

AAFP urges changes in telemedicine compensation

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an originating site so that physicians can care for patients wherever they are.

"The fees for [telemedicine](#) do need to be improved in order to push it forward in a fee-for-service environment," Steven Waldren, M.D., director of the AAFP's Alliance for eHealth Innovation, said in a statement.

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(HealthDay)—Significant changes should be made to delivery and payment of telemedicine services, according to an article published by the American Academy of Family Physicians (AAFP).

The author of the article notes that advocates for telemedicine expect it to increase patients' access to care at a lower cost. Several health organizations recently sent a letter to the U.S. Department of Health and Human Services Secretary asking for Medicare to pay for telemedicine consultations through eligible accountable care organizations.

According to the report, billing represents a major obstacle to expansion of the use of telemedicine. In a recent survey, the main reason given for not billing for telemedicine was that neither private insurers nor Medicaid will pay for the service. If a telemedicine consultation is arranged in a family physician practice (originating site), that practice is eligible for a \$25 facility fee from Medicare, but this fee is inadequate to cover the fixed and variable costs associated with use of the technology. In addition, the letter requests that telemedicine be defined more broadly than under current law, and recommends dropping the restrictive definition of

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