

## Private Practice Physical Therapists

*Small business professionals restoring function to America - one patient at a time.*

### COMPREHENSIVE TELEHEALTH COVERAGE FOR MEDICARE BENEFICIARIES

#### RECOMMENDATION:

The Private Practice Section (PPS) of the American Physical Therapy Association (APTA) urges Congress to pass the **CONNECT for Health Act of 2017 (H.R.2556/S.1016)** in order to promote cost savings and quality care in Medicare through telehealth and remote patient monitoring.

Telehealth is the use of interactive 2-way telecommunications systems (with real-time audio and video) to provide health care, health information, or health education from a distance. The bipartisan *CONNECT for Health Act (S.1016)* was introduced by Senators Brian Schatz (D-HI), Roger Wicker (R-MS), Ben Cardin (D-MD), John Thune (R-SD), Mark Warner (D-VA), and Thad Cochran (R-MS). The companion bill (**H.R.2556**) was introduced by Representatives Diane Black (R-TN), Peter Welch (D-VT), Gregg Harper (R-MS), and Mike Thompson (D-CA). These bills would expand the use of telehealth and remote patient monitoring services in Medicare in pursuit of cost savings and improving the quality of care.

Current statute (42 U.S.C. 1834(m)) limits telehealth coverage and reimbursement through:

- **Originating site restrictions** – the patient may only be located at certain clinical sites;
- **Geographic limitations** – the patient may only be located in certain rural areas;
- **Limitations on distant site providers** – only specific Medicare enrolled “physicians” and “practitioners” may provide telehealth services, but not, for example, physical or occupational therapists; and
- **Limitations on covered codes** – CMS must define reimbursable telehealth codes.

**The CONNECT for Health Act** seeks to lift many of these restrictions while reducing the financial burden on Medicare by:

- Allowing Medicare enrolled providers or suppliers to be reimbursed for care provided via telehealth when certain quality and cost-effectiveness criteria met. **Medicare enrolled physical therapists** would have the opportunity to provide care via telehealth under this provision;
- Lifting restrictions on the use of telehealth in Accountable Care Organizations, by those paid through global or bundled payment, and care covered by Medicare Advantage plans—**enabling participation by physical therapists** and others;
- **Allowing telestroke evaluation** and management sites to be covered as originating sites;
- Urging the Secretary of Health and Human Services to evaluate the applicability of telehealth in projects before the Center for Medicare and Medicaid Innovation (CMMI);
- Creating a Medicare Remote Patient Monitoring (RPM) benefit for certain high-risk, high-cost patients; and
- Authorizing a study on the use of telehealth services once restrictions have been lifted.

**PPS believes that providing access to therapy using telehealth will improve outcomes and save costs.**

**H.R.2556/S.1016 would accomplish this much-needed policy change.**

To cosponsor **S.1016**, please contact Aimee Grace in Senator Schatz’s office at [aimee.grace@schatz.senate.gov](mailto:aimee.grace@schatz.senate.gov). Please contact Katie Mitchell ([katie.mitchell@mail.house.gov](mailto:katie.mitchell@mail.house.gov)) in Representative Diane Black’s office to cosponsor **H.R.2556**.