Rationale for Maintaining the Quarterly Face-to-Face Visit Requirement for Home Dialysis Patients

RPA strongly supports efforts to make permanent changes in Medicare telehealth policy that would eliminate the originating site and geographic restrictions that existed prior to the public health emergency (PHE). However, there are several legislative proposals that include provisions to eliminate the Medicare requirement for quarterly face-to-face visits between home dialysis patients and their nephrologist at the conclusion of the PHE. **RPA strongly believes that to ensure patient safety and high-quality care the quarterly physician visit requirement for home dialysis patients must remain in Medicare regulations, with waivers available in extreme circumstances.** The reasons for RPA’s opposition to eliminating this requirement are provided below:

- Virtual visits cannot fully replace face-to-face encounters, especially with respect to the physical examination of the patient, assessment of vital signs, and the occasional difficult discussions with patient and family members that are part of effective nephrology care;
- Important elements of the physical examination of a dialysis patient such as volume assessment are severely limited absent a face-to-face encounter, especially in the home originating site where advanced telehealth equipment is not available;
- The quarterly face to face visit helps nephrologists pre-emptively identify certain problems that may lead to hospitalization or increased morbidity, and ensures patients have a relationship with a local nephrologist for continuity of care purposes should hospitalization be required;
- The nephrologist is responsible for overseeing and monitoring the ongoing replacement of life-sustaining organ function. A quarterly face to face visit is an essential part of ensuring patient safety during this complex therapy;
- While the use of telehealth during the PHE has been a crucially important bridge to providing care to kidney patients on dialysis during the pandemic, telehealth technology is a tool subject to its own challenges (poor audio or video, inability to position camera well, intermittent lapses in wi-fi, etc.); maintaining the face-to-face quarterly visit requirement while observing all necessary safety protocols would make such concerns moot for those encounters.

For these reasons, we urge Congress and CMS to maintain the quarterly face-to-face visit requirement for home dialysis patients.

*The Renal Physicians Association (RPA) is the professional organization of nephrologists whose goal is to ensure quality care under the highest standards of medical practice for patients with kidney disease and related disorders. For further information, please contact Robert Blaser, RPA’s Director of Public Policy, at 301-468-3515 or rblaser@renalmd.org.*