March 12, 2021

The Honorable Chuck Schumer  The Honorable Mitch McConnell
Senate Majority Leader  Senate Minority Leader
United States Senate  United States Senate
Washington, DC 20510  Washington, DC 20510

The Honorable Nancy Pelosi  The Honorable Kevin McCarthy
Speaker of the House  Minority Leader
U.S. House of Representatives  U.S. House of Representatives
Washington, DC 20515  Washington, DC 20515

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

The Alliance of Community Health Plans (ACHP) urges Congress to take immediate action to allow all telehealth encounters in Medicare Advantage (MA) to be counted for risk-adjustment to protect seniors’ access to critical future benefits. Timing is of the essence – action is needed by April, in advance of upcoming MA bid deadlines.

ACHP represents the nation’s top-performing non-profit health organizations improving affordability and outcomes in the health care system. ACHP member companies are provider-aligned health organizations that provide high-quality coverage and care to more than 24 million Americans across 36 states and D.C. They are leaders in creative affordable ways to deliver care, including virtually.

Since the beginning of the COVID-19 pandemic, millions of Americans in every state in the nation have relied on telehealth to safely receive care. It is truly a bipartisan bright spot. Access to telehealth has been essential for older Americans and those with chronic conditions who face higher risks of complications if they contract COVID-19. Utilizing virtual care reduces the risk of exposure to COVID-19 and mitigates the spread of COVID and other illnesses for both patients and clinicians.

As we enter the second year of the pandemic, ACHP member organizations are still unable to submit comprehensive encounter data used in MA risk-adjustment. Although CMS unshackled previous telehealth restrictions and allowed diagnoses from video-based encounters to be used in the MA risk-adjustment program, it has not done the same for audio consults. This narrow approach unfairly disadvantages seniors in rural and underserved communities who may lack access to broadband services or video technology. Even seniors with access to video platforms may struggle to use the technology or lack the
comfort of meeting with a clinician on a video screen. For these millions of seniors, an audio-only visit is the only option for receiving care.

Including audio-only diagnoses is imperative to ensure that health costs are adequately captured in calculating the next year’s benefit offerings and payment. Including all encounters in risk adjustment also provides the information necessary for health plans to comprehensively manage patient care.

Without complete and accurate documentation of diagnoses, MA organizations will experience payment reductions, leaving health plans and providers with fewer resources and potentially exposing patients to higher out-of-pocket costs and reduced benefits. This is a significant concern for seniors in rural, minority, impoverished and other underserved communities already struggling with disparities in access to care.

ACHP calls on Congress to protect benefits for seniors enrolled in MA by:

- **Pass the Ensuring Parity in MA for Audio Only-Telehealth Act of 2021.** This bipartisan, bicameral legislation would ensure seniors continue to have access to the high value care and critical supplemental benefits provided by MA and reduce health disparities. The legislation would also ensure audio-only telehealth remains available for seniors and allows MA plans to fully document the health conditions of every patient they cover.

- **Urge CMS to allow MA organizations to use a 24-month look-back period to supplement 2020 data for the calculation of 2021 risk scores.** Implementing a 24-month look-back, allowing health plans to supplement 2020 encounter data with data from 2019 would mitigate the negative impact of under-risk-adjusting as a result of care delivered through unallowable encounters – such as audio-only telehealth services - during the pandemic. Importantly, CMS would be exercising authority already available to the Administration and ensure consistency between audio- and video-based telehealth.

These simple steps would protect benefits that seniors rely on for coordinated, comprehensive health care. Seniors should have the peace of mind that the benefits they rely upon to support their well-being, especially during a pandemic, will not be lost. Future benefits at risk from inaction include non-emergency transportation, food delivery, dental benefits, hearing aids and virtual visits with clinicians, among others. ACHP urges Congress to protect seniors and the stability of the health care system in the face of unprecedented disruption. We look forward to working with you to support the more than 26 million seniors currently enrolled in MA plans.
If you have questions or require additional information, please contact Tricia Guay, ACHP Director of Legislative Affairs, at tguay@achp.org.

Regards,

Ceci Connolly
President and CEO

cc:
The Honorable Catherine Cortez Masto
The Honorable Tim Scott
The Honorable Terri Sewell
The Honorable Gus Bilirakis
The Honorable Ron Wyden
The Honorable Mike Crapo
The Honorable Richard Neal
The Honorable Kevin Brady
The Honorable Frank Pallone
The Honorable Cathy McMorris Rodgers