

March 23, 2020

Ms. Seema Verma  
Administrator  
Centers for Medicare and Medicaid Services  
7500 Security Boulevard  
Baltimore, MD 21244

Dear Administrator Verma,

The American Society for Radiation Oncology (ASTRO)<sup>1</sup> greatly appreciates the Administration's efforts to support an effective response to the COVID-19 pandemic by expanding the use of telehealth services to prevent spread of the virus. We are writing to urgently request the Agency extend those flexibilities to other face-to-face interactions that may take place during the process of care that are not included in the three distinct types of telehealth services outlined in the 1135 Waiver that became effective on March 6<sup>th</sup>. Specifically, we are asking that Agency extend telehealth flexibilities to in-person, face-to-face interactions associated with radiation oncology on-treatment visits (OTVs) under CPT Code 77427 – *Radiation Treatment Management, 5 treatments*.

Radiation oncology clinics are making widespread and unprecedented practice changes to continue treating cancer patients and support broader health care system efforts to stop COVID-19. While face-to-face engagement between radiation oncologists, clinical treatment teams and patients under treatment is ideal and the most appropriate way to manage care, at this time, extraordinary efforts need to be taken to limit exposure and protect patients and clinical care teams from exposure to COVID-19.

CPT Code 77427 – *Radiation treatment management, 5 treatments* involves extensive physician work, and it has numerous components. Many of the components do not require direct contact with the patient (i.e. the radiation oncologist is expected to review the patient chart, pertinent lab and x-ray data, dosimetry, communicate with the nurse, chart summarizing his/her interactions through the week of treatment including an updated status on the patient). However, there is also a requirement that radiation oncologists conduct face-to-face OTVs with the patient once per week to assess the patient's response to treatment and manage any symptoms the patient may be experiencing. Given the current COVID-19 public health emergency, we believe that there

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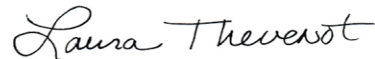
<sup>1</sup> *ASTRO members are medical professionals, who practice at hospitals and cancer treatment centers in the United States and around the globe and make up the radiation therapy treatment teams that are critical in the fight against cancer. These teams often include radiation oncologists, medical physicists, medical dosimetrists, radiation therapists, oncology nurses, nutritionists and social workers, and treat more than one million cancer patients each year. We believe this multi-disciplinary membership makes us uniquely qualified to provide input on the inherently complex issues related to Medicare payment policy and coding for radiation oncology services.*

should be an exception for the OTV portion of this code to allow for the use of virtual communications during the COVID-19 public health emergency to prevent infection spread. These are challenging times and many practices find themselves struggling between conducting the OTV face-to-face visit, which puts both doctor and patient at risk, or using virtual communication to conduct the visit, which then prevents physicians from billing for this core professional management code. **ASTRO urges the Agency to exercise non-enforcement of in-person, face-to-face interactions that are typically required as part of the OTV associated with CPT code 77427 and permit radiation oncologists to conduct these interactions using virtual communication technologies to ensure continuity of care, as well as reduced exposure to COVID-19.** While virtual communication is not ideal, its use would only be temporary during the COVID-19 epidemic.

We believe that existing emergency declarations by the President and Secretary Azar provide adequate authority to furnish this additional flexibility now. We also encourage HHS and CMS to provide additional waivers under Section 1135 of the Social Security Act to effectuate this important and temporary change.

ASTRO appreciates your leadership during this crisis, and we thank you for considering this request. If you have any questions, please contact Anne Hubbard, Director of Health Policy at [Anne.Hubbard@ASTRO.org](mailto:Anne.Hubbard@ASTRO.org) or 703-839-7394.

Sincerely,



Laura I. Thevenot  
Chief Executive Officer

cc:

Ing-Jye Cheng, Acting Director, Hospital and Ambulatory Policy Group  
Ryan Howe, Deputy Director, Hospital and Ambulatory Policy Group