





December 6, 2024

The Honorable Charles Schumer Majority Leader United States Senate Washington, DC 20510

The Honorable Mitch McConnell Minority Leader United States Senate Washington, DC 20510 The Honorable Mike Johnson Speaker U.S. House of Representatives Washington, DC 20515

The Honorable Hakeem Jeffries Minority Leader U.S. House of Representatives Washington, DC 20515

Dear Leaders Schumer and McConnell; Speaker Johnson and Leader Jeffries:

The American Occupational Therapy Association (AOTA)¹, the American Physical Therapy Association (APTA)², and the American Speech-Language-Hearing Association (ASHA)³ write to share our support for a two-year extension permitting audiologists, occupational therapists (OTs), physical therapists (PTs), speech-language pathologists (SLPs), occupational therapy assistants (OTAs), and physical therapist assistants (PTAs) to provide services through telehealth under Medicare.

We urge Congress to pass a two-year extension of this authority before the current statutory expiration date on December 31, 2024, established under the Consolidated Appropriations Act, 2023 (Public Law 117-328). While Congress considers permanent changes to Medicare telehealth policy, policymakers must ensure continued beneficiary access to the treatment and services our members provide. Swift action from Congress will help ensure that the Centers for Medicare & Medicaid Services (CMS) is clear in its rulemaking and guidance that continued telehealth access for these services is expected. A two-year waiver extension also gives our organizations, CMS, and Congress time to collect and analyze more key data on telehealth utilization, costs, quality, outcomes, and patient satisfaction that will inform deliberations about such changes to ensure permanent telehealth coverage for our members and the patients they treat.

Since Congress first expanded telehealth access in 2020, our members have demonstrated that their services are provided in a clinically appropriate manner and achieve treatment outcomes and patient satisfaction at the same levels as in-person care.⁴ Providing services to Medicare beneficiaries through telehealth increases access to care, especially for beneficiaries in rural and medically underserved areas as well as those with physical impairments that make traveling for in-person care challenging. In addition, telehealth services are shown to increase continuity of care, help overcome provider shortages and reduce patient travel burden.⁵ Telehealth also enables therapists to provide some services which cannot be duplicated in a facility/office setting, such as "virtual tours" of a patient's home to identify safety risks, including falls.

We appreciate that key congressional committees have recognized the importance of continued telehealth access—the House Energy and Commerce Committee unanimously voted to approve H.R. 7623, the Telehealth Modernization Act of 2024, which would extend our clinician members telehealth authority through 2026. The House Ways and Means Committee

unanimously voted to approve H.R. 8261, the Preserving Telehealth, Hospital, and Ambulance Act, which would likewise grant a two-year extension of telehealth authority. We urge Congress to pass these bills or include an identical two-year telehealth extension provision in legislation enacted before the end of the year.

While supportive of a two-year extension, AOTA, APTA, and ASHA also urge Congress to continue working toward a permanent telehealth policy that would provide certainty for patients who have come to rely on telehealth services as currently covered under Medicare Part B. Broad bipartisan, bicameral support for the Expanded Telehealth Access Act (H.R. 3875/S. 2880)—which would permanently add audiologists, OTs, PTs, SLPs, OTAs, and PTAs to the list of eligible Medicare telehealth providers—demonstrates that patients have come to rely on telehealth services provided by our members and that Congress must guarantee access to these critical services permanently. While we understand and appreciate the desire to provide a short-term extension of authority before developing permanent telehealth policies, our members should be able to continue providing services in this manner under any future guidelines and requirements Congress may prescribe regarding telehealth.

Without an extension of telehealth authority for audiologists, OTs, PTs, SLPs, OTAs, and PTAs, millions of Medicare patients risk losing access to essential services. The health care providers within our associations have made significant investments to ensure telehealth capabilities meet the needs of patients. A sudden expiration of telehealth coverage would create uncertainty for both providers and patients, potentially unraveling years of progress in expanding health care access.

We look forward to working with you to ensure America's seniors continue to have timely and robust access to the critical services our members provide—which includes the option of service delivery through telehealth—so that they can maintain the highest possible level of function and lead happy, healthy, and productive lives.

Sincerely,

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Page 3

¹ American Occupational Therapy Association. (n.d.). About AOTA. <u>https://www.aota.org/about</u>.

² American Physical Therapy Association. (n.d.). About APTA. <u>https://www.apta.org/apta-and-you/about-us</u>.

³ American Speech-Language-Hearing Association. (n.d.). About the American Speech-Language-Hearing Association (ASHA). <u>https://www.asha.org/about/</u>.

⁴ American Speech-Language-Hearing Association. (n.d.). <u>*Telehealth Improves Patient Access to Care.*</u> <u>https://www.asha.org/siteassets/advocacy/telepractice-data-fact-sheet.pdf.</u>

⁵ Department of Health and Human Services (2021). *Telehealth for Providers: What You Need to Know.* <u>https://www.cms.gov/files/document/telehealth-toolkit-providers.pdf</u>.