

July 17, 2023

The Honorable Chris Pappas
United States House of Representatives
452 Cannon House Office Building
Washington, DC 20515

The Honorable Lisa McClain
United States House of Representatives
444 Cannon House Office Building
Washington, DC 20515

The Honorable Jake LaTurner
United States House of Representatives
2441 Rayburn House Office Building
Washington, DC 20515

The Honorable Marcus Molinaro
United States House of Representatives
1207 Longworth House Office Building
Washington, DC 20515

The Honorable Alex Mooney
United States House of Representatives
2228 Rayburn House Office Building
Washington, DC 20515

The Honorable Zach Nunn
United States House of Representatives
521 Dirksen Senate Office Building
Washington, DC 20510

Dear Representatives Pappas, McClain, LaTurner, Molinaro, Mooney and Nunn:

On behalf of our nearly 5,000 member hospitals, health systems and other health care organizations, our clinician partners — including more than 270,000 affiliated physicians, 2 million nurses and other caregivers — and the 43,000 health care leaders who belong to our professional membership groups, the American Hospital Association (AHA) writes in support of the Protecting Rural Telehealth Access Act (S.1636/H.R. 3440).

Telehealth provided a critical way for patients to continue to access needed care during the COVID-19 pandemic. We appreciate the introduction of this bill, which proposes to make permanent several telehealth flexibilities that were provided during the public health emergency.

We support the provision in the legislation that would expand the list of permissible originating sites, allowing patients to access telehealth services from their homes. However, we urge you to further expand originating sites to any location in which a patient receives a telehealth service.



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Page 2 of 2

This legislation would also remove restrictions on store and forward technologies that are currently only allowed in Alaska and Hawaii. We also strongly support and appreciate the inclusion of provisions to authorize audio-only services and pay for them at rates equal to payment for audio/visual services. The flexibility to provide audio-only services has enabled hospitals and health systems to maintain access to care for numerous patients who do not have access to broadband or video conferencing technology. One barrier to expanding audio-visual telehealth to underserved populations has been lack of access to enabling technologies (like broadband, reliable Wi-Fi or smartphones), as well as education to support digital literacy. The Federal Communications Commission reports that over 22% of Americans in rural areas lack access to appropriate broadband (fixed terrestrial 25/3 Mbps) compared to 1.5% of urban areas. For patients to truly realize the benefits of this technology, additional support for cross-agency infrastructure is recommended.

In addition, the AHA supports allowing rural health clinics and federally qualified health centers to serve as distant sites, so that these facilities may use the providers at their own sites to offer care to patients, ensuring patients remain connected to their primary providers. These sites are important partners to hospitals, particularly in rural and underserved areas. The AHA supports allowing critical access hospitals the same ability to offer and bill for telehealth services.

Finally, we encourage the permanent expansion of eligible provider types able to perform telehealth services. During the COVID-19 PHE, CMS expanded the list of providers able to deliver telehealth to include physical therapists, occupational therapists, audiologists and speech language pathologists. This has improved access and patient satisfaction for additional specialties.

We appreciate your leadership on this important issue and look forward to working together to ensure passage of the Protecting Rural Telehealth Access Act.

Sincerely,

/s/

Stacey Hughes
Executive Vice President
Government Relations and Public Policy