



July 10, 2020

The Honorable Nancy Pelosi  
Speaker  
United States House of Representatives  
Washington, DC 20515

The Honorable Mitch McConnell  
Majority Leader  
United States Senate  
Washington, DC 20510

Dear Speaker Pelosi and Majority Leader McConnell:

On behalf of the American College of Allergy, Asthma and Immunology (ACAAI) and the Advocacy Council of the ACAAI, we are writing to offer our recommendations for sustainable telehealth policies that we believe should be permanently adopted once the COVID-19 Public Health Emergency 1135 Waiver authority expires.

ACAAI is the leading medical professional society representing more than 6,000 board certified allergy and immunology physicians and health care professionals.

Since the early days of the COVID-19 pandemic, Congress has sought to change or modify policies that would facilitate the delivery of health care to the American people. We applaud the bi-partisan efforts in this regard.

Through statutory changes or extensions of waiver authority to HHS/CMS, your actions have been critically important in keeping medical practices economically viable and available for patient care. Some of the more significant temporary changes you have adopted or facilitated have to do with the expanded use and availability of telehealth.

Like many of our physician colleagues, allergy/immunology (A/I) physicians have worked tirelessly to help reduce the spread of COVID-19, while at the same time, providing much needed care to our patients. Without the telehealth flexibilities you have approved or promoted, this would not have been possible. Frankly, many A/I physician practices would likely have been forced to close and their patients would not have been able to access the care they needed.

We are optimistic that within the next few months, health care delivery will be restored to a point where most patients will feel comfortable returning to the physician's office for face-to-face care. However, having been exposed to the opportunities and efficiencies achievable by telehealth, many patients and physicians are finding that this is a preferred way of physician-patient engagement for many services that previously could only be provided face-to-face.

This then raises the question that has been on everyone's mind: What next?

What happens when the PHE ends and the telehealth waivers that were adopted under the 1135 authority are no longer in place? Most will expire unless extended via a more permanent change in the telehealth regulations or the underlying telehealth laws.



American  
**College**  
of Allergy, Asthma  
& Immunology



**ADVOCACY  
COUNCIL**

of the American College of  
Allergy, Asthma & Immunology

We want to strongly encourage Congress to enact whatever legislation is necessary to permanently remove the barriers that restricted the availability of telehealth services pre-COVID-19.

Specifically, we ask that the following policies be maintained through legislation:

1. Repeal the statutory limitation that telehealth visits must originate from a rural area.
2. Repeal the statutory requirement that the patient present at an “originating” site as a condition for payment for a telehealth visit.
3. Statutorily authorize the ability to use non-HIPAA compliant audio/video communication tools for telehealth visits.
4. Direct CMS to maintain the expanded list of services that can be provided via telehealth.
5. Modify the Anti-Kickback (Stark law) statute to authorize voluntary waivers of Medicare co-pay or deductible for telehealth services.
6. Mandate payment parity for all providers between Medicare payments for telehealth visits and in-person visits - for the same services.
7. Authorize the use of audio-only (i.e. traditional phone) for conducting telehealth visits.
8. Authorize Medicare payments for telehealth visits provided to out-of-state Medicare beneficiaries in states that allow Medicare recognized telehealth providers to practice in the state in which the patient is located.
9. Urge CMS to allow a physician to engage in a telehealth visit with established AND new patients.

The ACAAI and the Advocacy Council greatly appreciate Congressional efforts to promote greater use of telehealth during the COVID-19 pandemic. We believe the experience with telehealth over the past three months demonstrates that the time has come to fully integrate telehealth into the health care delivery toolkit.

Your consideration of the above recommendations is appreciated. Please do not hesitate to contact us if you have any questions or need any additional information.

Sincerely,

Allen Meadows, MD, FAAAAI  
President  
American College of Allergy, Asthma  
and Immunology

James M. Tracy, MD, FAAAAI  
Chair  
Advocacy Council of ACAAI

CC: Members of Congress