



National Academies of Practice (NAP) Comments on file code CMS-1807-P

In response to a call for public comments, NAP submitted the following information to the Centers for Medicare and Medicaid Services on September 4, 2024

The members of the National Academies of Practice (NAP) appreciate this opportunity to respond to the *Medicare and Medicaid Programs; CY 2025 Payment Policies under the Physician Fee Schedule and Other Changes to Part B Payment and Coverage Policies; Medicare Shared Savings Program Requirements; Medicare Prescription Drug Inflation Rebate Program; and Medicare Overpayment.*

The National Academies of Practice is a non-profit organization founded in 1981 to advise governmental bodies on our healthcare system. Distinguished practitioners and scholars are elected by their peers from multiple different health professions to join the only interprofessional group of healthcare practitioners and scholars dedicated to supporting affordable, accessible, and coordinated quality healthcare for all. NAP firmly believes that close collaboration and coordination of different healthcare professions, aligned through a common vision, can advocate for patients and model excellence in interprofessional and preventive care. NAP is dedicated to lifelong learning from, with, and among different healthcare professions to promote and preserve health and well-being for society.

In response to the Centers for Medicare and Medicaid Services (CMS) invitation to this proposed rule, the National Academies of Practice offers comments in these specific areas: permanent assignment to the telehealth approved provider list, telehealth and its proven quality of care as well as improved access to and continuity of care through telehealth services.

Permanent Assignment to Telehealth Approved Provider List

When the telehealth provider extension through December 2024 was initiated, it was our understanding that this was to allow the needed time for CMS to assess the appropriateness, efficacy, and efficiency of telehealth services provided by professionals provisionally assigned to the approved provider list. Health care professionals previously excluded from the telehealth approved provider list currently care for patients more efficiently and very effectively via telehealth when these same patients may have had to once travel great distances, be hospitalized, or even go without medical intervention.

Since the end of the Public Health Emergency (PHE), improved access to care for many beneficiaries receiving telehealth services has been available for analysis. As a result, NAP members are hard-pressed to understand the need for the proposed analysis when CMS currently has the entire period during and after the Public Health Emergency to witness and analyze the outcomes of services provided by all professionals using telehealth.

Mentioned in and submitted with these comments, the National Academies of Practice is providing CMS access to extensive research and education that have been shared throughout the healthcare communities to assure clinically appropriate use of telehealth.

Proven Quality of Care

Extensive research, education, and collaborative service provision have proven that telehealth (also widely known as telepractice within the healthcare professions) is an effective, efficient, and high-quality method of care. As indicated in well researched documentation, multiple

professions not currently included among the approved Medicare list of telehealth providers have been able to utilize telehealth when clinically appropriate. While telehealth is applicable to most patient populations regardless of their geographic location and for most primary and specialty services, professional judgement is required to determine that it is a safe and clinically appropriate means to provide services. This rationale also applies when considering it facilitates timely access to care based upon selected situations and conditions (see *NAP Telepractice Toolkit*).

The National Academies of Practice is not requesting specific service codes to be named to the approved provider list. However, NAP is recommending that telehealth services listed as appropriate by the currently identified provisional telehealth providers (including physical therapy, occupational therapy and speech-language pathology) become permanently accepted and permitted to continue to be used as an effective means to assure access to clinically appropriate and high-quality care.

Access to and Continuity of Care

As previously mentioned, there is concern that the Centers for Medicare and Medicaid Services (CMS) has not added several healthcare services to the authorized telehealth services list, either on a provisional or permanent basis. We understand that Congressional legislation is necessary to permanently support telehealth services provided by all healthcare providers and we appreciate the latitude CMS afforded the healthcare community in response to the COVID-19 Public Health Emergency. Telehealth (aka telepractice) services are currently being provided to effectively allow beneficiaries smooth transitions throughout the healthcare continuum as well as assuring access to care when services may not be readily or locally available. Many times, during and since the Public Health Emergency (PHE), healthcare providers have been able to collaboratively service patients in a more efficient manner than pre-COVID. Current technology, advances in clinical practice, and strong interprofessional education have allowed for a continuity in healthcare that was rarely experienced prior to the PHE. To remove such significant improvements to access and continuity of care could prove to be a catastrophic digression and an injustice to the patients who are currently or would in the future benefit from this very effective service delivery.

In addition to the comments made herein, we respectfully request serious consideration of the information in two resources from the National Academies of Practice (see attached [Position Statement on the Provision of Telehealth Services](#) and [NAP Telepractice Toolkit](#)).

These documents have been extensively researched and created by representatives of many professions committed to clinically appropriate health care.

The National Academies of Practice is committed to advancing high-quality interprofessional education and collaborative practice. Requests for additional information or to collaborate should be submitted to NAP President Andrea Pfeifle at Andrea.Pfeifle@osumc.edu and NAP Executive Director Melanie Bowzer at mbowzer@amrms.com.

Attachments:

[National Academies of Practice Position Statement on the Provision of Telehealth Services](#)
[NAP Telepractice Toolkit](#)