



March 18, 2020

Jean Moody-Williams  
Acting Director  
Center for Clinical Standards and Quality  
Centers for Medicare and Medicaid (CMS)  
7500 Security Boulevard  
Baltimore, MD 21244

***Re: Urgent Request for Waiver Relief due to Coronavirus Crisis***

Dear Director Moody-Williams:

The Alliance for Home Dialysis is a coalition of kidney dialysis stakeholders, representing patients, clinicians, providers, and industry that works to promote policies that facilitate treatment choice for individuals in need of dialysis, and to address systemic barriers that limit access to the many benefits of home dialysis. These issues are particularly urgent today, not only given how many Americans are currently living with ESRD and depend on dialysis for survival, but also given the high correlation between COVID-19 and kidney damage.<sup>1</sup>

The Alliance has long advocated for expansion of telehealth services for home and in-center dialysis patients. We believe that these expansions are particularly important during efforts to bolster our national response to COVID-19. Most, if not all, dialysis patients are immunocompromised, making it especially important for them to socially isolate. Telehealth expansion can make it easier for them to stay home, relieving them and society of the burden of having them travel to dialysis clinics multiple times a week during a time of national crisis.

With this in mind, we respectfully request the following waivers, which will enhance the ability of providers to offer telehealth services and preserve patients' ability to socially isolate during the COVID-19 pandemic:

***Waiver Request #1:*** *We would like relief from the requirement of video teleconferencing for the Monthly Capitated Payment (MCP) visit for home dialysis patients. If adequate technology is not available for the patient, we would like to be able to include a telephonic visit without videoconferencing to be acceptable for MCP billing visits.*

- This change would benefit all home dialysis patients during the crisis particularly those in rural settings who lack consistent access to the internet and/or adequate technology.

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<sup>1</sup> [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(20\)30558-4/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)30558-4/fulltext)

- Providers are willing to provide proof of a good faith effort to provide patients with the needed technology.

***Waiver Request #2:*** We would like relief from the present home dialysis telemedicine requirement requiring a face-to-face MCP visit one of every three months. We would also request relief from the requirement for three months of face-to-face visits post initiation of home dialysis for telehealth during the coronavirus crisis period that is deemed to be a “national emergency.”

***Waiver Request #3:*** We would like relief from the in-center requirement of one face-to-face visit per month for the in-center hemodialysis MCP. This should include allowing for billing of the single (comprehensive) monthly visit via telehealth including examination of the vascular access site.

- Currently, CPT codes 90962, 90956, and 90959 for monthly dialysis services with a single visit for in-center patients require a face-to-face interaction; therefore these codes are not included on the list of approved telehealth services. During the public health emergency (PHE), we request a waiver of the face-to-face visit requirement for these codes.
- Further, for in-center patients, there is a requirement that the vascular access site must be examined “hands on” once per month.

***Waiver Request #4:*** We request that the Physician Fee Schedule status indicators for telephone consult codes (99441-99443) be changed from their current status of “N” for non-covered to “A” for covered, at least during the coronavirus crisis period that is deemed to be a “national emergency.”

- This change would allow physicians to continue to treat patients by phone consultation if video is not available. This is especially important for rural patients who may not have consistent access to broadband or other internet capabilities.

Thank you very much for your consideration of these waivers. If you need any more information, please feel free to reach out to Michelle Seger at [michelle@homedialysisalliance.org](mailto:michelle@homedialysisalliance.org) or 202-733-7326. We can also make our clinicians and/or facility members available to you for consultation.

Sincerely,



Stephanie Silverman  
Executive Director  
Alliance for Home Dialysis



**Alliance for Home Dialysis 2020 Members**

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American Kidney Fund  
American Nephrology Nurses Association  
American Society of Nephrology\*  
American Society of Pediatric Nephrology  
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