

April 9, 2020

Seema Verma
Administrator
Centers for Medicare and Medicaid Services
200 Independence Ave., S.W.
Washington, DC 20201

ATTN: CMS-1744-IFC

RE: Medicare and Medicaid Programs; Policy and Regulatory Revisions in Response to the COVID-19 Public Health Emergency [CMS-1744-IFC]

Dear Administrator Verma:

On behalf of the more than 4,000 members of the Private Practice Section of the American Physical Therapy Association, thank you for promulgating the “Policy and Regulatory Revisions in Response to the COVID-19 Public Health Emergency” interim final rule with comment period (IFC). The coronavirus pandemic demands that health care policy makers, payers, and providers reconsider how care is delivered to reduce the risk of further spreading infection and add capacity to a challenged health system.

Although the March 30, 2020 CMS IFC acknowledges that some of the physical medicine and rehabilitation codes should be added to the list of services covered under the Medicare Physician Fee Schedule when furnished as telehealth, CMS did not expand in the IFR the types of providers who are eligible to furnish telehealth. With intensifying concerns surrounding the COVID-19 pandemic, access to telehealth has become of paramount importance to ensure the safety of patients and their providers. **Accordingly, I urge CMS to take immediate steps to ensure patient safety and protect health care providers by using the authority granted to it under Social Security Act 1135(b)(8), as amended by the Coronavirus Aid, Relief, and Economic Security (CARES) Act. CMS should issue a blanket waiver to expand the list of providers eligible to furnish and be reimbursed for telehealth services under Medicare to include physical therapists and physical therapist assistants during the COVID-19 public health emergency.**

It is critical that all Medicare beneficiaries have the ability to receive care at home to avoid placing themselves at greater risk of spreading or contracting the COVID-19 virus. Beneficiaries should not be forced to choose between compromising their health by forgoing care or compromising their health by exposing themselves to unnecessary risk of COVID-19, especially considering that the delivery of some physical therapy services via telehealth has been proven to be safe, effective, and widely implemented beyond the

Medicare system. Recognizing the value and importance of maintaining access to physical therapy services at this time, a number of private payers have designated physical therapists as eligible to perform a broad set of services via telehealth: [United HealthCare](#), [Cigna](#), and Blue Cross/Blue Shield plans in [Alabama](#), [California](#), [Louisiana](#), [Massachusetts](#), [North Carolina](#), [Rhode Island](#), [South Carolina](#), [Vermont](#), [Wisconsin](#). [Independence Blue Cross](#) has also expanded coverage. Additionally, [TRICARE](#) has found success in allowing physical therapists and physical therapist assistants to care for veterans through telehealth.

Physical therapists can use telehealth as a supplement to in-person therapy to treat a variety of conditions prevalent in the Medicare population, including Alzheimer's disease, arthritis, cognitive/neurological/vestibular disorders, multiple sclerosis, musculoskeletal conditions, Parkinson's disease, pelvic floor dysfunction, and sarcopenia.

How physical therapists are using telehealth technologies at this time:

- Physical therapists use telehealth to provide quicker screening, and assessment, at a time when it is unwise for vulnerable patients to seek in-person care.
- Physical therapists provide interventions using telehealth by observing how the patient moves and performs exercises and activities. They then provide verbal and visual instructions and cues to modify how the patient performs various activities. They also may suggest the patient change the physical environment to encourage more optimal outcomes.
- Physical therapists also use telehealth for check-ins and follow-ups with established patients, where a full in-person visit may not be necessary to maintain the positive trajectory of functional outcomes.
- Additionally, physical therapists provide consultative services by working with other physical therapists, physical therapist assistants, and other health care providers to share expertise in specific movement-related activities to optimize the patient's participation.

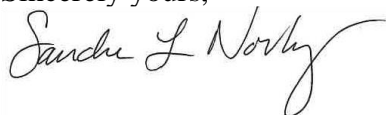
While states continue to take historic steps to ensure that individuals continue to have access to health care, it is critical that **HHS and CMS take additional action to relax the regulations governing Medicare coverage of telehealth furnished by physical therapists and physical therapist assistants under the 1135 waiver authority granted to it by Congress in the CARES Act signed into law March 27, 2020. While we appreciate the intent, the previously granted flexibilities are insufficient to address the needs of our patient population.**

Rehabilitative services furnished via telehealth cannot fully replace traditional clinical care, yet telehealth would be a valuable resource for physical therapists and physical therapist assistants—by expanding their reach to meet the needs of patients when and where those needs arise—particularly in light of the COVID-19 pandemic. **Medicare beneficiaries would benefit from the lifting of many of the current restrictions on telehealth services, including who can provide telehealth and where these services can take place.** Such reforms would provide greater flexibility to providers and patients nationwide and increase access to necessary care. Modifying current payment policy and expanding coverage to include the delivery of telehealth by physical therapists will be life-changing for beneficiaries during this health care crisis because it will offer them a safe avenue through which to access care, lead to reduced health care expenditures, increased patient access to care, and improved management of chronic disease and quality of life. Additionally, as health systems become overwhelmed in more populous areas of the country in caring for COVID-19 patients, physical therapists would then be able to care for patients who may otherwise put strains on other primary care providers and emergency departments to manage pain. **If CMS continues to decline to use its full waiver authority, the mere fact of being a Medicare beneficiary is a barrier to receiving timely and appropriate medical care.**

CMS has acted to recognize an expanded code set of services, noting that 90% of the time, the expanded set of codes are claimed by physical therapists. It is now time to actually allow the codes to be claimed by physical therapists though CMS exercising its waiver authority. **Accordingly, I urge CMS to act to broaden coverage of Medicare telehealth services by issuing a blanket waiver under its 1135(b)(8) waiver authority, amended by the CARES Act, so that beneficiaries can receive health care services from physical therapists and physical therapist assistants via telehealth.**

Thank you for your consideration. If you have any questions regarding this issue, please contact Robert Hall (RHall@ppsapta.org).

Sincerely yours,

A handwritten signature in cursive script that reads "Sandra L. Norby". The signature is written in black ink and is positioned below the text "Sincerely yours,".

Sandra Norby, PT, DPT
President