

May 8, 2020

Ms. Seema Verma
Administrator
Centers for Medicare & Medicaid Services
Hubert H. Humphrey Building
200 Independence Avenue SW, Room 445-G
Washington, DC 20201

Re: Risk Adjustment in Medicare Advantage

Dear Administrator Verma:

The undersigned organizations are writing to urge the Centers for Medicare & Medicaid Services (CMS) to provide additional flexibility to **count diagnoses obtained from audio-only telehealth services for risk adjustment purposes** under the Medicare Advantage program, individual and small group markets as well as accountable care organizations during the ongoing COVID-19 public health emergency.

We applaud the many actions you have taken in response to the current pandemic to provide tools and flexibilities so patients across the care spectrum can access care in a safe way. We also commend CMS for related actions that encourage those practices, such as allowing Medicare Advantage plans to take into account diagnoses from telehealth encounters with both audio and video components for risk adjustment purposes. However, many patients who are low-income, seniors, and/or reside in rural areas of the country have trouble accessing the technology or broadband internet service. In addition, many have expressed difficulty in navigating the video technology included on video equipped smartphones and similar devices.

Barriers that discourage patient participation in telehealth or put organizations in greater financial peril will prevent patients from receiving necessary care. Providers have had to adapt to the reality of the COVID-19 pandemic by transitioning up to 70 percent of care to telehealth, these services now hold particular importance for providers, patients and the Medicare Advantage program. In light of recent guidance defining audio-only services as telehealth in traditional Medicare for the duration of the public health emergency, risk adjustment for these services is even more critical.

In addition, in most situations, particularly for established patients with chronic conditions, physicians can adequately confirm a diagnosis through audio-only encounters using patient history, combined, where necessary, with a discussion and/or analysis of symptoms, labs, and vitals such as weight, blood pressure, and heartrate which may be taken by patient at home. In these instances, the video component of telehealth services does not offer any additional benefit over audio-only technology; confirmation of patient conditions through audio-only technology is both easily accomplished and a crucial component of patient care at this time.

Thank you for your attention to this issue. We also strongly urge you to consider **additional measures to stabilize Medicare Advantage premiums and supplemental benefits in 2021** due

to anticipated negative impacts on the risk adjustment program stemming from the COVID-19 public health emergency. We look forward to continuing to work with you throughout this process.

Sincerely,

Alliance of Community Health Plans (ACHP)
America's Health Insurance Plans (AHIP)
America's Physician Groups (APG)
AMGA
Blue Cross Blue Shield Association
Better Medicare Alliance
National Association of ACOs
Premier