



# Support Digital Health and Permanent Medicare Telehealth Extension

Issue Brief

March 20, 2024

## Background

The ability for physical therapists (PTs), occupational therapists (OTs), and speech language pathologists (SLPs) to provide rehabilitation therapy via telehealth is a patient-centered 21st Century approach to healthcare. For patients who have limited mobility and less access to rehabilitation therapy, rehabilitation therapists can evaluate Medicare patients, oversee the plan of care, and provide rehabilitation therapy via telehealth. The continuation of critical telehealth flexibilities from the *Consolidated Appropriations Act of 2023 (CAA, 2023)* since the end of the COVID-19 Public Health Emergency (PHE) has allowed rehabilitation therapists to prevent delays in patient care and provide therapy to Medicare beneficiaries who otherwise may go without the treatment, but does not ensure permanent access to rehabilitation therapy via telehealth. During the COVID-19 PHE, therapists' ability to evaluate patients, supervise and provide therapy via telehealth prevented declines in patient function. Remote Patient Monitoring (RPM), a key aspect of digital health, also is important to patient care quality.

## ***Expanded Telehealth Access Act (H.R. 3875/ S. 2880)***

Telehealth waivers have expanded and maintained Medicare patient access to rehabilitation therapy beyond the COVID-19 PHE and now it's time to permanently extend Medicare coverage of telehealth for rehabilitation therapy. **The *Expanded Telehealth Access Act (H.R. 3875/S. 2880)* would permanently add OTs, PTs, SLPs, rehabilitation therapy assistants, and audiologists as Medicare telehealth providers in the U.S Code which will allow them to continue providing rehabilitation therapy services to Medicare patients via telehealth, when appropriate.** It is important to note that this bill will not expand the scope of practice of any of these practitioners, rather guarantee their reimbursement for rehabilitation therapy services provided via telehealth.

Passage of the *Expanded Telehealth Access Act (H.R.3875/S.2880)* is essential as the Centers for Medicare & Medicaid Services (CMS) has indicated that while it does have the authority to create telehealth CPT codes, and has done so already, CMS does not have the authority to list rehabilitation therapists as telehealth providers in Medicare after Congressional waivers expire at the end of 2024.



## Payment Parity for Rehabilitation Therapy

**A common misconception is that all healthcare services provided via telehealth are less expensive for providers because clinicians may have not borne as much cost compared to in-person services.** This is not true for rehabilitation therapy providers, as patient-specific factors often require in-person staff to help ensure patient safety and set up the telehealth platform. Currently, rehabilitation therapists cannot bill for the time spent by the in-person staff; therefore, the labor cost for patient assistants must be absorbed by the therapy provider.

ADVION encourages Congress to consider telehealth utilization as continuing or expanding access to care, not necessarily to deliver less- costly care. The provision of telehealth is not a one size fits all policy and policies that would cut reimbursement should take this into consideration. During the COVID-19 PHE and now with the current rehabilitation therapist shortage, the use of telehealth to deliver rehabilitation therapy to patients where therapists are not geographically located is the only way many patients receive rehabilitation therapy.

### As Telehealth Reform is Contemplated, ADVION Asks Congress to:

- Make telehealth flexibilities granted during the COVID-19 PHE permanent.
- Pass the *Expanded Telehealth Access Act (H.R. 3875/ S. 2880)* which would add rehabilitation therapists to the statutory list of authorized practitioners eligible to provide services via telehealth in U.S Code.

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