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March 30, 2020

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Seema Verma, Administrator
Centers for Medicare and Medicaid Services (CMS)
U.S. Department of Health and Human Services
200 Independence Avenue, SW
Washington, DC 20201

Dear Administrator Verma,

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On behalf of the American Psychiatric Association (APA), the national medical specialty society representing 38,500 physicians specializing in psychiatry, we are writing this follow-up to our previous letter **requesting that CMS waive the requirement for a video element specifically for telemedicine provided for mental health and substance use diagnoses when that option is not available.** Based on the large number of calls and emails we are receiving from our members who care for Medicare and Medicaid patients, we fear this situation has become critical.

APA greatly appreciates the accommodations CMS has made thus far to lift restrictions on telemedicine, unfortunately without a waiver on the requirement for a video component when telepsychiatry is provided, many extremely vulnerable patients will be denied care. The Medicare population represents the segment of our society least likely to have the technical capacity to communicate using video applications, while they are quite comfortable with the telephone which they have been using all their lives. Many Medicare and Medicaid patients are only minimally connected to the online world, if at all. These are the same people who are most vulnerable to COVID-19, and may have the most difficulty coping with the anxiety created by this national medical emergency.

One member who provides care in a suburban clinic told us that they were set up to use the Doxy app to provide care to their patients, but that only about 30% of the patients were either able or willing to participate in a Doxy interaction. She told us that either the patients they contacted don't have access to the necessary technology, or, because of their mental illness were too fearful, to employ it. Another member, who practices in a rural community, explained that most of his elderly patients don't have computers or telephones with video capacity.

Many of our members have been providing necessary care to their patients who don't have video capacity since the beginning of the COVID-19 emergency because the patients desperately needed that care. We also ask that this change be made

retroactive so that these Medicare providers can be reimbursed for the care they've already provided. A number of the large commercial insurers have already eliminated the requirement that telemedicine provided for behavioral health have a video component. We hope CMS will quickly follow suit.

We understand CMS is doing everything it can to ensure Medicare and Medicaid patients continue to receive necessary medical care and ask that you make this accommodation so that patients will not be denied important psychiatric care because they fail to have the necessary technology in their homes. If you have questions or would like to discuss this, please contact Becky Yowell, Director of our Office of Reimbursement at byowell@psych.org.

Thank you for your consideration.

Sincerely,

A handwritten signature in black ink that reads "Saul Levin, M.D., M.P.A." The signature is written in a cursive, flowing style.

Saul M. Levin, M.D., M.P.A., FRCP-E, FRCPsych
CEO and Medical Director