THE CONNECT FOR HEALTH ACT (H.R. 2556/S. 1016)

POSITION
The American Physical Therapy Association (APTA) supports the Creating Opportunities Now for Necessary and Effective Care Technologies (CONNECT) for Health Act (H.R. 2556/S. 1016), legislation that would ease restrictions on telehealth coverage under the Medicare program. S. 1016 was introduced by Sens Brian Schatz (D-HI), John Thune (R-SD), Roger Wicker (R-MS), Ben Cardin (D-MD), Mark Warner (D-VA), and Thad Cochran (R-MS); and H.R. 2556 was introduced by Reps Diane Black (R-TN), Mike Thompson (D-CA), Peter Welch (D-VT), Gregg Harper (R-MS), Bill Johnson (R-OH), and Doris Matsui (D-CA).

BACKGROUND
Telehealth services are gaining a tremendous amount of attention at both state and federal levels as more providers, payers, and patients are seeking cost-effective approaches to care. However, many existing barriers are prohibitive of these services and the providers who are eligible for reimbursement when providing care through telehealth. Currently, physical therapists (PTs) aren’t able to bill for telehealth services under the Medicare program. In fact, only a few provider groups are eligible under Medicare to furnish telehealth services to patients: physicians, nurse practitioners, physician assistants, nurse-midwives, clinical nurse specialists, clinical psychologists, clinical social workers, and registered dieticians or nutrition professionals.

The CONNECT for Health Act would lift many of the current restrictions on telehealth services under the Medicare program, including where these services can take place and who can provide telehealth. Specifically, the bill would allow PTs and other providers to use telehealth when treating patients who are enrolled in Medicare Advantage (MA) plans, accountable care organization (ACOs), and certain bundled payment models. APTA asserts that the changes made through this legislation will be exceptionally helpful in providing flexibility to providers and patients, and in increasing access to care, especially to those living in medically underserved areas or individuals living with impaired mobility.

HOW WOULD PTs USE TELEHEALTH
Telehealth may be used to overcome barriers of access to services caused by distance, unavailability of specialists and/or subspecialists, and impaired mobility.

Examples of PTs using telehealth technologies include the following:

- PTs provide interventions using telehealth by observing how the patient moves and performs exercises and activities. They then provide verbal and visual instructions and cues to modify how the patient performs various activities. They also may change the environment to encourage more optimal outcomes.
- PTs provide consultative services by working with other PTs, physical therapist assistants, and other health care providers to share expertise in specific movement-related activities to optimize the patient’s participation.
- PTs may use telehealth to provide quicker screening, assessment, and referrals that improve care coordination within collaborative delivery models such as accountable care organizations and patient-centered medical homes.

For more information on APTA priorities, visit APTA’s policy center at http://policy.apta.org.

Cosponsor H.R. 2556/S. 1016 Today!
For additional information, contact the American Physical Therapy Association's Government Affairs Department at 703/706-8533 or advocacy@apta.org.
WHO WE ARE

Physical therapists (PTs) are health care professionals who diagnose and treat individuals of all ages, from newborns to the very old, who have medical problems or other health related conditions that limit their ability to move and perform functional activities in their daily lives. PTs also work with individuals to prevent the loss of mobility before it occurs by developing fitness- and wellness-oriented programs for healthier and more active lifestyles.

Physical therapist assistants (PTAs) provide selective physical therapist interventions under the direction and supervision of physical therapists.

WHAT WE DO

PTs examine each individual and develop a plan of care using treatment techniques to promote the ability to move, reduce pain, restore function, and prevent disability. Under the direction and supervision of the PT, PTAs provide selective physical therapist interventions based on the developed plan of care.

WHERE WE PRACTICE

PTs and PTAs provide care for people in a variety of settings, including outpatient clinics or offices; inpatient rehabilitation facilities; skilled nursing, extended care, or subacute facilities; education or research centers; schools; hospices; industrial, workplace, or other occupational environments; and fitness centers and sports training facilities.

EDUCATION AND LICENSURE

All PTs must receive a degree from an accredited physical therapist program before taking and passing a national licensure exam that permits them to practice. Since 2015, all accredited programs award the doctor of physical therapy degree. State licensure is required in each state in which a PT practices. PTAs must complete a 2-year associate’s degree and are licensed, certified, or registered in most states.

AMERICAN PHYSICAL THERAPY ASSOCIATION

The American Physical Therapy Association is a national organization representing more than 100,000 physical therapists, physical therapist assistants, and students nationwide. Its goal is to foster advancements in physical therapist education, practice, and research.

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