March 24, 2020

The Honorable Nancy Pelosi                  The Honorable Mitch McConnell
Speaker                                  Majority Leader
United States House of Representatives United States Senate
Washington, DC  20515                    Washington, DC  20510

The Honorable Kevin McCarthy              The Honorable Charles Schumer
Minority Leader                          Minority Leader
United States House of Representatives United States Senate
Washington, DC  20515                    Washington, DC  20510

Dear Speaker Pelosi, Minority Leader McCarthy, Majority Leader McConnell, and Minority Leader Schumer:

On behalf of the American College of Physicians (ACP), I am writing to provide our recommendations for a final COVID-19 bill that provides for the health and economic security of our nation. We know that Congress has little time to negotiate the remaining details of this package and we urge you to incorporate the views of internal medicine physicians to ensure; that patients have access to needed care and are able to afford it, and that the United States has the capacity needed to address this growing national health emergency.

The American College of Physicians is the largest medical specialty organization and the second-largest physician membership society in the United States. ACP members include 159,000 internal medicine physicians (internists), related subspecialists, and medical students. Internal medicine physicians are specialists who apply scientific knowledge and clinical expertise to the diagnosis, treatment, and compassionate care of adults across the spectrum from health to complex illness. Internal medicine specialists treat many of the patients at greatest risk from COVID-19, including the elderly and patients with pre-existing conditions like diabetes, heart disease and asthma.

ACP strongly believes that a final bill must:

1. **Support and sustain physician practices by providing emergency grant programs and low-interest loan programs and by requiring that all payers cover and pay for audio-only telephone consultations between physicians and their patients.**
   a. *We support an amendment to the Corona Virus Aid, Relief, and Economic Security (CARES) Act, S. 3548, entitled the Immediate Relief for Rural Facilities and Providers Act of 2020, as introduced by Senators Bennett and Barrasso that would provide grants and low-interest loans to physicians during this crisis.*
   b. *We also support the Public Health and Social Service Emergency Fund (PHSSEF) provision in the Take Responsibility for Workers and Families Act, H.R. 6739, introduced by*
Speaker Pelosi and Majority Leader Hoyer, which we understand would allow a physician practice to apply for grants to offset lost revenue related to COVID-19. Eligible health care organizations include hospitals, critical access hospitals, skilled nursing facilities, physician practices, home health providers, community health centers, ambulatory surgical care centers, or hospices that participate in Medicare or Medicaid.

c. Congress should also require that all payers, including self-insured plans, cover and pay for audio-only telephone consultations between physicians and their patients. While virtual telehealth visits may be covered in some cases by insurers, they typically are paid far less than in-person visits, and do not include traditional audio-only phone calls with patients, only video-enabled telehealth applications. Many patients, especially seniors, have access to phones but not video-enabled telehealth apps. As physicians convert in-person visits to virtual ones, practices are experiencing huge reductions in revenue while still having to pay rent, meet payroll, and meet other expenses without patients coming into their practices. Requiring all payers to cover and reimburse physicians for audio-only will ensure that patients without advanced video-sharing capabilities are able to get care virtually, while helping to sustain physician practices.

2. Use all possible means to ensure that there is sufficient funding, manufacturing, supply, and distribution capacity to get Personal Protective Equipment (PPE) immediately to every physician, nurse, and health worker on the front lines of caring for patients who may have COVID-19.
   a. ACP welcomes the provisions in H.R. 6739 which provide more than $1.6 billion for the Strategic National Stockpile to procure pharmaceuticals, personal protective equipment (PPE), and other medical supplies, which can be distributed to State and local health agencies in areas with shortages.
   b. We also support the COVID-19 Workers First Protection provisions in H.R. 6739.

3. Ensure Medicaid Parity throughout the duration of the COVID-19 national emergency.
   a. We support a provision in H.R. 6739 that would provide for the renewal of application of the Medicare payment rate floor to primary care services furnished under Medicaid. This will ensure that primary care physicians and internal medicine and pediatric subspecialists are paid no less than they would be paid under Medicare for the duration of the public health emergency.

4. Suspend Medicare sequester throughout the duration of this national emergency. We appreciate that provisions to suspend the Medicare sequester during this crisis were included in COVID-19 legislative proposals offered by Senator McConnell as well as in H.R 6739 and ask that suspension of the sequester remain in the final bill.

5. Expand coverage related to COVID-19. ACP supports provisions in H.R. 6739 to increase federal support for state Medicaid programs, provide no cost-sharing coverage of COVID-19 vaccines and treatment, ensures that adult Medicaid beneficiaries receiving traditional Medicaid benefits have access to a future COVID-19 vaccine without any out-of-pocket costs, and provide optional coverage with no cost-sharing of COVID-19 treatment and vaccines under
Medicaid for uninsured individuals, and increased FMAP for medical assistance to newly-eligible individuals.

6. **Reauthorize and increase funding for critical health programs**, including Community Health Centers, the National Health Service Corps (NHSC), Teaching Health Center Graduate Medical Education (THCGME), the Centers for Disease Control and Prevention (CDC), and the Public Health and Social Services Emergency Fund (PHSSEF).

*ACP also recommends that Congress pay physicians and hospital 110 percent of the Medicare rates for providing COVID-19-related treatment for uninsured persons, and increase Medicare physician fee schedule payments to physicians for the duration of the public health emergency.*

ACP appreciates the work being done by Congress to address the COVID-19 public health and economic emergency. We offer the above recommendations in the spirit of improving the legislation so that it provides the support needed to both physicians and patients, and urge that they be included in any final bill.

Sincerely,

Robert M. McLean, MD, MACP
President