



February 26, 2021

The Honorable Frank Pallone  
Committee on Energy and Commerce  
Chair  
United States House of Representatives  
2125 Rayburn House Office Building  
Washington, DC 20515

Re: House Energy and Commerce Health Subcommittee Telehealth Services Hearing

Dear Chairman Pallone:

America's Physician Groups would like to thank you for your efforts to address the struggles that healthcare organizations have faced during the ongoing COVID-19 pandemic. As you know, the community public health need is still great. Of particular importance is the future of telemedicine. In the wake of the COVID-19 pandemic, these services have become vital in treating patients where they are as the nation embarks on widespread social distancing. **Telehealth services allow physicians to extend access in a high-quality cost-effective manner which is aligned with our mission of capitated, delegated, and coordinated care.**

#### **About America's Physician Groups**

APG is a national professional association representing over 300 physician groups that employ or contract with approximately 195,000 physicians that provide care to nearly 45 million patients. Our tagline, "Taking Responsibility for America's Health," represents our members' vision to move from the antiquated fee-for-service (FFS) reimbursement system to a value-based system where physician groups are accountable for the cost and quality of care. Our preferred model of capitated, delegated, and coordinated care eliminates incentives for waste associated with FFS reimbursement. APG member organizations are working diligently to rise to the challenge presented by the COVID-19 pandemic.

#### **Summary of Key Takeaways in Telehealth During the COVID-19 Public Health Emergency**

##### ***Improvements***

- Telehealth has improved patient access, convenience, and quality of care through virtual physician visits, ancillary visits, and enabled the industry to continue population health and health promotion initiatives
- Patient satisfaction with the increased access to care and convenience of telehealth services has been notable
- Telemedicine has helped to reduce unnecessary emergency visits and urgent care visits, which has decreased the overall total cost of care

- Providers have made substantial investments in infrastructure (e.g. phone capabilities, network, workflows, capturing data, privacy concerns when patient technology is not up to par with the EHR, clinical protocols, staff training, CBO, coding, billing, etc.) to ensure they can provide high quality telehealth services to meet patient needs

### ***Recommendations***

- HIPAA waivers have been helpful in providing care and allowing patients (senior patients especially) to use compliant platforms they are familiar with. However, we are aware that some of these non-HIPPA compliant applications and platforms may compromise security thus It will be important to weigh the benefits of expanding access via the use of consumer-based technology versus potential privacy and security risks
- Payment policies that have been adjusted during the public health emergency should be retained until more research is completed regarding resources needed in telemedicine
- All payors should be encouraged to align payment policies and coding requirements
- Medicare Advantage risk adjustment should recognize diagnoses from all visits, including audio-only telephone visits, which have comprised a significant proportion of care during the pandemic
- Establishing a form of blanket patient consent should be explored in Congress to facilitate the provider connect via the 2-way video method that the patient is most comfortable
- Federal, state, and local governments regulations should be aligned
- Allow cross state line access for established patients who are traveling out of state

### **Member Case Studies**

As the healthcare landscape has changed in response to the COVID-19 public health emergency, telehealth services have taken on a greater importance in how physicians treat patients. Providers have had to adapt to the reality of the COVID-19 pandemic by making substantial investments in infrastructure and transitioning up to 70 percent of care to telehealth.

For example, Agilon Health, a medical group based in the Los Angeles area with organizational partnerships spanning the country, reported no virtual healthcare visits prior to the COVID-19 pandemic. Once the outbreak began, 900 primary care providers across 10 Agilon practices/physician organizations pivoted to providing virtual E&M/annual wellness visits. With the new telehealth flexibilities passed during the PHE, Agilon has provided over 30,000 telehealth visits for seniors enrolled in Medicare Advantage plans, representing 40 percent of the total primary care visits that were performed during the pandemic. Of the patients treated through telehealth at Agilon, 15 percent suffer from more than four chronic conditions.

Other physician practices have reported similar data in response to the expansion of telehealth during the pandemic. Central Ohio Primary Care (COPC) is a physician practice based in Columbus, OH that reported no telehealth visits prior to the COVID-19 outbreak. In the time since, COPC has done 113,299 video visits with 43,102 telehealth visits completed in April 2020, comprising 73 percent of all visits for that month. In July 2020, 16 percent of COPC's visits for patients over the age of 65 were conducted through telehealth. COPC has also utilized telehealth to provide its patients with convenient access to care by conducting 1,100 video visits after hours and during weekends through a system that places patients in a queue where

they will be seen by physicians as they become available. As of February 2021, COPC reports having had over 200,000 telehealth visits. Barriers that discourage patient participation in telehealth or put organizations in greater financial peril will prevent patients from receiving necessary care.

As physicians have rapidly adapted to the new paradigm of care during this public health emergency, the additional waivers and regulatory changes surrounding telehealth services have been vital in creating pathways for organizations facing financial peril resulting for the pandemic. In the case of Agilon Health, as face-to-face visits dropped by 57 percent, the expansion of telehealth visits allowed the clinic to successfully recoup half of the lost visits, lessening the decline in overall visits by just 26 percent.

Telehealth also holds tremendous potential to impact health outcomes management. Early, correlation-based findings from ChenMed, a Miami, FL value-based provider, have shown that utilization of telehealth services can lower hospital encounters, both ER usage or admission, if patients utilize both office and telehealth visits rather than office visits only. This was again especially impactful for the sickest patients seen at ChenMed with the sickest 10 percent of patients avoiding hospitalization through the combined usage of telehealth and office visits. In a survey of its patient population, Agilon Health found that over 90 percent of respondents reported being “highly satisfied” or “satisfied” with their virtual visit. Groups that integrate telemedicine into their practices are creating a better service than stand-alone businesses. This type of integration needs to be encouraged and rewarded.

### **Recommendations**

As the movement away from volume-based services toward value-based services continues, supporting telehealth services as strongly as possible takes on increased importance due to how well telehealth compliments capitated, coordinated care in general. The increased integration of systems, the coordination and sharing of healthcare data and electronic health records that are required to properly offer telehealth services are integral parts of coordinated care based on risk and will make any transition of our healthcare system toward this model of care much smoother while also helping to quickly achieve the goal of offering higher quality care at a lower cost.

Thank you for your attention to the above comments. We reiterate our robust support for telehealth services and their importance during this COVID-19 pandemic. We look forward to continuing to work with you throughout this process. Please feel free to contact Valinda Rutledge, Executive Vice President, Federal Affairs, ([vrutledge@apg.org](mailto:vrutledge@apg.org)) if you have any questions or if America’s Physician Groups can provide any assistance as you consider these issues.

Sincerely,



Donald H. Crane  
President and CEO  
America’s Physician Groups