SUBJECT TO RESOLUTION COMMITTEE REVIEW

AMERICAN MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution: 203 (November 2020)

Introduced by: New York

Subject: COVID–19 Emergency and Expanded Telemedicine Regulations

Referred to: Reference Committee B

Whereas, The world is facing a global health crisis through the pandemic spread of the coronavirus COVID-19 and as a consequence the health and safety of the people of the United States are uncertain; and

Whereas, The disease poses a heightened risk to immunocompromised individuals and other vulnerable populations including the elderly, those with chronic lung disease, heart disease, cancer, and/or diabetes; and

Whereas, The COVID–19 pandemic has created situations where persons are instructed NOT to go to their physicians' offices if experiencing cough with fever unless they are in a high risk situation or experiencing shortness of breath and are told to present to the emergency department of a hospital in such cases; and it is the medical community and community health centers which serve a vital role in the maintenance of health and prevention of disease; and

Whereas, On March 4, 2020, Congress voted to approve an emergency coronavirus spending bill of \$8.3 billion to address this growing health crisis; and

Whereas, Physicians and other medical providers must be enabled to respond to the growing need for medical services including during mandatory quarantine and voluntary isolation and physicians have adopted and adapted to the use of telemedicine as a tool for caring for their patients; and

Whereas, Technology is available to patients and physicians alike to allow for personalized advice and management through various means including telephonic and video communications (telemedicine), and the utilization of telemedicine for geographic areas where access to physicians and other health care providers is not readily accessible has become increasingly important, indeed many patients find telemedicine to be more convenient and satisfying for some of their healthcare needs; and

Whereas, Since the means are available for patient care in these situations, physicians and others should be paid for their services when using such telemedicine technology; and

Whereas, Telemedicine has become an effective tool in reducing inappropriate use of emergency room and ambulance services for evaluation of acute illness and this is especially true during the Covid-19 pandemic; therefore be it

SUBJECT TO RESOLUTION COMMITTEE REVIEW

RESOLVED, That, with the expanded use of telemedicine during the Covid-19 pandemic, our
American Medical Association continue to advocate for a continuation of coverage for the fullspectrum of technologies that were made available during the pandemic and that physicians be reimbursed by government and private payers for time and complexity (Directive to Take Action); and be it further

6 7

8

9 10 RESOLVED, That our AMA advocate that the current emergency regulations for improved access to and payment for telemedicine services be made permanent with respect to payment parity and use of commonly accessible devices for connecting physicians and patients, without reference to the originating site, while ensuring qualifications of duly licensed physicians to provide such services in a secure environment (Directive to Take Action); and be it further

11 12 13

- RESOLVED, That our AMA propose that all insurance carriers provide coverage for
- 14 telemedicine visits with any physician licensed and registered to practice in the United States.
- 15 (Directive to Take Action)

Fiscal Note: Modest - between \$1,000 - \$5,000

Received: 06/18/20