

Expanded Telehealth Access Act of 2021 (H.R. 2168/S. 3193)



Position

The American Physical Therapy Association supports the Expanded Telehealth Access Act of 2021 (H.R. 2168/S. 3193), legislation that would add physical therapists, physical therapist assistants in private practice, and facility-based outpatient therapy providers as permanent authorized providers of telehealth under the Medicare program. H.R.2168 was introduced by Reps. Mikie Sherrill, D-N.J., and David McKinley, R-W.Va. S. 3193 was introduced by Sens. Steve Daines, R-Mont, Tina Smith, D-Minn, Jerry Moran, R-Kan, and Jacky Rosen, D-Nev.

Background

The ongoing coronavirus pandemic has highlighted the need for health systems and providers to rapidly modify the way they deliver care to their patients. One of the best examples is the expansion of telehealth payment and practice policies under the section 1135 waivers that have permitted PTs and PTAs across settings to furnish their services to Medicare beneficiaries via telehealth during the public health emergency. This has demonstrated that many needs can be safely and effectively met via the use of technology and that patients can have improved access to skilled care by leveraging these resources

Physical therapy provided via telehealth has been shown to improve access to care for patients who live in rural areas. It has allowed patients to gain desired outcomes for a variety of health problems, including post traumatic stress syndrome, chronic pain, stroke, and other neurological and musculoskeletal conditions.

Examples of PTs and PTAs using telehealth to provide real-time audio and video care are:

- PTs use telehealth to conduct evaluations when necessary to prevent delays in essential care.
- PTs use telehealth by guiding patients through prescribed exercises, analyzing the patients' performance, instructing modifications of a care program, and promoting self-efficacy.
- PTs use telehealth to assess a patient's home environment and recommend adjustments that improve safety and navigation, which is not as easy to replicate in the clinic.
- PTs use telehealth to reduce the number of in-clinic visits and still maintain important monitoring and follow-up care. This is especially important for Medicare patients who lack transportation or socioeconomic means for multiple in-person visits.
- PTs can use telehealth to co-treat with another clinician who is treating via real-time audio and video technology.
- PTs can utilize telehealth to supervise treatment being provided by a PTA in a patient's home.

The Expanded Telehealth Access Act would permanently allow outpatient therapy providers to use telehealth under Medicare after the PHE is declared over. Specifically, the bill adds PTs, PTAs, occupational therapists, occupational therapy assistants, audiologists, and speech language pathologists, and facilities that furnish outpatient therapy, as authorized providers of telehealth under Medicare.

Improving Patient Outcomes

Hospital admissions and readmissions, emergency department visits, and urgent care visits, among other expenses, potentially will decrease if beneficiaries have access to both in-person and telehealth services. Moreover, increasing access to physical therapy, including through audio and video telecommunications technology, can result in increased work productivity and decreased absenteeism while improving presenteeism. Physical therapists play a critical role in ensuring that Americans are healthy and employed.

Research indicates that telehealth can empower both patients and health care providers to determine the best approaches to care that consider patient demographics, location, and diagnoses; can enable providers to furnish high-quality, cost-effective care; and can reduce disparities in care, especially in rural communities. There have been many studies illustrating the clinical benefit of telerehabilitation for a variety of conditions, including pelvic floor dysfunction and multiple sclerosis. A 2019 study examined the efficacy of home-based telerehabilitation versus in-clinic therapy for adults after stroke, finding that poststroke activity-based training resulted in substantial gains in patients' arm motor function, whether provided via telerehabilitation or in person.

As demand for care to help individuals with chronic conditions continues to grow, we encourage Congress to advance policy changes that improve beneficiary access to these critical services and increase collaboration and efficiency of care across the care continuum.

This bill is endorsed by APTA, the American Telehealth Association, the American Speech-Language-Hearing Association, the American Occupational Therapy Association, the eHealth Initiative and Foundation, the Healthcare Information and Management Systems Society, Inc., the Personal Connected Health Alliance, and the Alliance for Connected Care.

Facts About Physical Therapists and Physical Therapist Assistants



Who We Are

Physical therapists are movement experts who help to optimize people's physical function, movement, performance, health, quality of life, and well-being. Physical therapists evaluate, diagnose, and manage movement conditions for individuals, and they also provide contributions to public health services aimed at improving population health and the human experience. Physical therapist assistants are educated and licensed or certified clinicians who provide care under the direction and supervision of a licensed physical therapist. PTs and PTAs care for people of all ages and abilities.

What We Do

After performing an evaluation and making a diagnosis, physical therapists create and implement personalized plans based on best available evidence to help their patients improve mobility, manage pain and other chronic conditions, recover from injury, and prevent future injury and chronic disease. PTs and PTAs empower people to be active participants in their care and well-being. They practice collaboratively with other health professionals to ensure the best clinical outcomes.

Where We Practice

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

Education and Licensure

As of 2016, all PTs must receive a doctor of physical therapy degree from an accredited physical therapist education program before taking and passing a national licensure exam that permits them to practice. Licensure is required in each state (or other jurisdiction, including the District of Columbia, Puerto Rico, and the U.S. Virgin Islands) in which a PT practices. PTAs must complete a two-year associate's degree from an accredited physical therapist assistant program and pass a national exam. State licensure or certification is required in each state (or jurisdiction) in which a PTA works.

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. Our mission is to build a community that advances the profession of physical therapy to improve the health of society.



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