

Occupational Therapy via Telehealth for Medicare Beneficiaries *Support the Expanded Telehealth Access Act (H.R.2168/S.3193)*

The delivery of occupational therapy (OT) services via telehealth expanded exponentially when the COVID-19 pandemic threatened access to services in 2020. State Medicaid plans and private insurance reacted quickly by allowing patients to receive OT services via telehealth to reduce infection risk. Given statutory limitations, however, Congressional action was required to give the Centers for Medicare & Medicaid Services (CMS) the authority to allow OT practitioners and other therapy providers to provide services via telehealth to Medicare beneficiaries. Once this authority was granted in the CARES Act, CMS issued the necessary waivers to enable OT practitioners to provide services via telehealth to Part B Medicare beneficiaries during the public health emergency (PHE); however, these waivers will expire 151 days after the PHE ends when a temporary extension included in the Consolidated Appropriations Act of 2022 expires.

Congressional action is essential to ensure occupational therapy practitioners can continue to provide services via telehealth to Medicare beneficiaries on a permanent basis. While CMS has the authority to add new therapy telehealth codes to the Physician Fee Schedule (PFS), Congress must act to enable OTs and other therapists to become Medicare telehealth providers. CMS has already added telehealth therapy codes to the PFS through the end of the PHE, and extended many of these codes through the end of 2023 unrelated to the status of the PHE. Unless Congress acts, however, OTs and other therapists will not be able to provide and bill for Medicare telehealth services outlined in these codes once the PHE and 151-day extension end.

To address this issue, the ***Expanded Telehealth Access Act (H.R.2168/S.3193)*** was introduced by Reps. Mikie Sherrill (D-NJ) and David McKinley (R-WV) and Senators Steve Daines (R-MT) and Tina Smith (D-MN) to enable OT practitioners as well as PTs, SLPs, and audiologists to permanently provide services via telehealth under Section 1834(m) of the Social Security Act.

Pandemic Experience Demonstrates Effectiveness of OT Services via Telehealth

The rapid expansion of telehealth as a delivery mechanism for OT services during the PHE has enabled occupational therapists and occupational therapy assistants to demonstrate the clear value of these services provided alone or in conjunction with in-person services. Telehealth has been especially beneficial for people in rural and other underserved areas and to those for whom travel to receive services was already a barrier to access, including people with disabilities. Occupational therapy practitioners report that telehealth has reduced delays to care while making it easier to connect with beneficiary caregivers and enabling easier identification of home safety issues. This can be crucial in preventing falls, addressing functional decline, and avoiding costly emergency room visits and hospital admissions which, in turn, can reduce the cost of care.

In many ways, occupational therapy is a perfect match for telehealth to enable completion of one of the key aspects of occupational therapy: defining and enabling function within a specific context and environment, such as a patient's home. Passage of H.R.2168/S3193 would enable Medicare beneficiaries to continue to receive OT services via telehealth when appropriate, including those for whom telehealth has emerged as the only practical way to access services. The bill is also endorsed by the American Physical Therapy Association (APTA), the American Speech-Language-Hearing Association (ASHA), the American Telemedicine Association (ATA), e-Health Initiative, the Personal Connected Health Alliance and the Alliance for Connected Care.