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THE AMERICAN TELEMEDICINE ASSOCIATION RESPONDS TO CMS PHYSICIAN FEE SCHEDULE FINAL RULE THAT PERMANENTLY EXPANDS MEDICARE TELEHEALTH SERVICES

WASHINGTON, DC, DECEMBER 2, 2020 – In response to the Centers for Medicare & Medicaid Services (CMS) annual Physician Fee Schedule (PFS) [final rule](#) issued on December 1, 2020, permanently expanding Medicare telehealth services, the [American Telemedicine Association](#) (ATA) issued the following statement:

“CMS got a lot right in this final rule, including making a range of telehealth services permanently available to Medicare beneficiaries. Our fingers are crossed that many of the temporary telehealth services added to the Medicare list during the public health emergency will also be made permanent,” said Ann Mond Johnson, CEO, the ATA. “This final rule is yet another clear indication that telehealth has become a permanent part of our healthcare system and we applaud the administration for its leadership to ensure our citizens have had increased access to vital telehealth services in response to COVID-19.”

As part of this final rule, more than 60 services have been added to the Medicare telehealth list that will continue to be covered beyond the end of the PHE, allowing beneficiaries in rural areas living in a nursing home or other medical facility to continue to have access to telehealth services.

“While we appreciate the progress made in this final PFS, we are disappointed that CMS did not heed concerns expressed by the medical community – clearly outlined in the [ATA’s comments](#) on the draft rule – about certain provisions related to how remote patient monitoring services are to be covered by the PFS. Moving forward, we urge CMS to reconsider its approach to some aspect of remote patient monitoring coverage based on the realities of clinical practice,” added Mond Johnson.

CMS Administrator Verma’s comments announcing this final rule emphasized the continued prioritization of access to telehealth. She also made clear that there are certain things under the law that CMS may not permanently change without action from Congress.

“Congress must act swiftly to ensure millions of Americans do not lose access to telehealth after the pandemic ends and eliminate the arbitrary geographic discrimination of 1834m of the Social Security Act,” said Mond Johnson. “The ATA strongly supports the Protecting Access to Post-COVID-19 Telehealth Act of 2020 (H.R. 7663) and the Telehealth Modernization Act (S. 4375, H.R. 8727). Passing these bills would go a long way toward ensuring all Medicare beneficiaries have continued access to telehealth services after the COVID-19 public health emergency.”

Reacting to CMS commissioning a study of its PHE-related telehealth flexibilities and explore new opportunities for telehealth, virtual care and remote monitoring services to more efficiently deliver care to patients and enhance program integrity, Mond Johnson added, “We are confident this study will demonstrate the clear value telehealth has shown this year and underscore the critical importance of making telehealth a permanent modality of care following the pandemic.”

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About the ATA

As the only organization completely focused on advancing telehealth, the [American Telemedicine Association](#) is committed to ensuring that everyone has access to safe, affordable, and appropriate care when and where they need it, enabling the system to do more good for more people. The ATA represents a broad and inclusive member network of health care delivery systems, academic institutions, technology solution providers and payers, as well as partner organizations and alliances, working to advance industry adoption of telehealth, promote responsible policy, advocate for government and market normalization, and provide education and resources to help integrate virtual care into emerging value-based delivery models. @americantelemed #telehealthishealth #ATApolicy

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