# PUBLICATION

## AMA Issues Telemedicine Guidelines [Ober|Kaler]

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**On June 11, 2014, the American Medical Association (AMA) released a new set of telemedicine principles, which emerged from its policy report addressing "Coverage and Payment for Telemedicine". The AMA report details the limited coverage available for telemedicine services under Medicare, Medicaid, and private insurers, and calls for expanded Medicare coverage. Specifically, the AMA calls for payors to acknowledge and pay for non-face-to-face electronic visits, and for CMS to reimburse services provided through telemedicine as it reimburses for other forms of consultation. Some of the principles included by the AMA are:**

- A valid patient-physician relationship must be established before the provision of telemedicine services;
- Physicians must abide by state licensure and medical practice laws and requirements of the state in which the patient receives services; and
- Patients must have a choice of provider, as well as access to licensure and board qualifications of the provider.

The AMA report was released on the heels of the draft "Interstate Medical Licensure Compact", published by the Federation of State Medical Boards (FSMB). By adopting the yet to be finalized Compact, states would implement an accelerated licensing process for physicians seeking to practice in multiple states. Under the Compact, physicians would designate a state of principal license, and thereafter could apply for expedited licenses from other member states. The FSMB expects that the Compact will shrink barriers to being licensed in multiple states, thereby facilitating the growth of telemedicine.

## Ober|Kaler's Comments

While the acceptance of telemedicine continues to grow in the private pay and Medicaid arenas, Medicare's coverage and payment for telemedicine services still lags far behind. The efforts of the AMA and FSMB should help to establish principles that all payors can use to promote greater access to quality care that is appropriately regulated.