Whereas, Across the U.S., states passed telemedicine legislation in 2020 (pre-pandemic) that allows providers to use telehealth, including asynchronous technology, to establish the physician-patient relationship; and

Whereas, The ability to access health care via telemedicine prior to the pandemic was available, but not widely used; and

Whereas, Payments to physicians for telemedicine vary by carrier and were significantly less than in-person visits prior to COVID-19; and

Whereas, The onset and severity of COVID-19 caused a rapid implementation of telemedicine by physicians of many specialties, and patients rapidly embraced the technology as often the only means to access non-emergent medical care; and

Whereas, Through directives of the federal and state governments, payors waived co-pays and deductibles and increased payment for telemedicine and telephonic services equal to in-person visits during COVID-19 which reduced barriers for patients to access medical care; and

Whereas, The federal government and states took action to allow physicians and other health care clinicians to use non-HIPAA compliant platforms if necessary to enhance patients’ use of technology to access health care; therefore be it

RESOLVED, That our American Medical Association address the importance of at least a 365-day waiting period after the COVID-19 public health crisis is over before commencement of audits aimed at discovering the use of non-HIPAA compliant modes and platforms of telemedicine by physicians. (Directive to Take Action)

Fiscal Note: Modest - between $1,000 - $5,000
AUTHOR'S STATEMENT OF PRIORITY

Due to urgent need, many physician practices implemented non-HIPAA-compliant telehealth platforms during the initial stages of the pandemic state of emergency in an attempt to ensure continuation of services and quality care for their patients. This resolution asks for the AMA to advocate for a 365-day waiting period after the COVID-19 pandemic crisis ends before commencement of HIPAA audits relating to telehealth usage. It is important that the AMA establish this policy platform before states of emergency expire and pandemic-related administrative flexibilities are terminated.