

July 7, 2020

The Honorable Mitch McConnell
Senate Majority Leader
317 Russell Senate Office Building
Washington, D.C., 20510

The Honorable Nancy Pelosi
Speaker of the House
1236 Longworth House Office Building
Washington, DC 20515

The Honorable Charles Schumer
Senate Minority Leader
322 Hart Senate Office Building
Washington, D.C., 20510

The Honorable Kevin McCarthy
House Minority Leader
2468 Rayburn House Office Building
Washington, DC 20515

Dear Speaker Pelosi, Minority Leader McCarthy, Senate Majority Leader McConnell and Minority Leader Schumer,

Thank you, and your colleagues, for the essential, and appropriately aggressive, steps you have taken to offer health care providers new and innovative ways to deliver health care during this COVID-19 crisis. Patients and providers have been able to connect through virtual health, telehealth, and other technologies as a result of quick congressional and administrative actions. As Congress considers additional ways to address the challenges posed by COVID-19, Vizient supports efforts to take bold steps to build on to the rapid expansion of telehealth by making permanent many of the new flexibilities that have been necessarily put in place to respond to this crisis.

Vizient is the nation's largest health care performance improvement company. Vizient provides solutions and services that improve the delivery of high-value care by aligning cost, quality and market performance for more than 50% of the nation's acute care providers, which includes 95% of the nation's academic medical centers, and more than 20% of ambulatory providers. Vizient provides expertise, analytics, and advisory services, as well as a contract portfolio that represents more than \$100 billion in annual purchasing volume, to improve patient outcomes and lower costs. Headquartered in Irving, Texas, Vizient has offices throughout the United States.

Throughout the ongoing COVID-19 crisis, America's hospitals and health care professionals have taken unprecedented steps to reconfigure health care delivery offerings through telehealth and other technologies. Many of these new modalities were deployed quickly, and successfully, throughout the country, allowing providers to both help slow the spread of the virus and ensure continued patient access to care. As Vizient continues to engage with our members, we have heard consistent themes – one of the loudest and most consistent of these themes is the need to make permanent

many of the new flexibilities related to telehealth. Health care providers have made significant investments to rapidly expand and deploy these new technologies, all while enduring concurrent financial challenges due to the COVID-19 pandemic. We strongly urge Congress to make permanent new flexibilities related to telehealth so that providers can more fully integrate these new health care delivery opportunities after the public health emergency (PHE) expires.

We recognize that many telehealth flexibilities provided during the COVID-19 PHE are under the jurisdiction of the Centers for Medicare and Medicaid Services (CMS), where they were detailed through waivers and in two Interim Final Rules with comment (IFC) period. Vizient is separately responding to the most recent IFC regarding the regulatory changes being proposed by CMS. However, because Congress has taken a leading role in the advancement of telehealth and must act in order to make many of those enhancements permanent, below we have provided our top priorities for your consideration as you to continue to support advancing telehealth and improving care delivery options for the future.

Making Needed Telehealth Flexibilities Permanent:

- **Telehealth Reimbursement and Payment Parity.** During the PHE, CMS has allowed telehealth services to be reimbursed as if they were delivered in-person. While CMS may have the legal authority to establish payment rates and continue parity for telehealth services, Vizient urges Congress to make it clear to the agency that it retains this authority even after the PHE ends. Many hospitals are making strategic decisions now to determine how to deploy limited resources, and assessing the long-term viability of widespread use of telehealth options. While utilization of telehealth resources in place of traditional face-to-face care has greatly expanded, the viability of maintaining such services into the future is largely unknown given the uncertainty about the duration of the PHE and long-term reimbursement rates. Offering greater clarity about the future of telehealth reimbursement would provide hospitals with needed certainty as they continue to make strategic investments in telehealth to support the patients and communities they serve.
- **Geographic and Originating Site Restrictions.** Under Section 1834 of the Social Security Act, telehealth services are currently allowed only to be delivered in limited geographic regions (rural areas) and in specific physical locations (hospitals/physicians' offices). Congress has provided the Secretary of Health and Human Services with the authority to waive these geographic and originating site requirements during the PHE. This vital step has allowed far greater access to, and utilization of, telehealth services. However, Congress must act to

permanently remove these restrictions so providers may continue to deliver vital telehealth services to patients once the PHE ends. In addition to maintaining the important flexibilities adopted during the PHE, Vizient similarly encourages Congress to permanently expand the providers eligible to act as distant sites to include Rural Health Clinics and Federally Qualified Health Centers. Vizient believes that Congress should also clarify that CMS has the authority to allow hospitals to bill for an appropriate originating site facility fee under Medicare Part B for telehealth services furnished by hospital-based outpatients, including for patients being treated at home.

- **Eligible Practitioners.** During the PHE, CMS broadly expanded the range of health care professionals eligible to bill Medicare for telehealth services (including, physical therapists, occupational therapists, and other practitioners). This step has broadly expanded access to multiple services to a wider population that otherwise would have been severely limited. While CMS has the existing legal authority to expand the array of clinical services available through telehealth, congressional action is needed to clarify HHS's ability to expand the types of practitioners (e.g., physician and non-physician practitioners) that are eligible to receive Medicare reimbursement for providing telehealth services.
- **Audio-only Connections.** During the course of the PHE, CMS has allowed audio-only services (including those furnished via telephone) to be considered part of "telehealth communications" so that certain services can be provided, and reimbursed, without the use of video technologies. Vizient urges Congress to either codify that "telecommunications systems" include audio-only connections, or make it clear to CMS that they retain the ability to make permanent certain telehealth services that can be provided by audio-only connections.
- **Federal Support for Broadband Deployment and Telehealth Technologies.** In order to ensure more widespread access to telehealth services in rural and underserved communities, Vizient encourages Congress to extend and authorize additional funding for the Federal Communications Commission's (FCC) COVID-19 Telehealth Program, and provide further support for the FCC's Rural Health Care Program.

As Congress and the administration resolve these issues and work towards establishing long-term policies related to telehealth, it is essential that the flexibilities offered during the PHE do not come to an abrupt end. **Vizient urges Congress to clarify that HHS has the authority to provide for a meaningful transition period after the PHE comes to a close. This is crucial to prevent significant care disruptions to patients as well as financial and compliance risks for hospitals.** While Vizient is

supportive of permanently extending many of the new flexibilities offered during the PHE, assurance that providers will not be expected to abruptly return to the previous status quo is essential.

The unprecedented impact of the crisis will resonate for years. To date, Congress and the administration have taken bold steps to help support hospitals across the country endure this crisis. We thank you for your continued leadership and now urge bold and thoughtful steps to successfully capitalize on the rapid expansion of telehealth services and improve access to care for patients. By acting now, Congress can advance telehealth services in a way that will provide meaningful long-term benefits for the U.S. health care system and patients across the country.

Please do not hesitate to contact me at shoshana.krilow@vizientinc.com or 202-354-2607 if you have any questions about Vizient or if there is any way we can be of assistance as you develop additional legislative solutions to address this crisis.

Sincerely,

A handwritten signature in black ink, appearing to read "Shoshana Krilow". The signature is fluid and cursive, written in a professional style.

Shoshana Krilow
Vice President, Public Policy & Government Relations

CC: Chairman Lamar Alexander
Ranking Member Patty Murray
Chairman Chuck Grassley
Ranking Member Ron Wyden
Chairman Frank Pallone
Ranking Member Greg Walden
Chairman Richard Neal
Ranking Member Kevin Brady