

May 8, 2020

The Honorable Nancy Pelosi  
Speaker of the House of Representatives  
U.S. Capitol Building, H-222  
Washington, DC 20515

The Honorable Mitch McConnell  
Senate Majority Leader  
U.S. Capitol Building, H-230  
Washington, DC 20510

The Honorable Kevin McCarthy  
House Republican Leader  
U.S. Capitol Building, H-204  
Washington, DC 20515

The Honorable Charles Schumer  
Senate Democratic Leader  
U.S. Capitol Building, S-221  
Washington, DC 20510

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

The group of undersigned organizations positively note the actions taken by Congress and the Administration to assist physicians, clinicians, and hospitals on the frontlines of the COVID-19 pandemic. The passage of H.R. 748, the “Coronavirus Aid, Relief, and Economic Security Act” (CARES Act) and subsequent H.R. 266, “Paycheck Protection Program and Health Care Enhancement Act” were essential steps in ensuring the sustainability of the health care infrastructure, supporting small businesses and helping individuals who have been deeply affected by this crisis.

As you consider next steps to confront the public health and economic implications of this crisis, we urge you strongly consider support to the healthcare delivery system as they continue to treat COVID-19 patients and others who are suffering from a myriad of ongoing health conditions:

**1. *Provide additional direct, focused financial support to physician and non-physician practices and their management partners, hospitals, and ASC’s across the health care delivery system***

The coronavirus pandemic, leading to surges in COVID-19 cases and halting of non-essential procedures has forced many providers to make difficult decisions to maintain the stability of their practices. Experts from Yale School of Management [are predicting](#) radiology practices should expect volume decreases as high as 70% for months. Some hospital systems are projecting [losses in the billions](#) as routine health services are cut, and many small practices are [struggling](#) to meet short-term obligations, such as payroll and rent. To support the long-term stability of our health care delivery system, we support further Congressional authorization of direct assistance including grants, loans, and any other mechanisms for physician and non-physician practices and their management partners, hospitals, and ambulatory surgery centers to ensure they can weather this storm to continue providing necessary care to millions of patients across the country.

**2. *Waive budget neutrality for the Medicare payment changes for evaluation and management (E/M) services that are slated to be implemented on January 1, 2021***

Healthcare provider practices are already struggling to maintain operations and now is not the time to implement payment change policies that will generate even greater instability for providers. We are concerned about the sizable cuts, especially as it relates to evaluation and management services (E/M) included in the Centers for Medicare and Medicaid Services’ (CMS) final Medicare Physician Fee Schedule (MPFS) rule for CY 2020. We request that Congress waive the budget neutrality provisions for E/M services in the Medicare rule and prevent further economic burdens for healthcare providers.

3. ***Support all essential medical imaging and radiology workers, including sonographers, radiation therapists, nuclear medicine, and radiologic technologists by providing HEROES/hazard pay***

Medical imaging is an important tool in the diagnosis and treatment of COVID-19. The first step in the emergency room for a COVID-19 patient is a chest x-ray or other image, requiring multiple radiologic technologists. Throughout the hospital stay, sonographers, nuclear medicine technologists, and radiation therapists are involved in care pathways. Sonographers, radiation therapists and technologists, like dozens of other health care professionals, are tirelessly risking catching COVID-19 to serve others during this pandemic. We urge support, through enactment of HEROES/hazard pay, for inclusion of these frontline medical imaging and radiology workers as they continue to deliver quality patient care in a much higher risk environment.

4. ***Reduce liability for health care workers and emergency responders in this crisis***

During this public health emergency, health care workers and emergency responders have stepped up to serve patients under extraordinary circumstances. Legal liability remains a significant obstacle for those considering how best to lend their services and for those considering altering their practice to assist in the fight against the pandemic. Although many liability protections exist for volunteers responding to this pandemic on both the state and federal level, these enhanced liability protections do not apply to most paid health care workers. We encourage Congress to extend broad civil immunity to all health care personnel for any injury or death alleged to have been sustained directly as a result of an act or omission in the course of providing medical services in response to the COVID-19 pandemic, with exceptions for gross negligence or willful misconduct.

5. ***Temporary waiver of prior authorizations during pandemic/state of emergency***

As stay-at-home orders are gradually lifted, clinician practices may not be prepared to handle the administrative burden related to a surge of patients seeking medical imaging. Many practices are short staffed and do not have the ability to handle cumbersome prior authorization requirements. Therefore, we are urging all payers to temporarily suspend prior authorization requirements for six months or such period as reasonable based on pandemic conditions to ease the burden on practices working through their backlog of patients.

6. ***Delay appropriate use criteria (AUC)***

As the backlog of routine imaging procedures amasses during the suspension of elective procedures, it will be a daunting return for providers to manage the influx of overdue scans and treatment. The Centers for Medicare and Medicaid Services (CMS) has been working over the past few years to implement the Protecting Access to Medicare Act of 2014 (PAMA) which mandates consultation of AUC prior to referring Medicare beneficiaries for advanced diagnostic imaging services. However, there have been significant delays in implementing the program which we believe can be addressed with several technical changes to the PAMA law. We request that Congress work with us to incorporate these no cost perfecting changes in the next pandemic legislation. If those changes cannot be addressed by year's end, and to avoid potential claims processing issues while recovering from the impacts of the COVID-19 pandemic, we request an extension of the current educational testing period through 2021.

We welcome the opportunity to work with Congress, the Administration, and other stakeholders on these concepts, or other efforts to stabilize and support the health care delivery system. Thank you for considering our requests.

Sincerely,

American College of Radiology  
American Society of Radiologic Technologists  
The Association for Medical Imaging Management (AHRA)  
Association for Quality Imaging  
Center for Diagnostic Imaging  
Medical Imaging & Technology Alliance  
Radiology Business Management Association  
Society of Diagnostic Medical Sonography  
Society of Nuclear Medicine & Molecular Imaging

