularly electronic medical records (EMR) and telemedicine.
Res. 606, A-14