

Colleagues,

As COVID-19 continues to rear its ugly head, communities around the world are experiencing the devastating effects of this pandemic. Those of you serving on the front lines know this all too well and continue to make personal sacrifices, including that of your own safety, to serve patients. While you help patients fight this virus, the AAFP is fighting fiercely on your behalf to make sure you have what you need to protect yourself and serve your patients during this crisis. Here are some highlights of these efforts over the past week:

### **AAFP membership requirements**

We understand you may have concerns regarding CME requirements for AAFP membership and we want you to know we are evaluating options to accommodate the current situation. We plan to communicate about this very soon.

### **Payment and Practice Management**

We understand that this crisis is putting financial strain on many of you and your practices. The AAFP has joined forces with many other medical associations and groups to urge HHS to take immediate action to [make periodic interim payments to health care professionals](#) to get you relief.

CMS heard our cries for MIPS reporting relief during this public health crisis and extended the deadline for submitting performance year 2019 data from March 31 to April 30. In addition, clinicians not submitting data by then will qualify for the automatic "extreme and uncontrollable circumstances policy" and receive a neutral payment adjustment for the 2021 MIPS payment year.

The current COVID-19 stimulus package pending congressional approval suspends the 2% Medicare sequestration through the end of the year.

New guidance from the AMA provides special coding advice during the COVID-19 public health emergency. One resource [outlines coding scenarios](#) designed to help health care professionals apply best coding practices. The scenarios include telehealth services for all patients. Examples specifically related to COVID-19 testing include coding for when a patient:

- Comes to the office for an E/M visit and is tested for COVID-19 during the visit.
- Receives a telehealth visit regarding COVID-19 and is directed to come to a physician office or physician group practice site for testing.
- Receives a virtual check-in/online visit regarding COVID-19 (not related to an E/M visit) and is directed to come to a physician office for testing.

There is also a quick-reference flowchart that outlines [CPT reporting for COVID-19 testing](#).

In the middle of this crisis, managing preventive and nonurgent care can be a challenge. This week, we issued a [statement and guidance](#) about reducing or postponing nonurgent outpatient face-to-face care.

### **Telemedicine**

The AAFP continues to aggressively fight to make sure you get paid for telehealth services at parity with in-person services.

- Federal legislation being debated in Congress will allow federally qualified health centers and rural health clinics to be reimbursed for providing telehealth. This is a limitation of current Medicare policy that the AAFP is working hard to change.
- The AAFP is advocating for CMS to allow telehealth visits to be conducted via phone-only and not just audio-video, as right now phone visits can only be billed as Medicare virtual check-ins.

The AAFP has posted information on the [Telehealth resources page](#) clarifying Medicare telehealth reimbursement policy in the wake of the emergency waiver changes implemented earlier this month.

We know that physicians and patients in rural areas may not have the infrastructure in place to support telehealth visits. Federal legislation being debated in Congress includes funding for rural broadband infrastructure and funding for other telehealth support grants. The AAFP continues to fight for federal resources directed toward physician practices to support the uptake/expansion of telehealth services.

### **Education**

We are hosting a weekly virtual Town Hall every Wednesday at 7 p.m. CT to share important information with you and answer your questions. If you missed last night's Town Hall, you can watch the replay on our [COVID-19 communications page](#). When you join the live session or watch the replay, you can receive [one CME credit each week](#).

You can also receive CME credit for any self-study/self-directed activities you are doing to research and learn about COVID-19. Visit the [COVID-19 education page](#) to learn how to report and claim your CME credit.

### **Supplies**

Many of you continue to struggle with getting the PPE you need to keep yourself, your staff and your patients safe. We continue to battle and throw the full weight of our 134,000+ member physicians, residents and students behind ensuring the federal and state governments deliver supplies where they are needed most – to the front lines.

You should be able to provide your own PPE if it is not available through your practice or health care system, and you should not be required to serve patients without the appropriate PPE. The AAFP issued an [official statement today](#) supporting your ability to exercise your own professional judgement as it relates to PPE.

We continue to add new resources, tools and advocacy information to the [AAFP's COVID-19 site](#). The page has been reorganized to help you quickly get what you need and also contains a link to the daily updates so that you can easily see what's new for the day. Please set aside a few minutes to check the site every day.

Last week, we shared that the Society of Critical Care Medicine has launched a [free series of videos addressing critical care for non-ICU clinicians](#) that family physicians may be interested in. This continues to be a valued resource, so we wanted to make sure to highlight it again.

Thank you for your service and sacrifice to help patients and communities. Together, we will fiercely fight this COVID-19 beast.

Stay strong, stay well and carry on,

Gary LeRoy, MD

President

American Academy of Family Physicians