

AMERICAN MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution: 227
(A-24)

Introduced by: Missouri

Subject: Medicare Reimbursement for Telemedicine

Referred to: Reference Committee B

1 Whereas, during the COVID-19 pandemic, Medicare billing rules were revised to enable and
2 facilitate reimbursement to clinicians for services rendered by telemedicine links to their
3 patients; and
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5 Whereas, these rules were adopted during the COVID-19 pandemic, and did not differentiate
6 reimbursement rates for office-based vs telemedicine-based patient care; and
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8 Whereas, commercial insurers have generally adopted Medicare’s methodology for
9 reimbursement; and
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11 Whereas, reimbursement for telemedicine services has had two salutatory effects: 1) greater
12 convenience for patients, and 2) decreased need to utilize petroleum-powered vehicles for
13 patients’ and doctors’ transit from their homes to physicians’ offices; and
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15 Whereas, for mobility-challenged patients telemedicine links offer an increased level of
16 convenience; and
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18 Whereas, American Medical Association Policy D-135.966, “Declaring Climate Change a Public
19 Health Crisis”, states that a goal for America’s health care sector is to decrease its greenhouse
20 gas emissions by 50% by 2030, and to achieve “carbon neutrality” by 2050; and
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22 Whereas, under Medicare, through December 31, 2024, Medicare will reimburse physicians for
23 charges that accrue for the provision of medical care to patients via telehealth services; and
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25 Whereas, the remission of the COVID pandemic has enabled much medical care to again be
26 provided in “brick and mortar” offices, which makes it imperative that reimbursement rates for
27 office-based care should be greater than reimbursement rates for telemedicine-based care, due
28 to the greater overhead expenses associated with office-based care; and
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30 Whereas, to extend indefinitely the policy of reimbursement to physicians for services provided via
31 telemedicine links (at rates lower than provided for office-based care) would be salutatory toward
32 patient convenience and toward reducing the greenhouse gas emissions attributable to the
33 healthcare sector, a previously-established goal of our AMA via its Policy D-135.9661; therefore
34 be it
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36 RESOLVED, that our American Medical Association support removal of the December 31, 2024
37 “sunset” date currently set for Medicare to cease reimbursement for services provided via
38 telemedicine, such that reimbursement of medical services provided by telemedicine be
39 continued indefinitely into the future, consistent with what would be determined by the Relative
40 Value Update Committee (“RUC”). (New HOD Policy)

Fiscal Note: Minimal - less than \$1,000

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