



AMERICAN
SPEECH-LANGUAGE-
HEARING
ASSOCIATION

December 31, 2018

Seema Verma, MPH
Administrator
Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-4185-P
Mail Stop C4-26-05
Baltimore, MD 21244-8016

RE: Medicare and Medicaid Programs; Policy and Technical Changes to the Medicare Advantage, Medicare Prescription Drug Benefit, Program of All-inclusive Care for the Elderly (PACE), Medicaid Fee-For-Service, and Medicaid Managed Care Programs for Years 2020 and 2021

Dear Administrator Verma:

On behalf of the American Speech-Language-Hearing Association, I write to comment on the proposed rule for Medicare Advantage (MA) plans and coverage of telehealth services effective for 2020 and 2021.

The American Speech-Language-Hearing Association (ASHA) is the national professional, scientific, and credentialing association for 198,000 members and affiliates who are audiologists; speech-language pathologists; speech, language, and hearing scientists; audiology and speech-language pathology support personnel; and students.

ASHA fully supports many of the provisions included in the proposed rule as well as the approach that the Centers for Medicare & Medicaid Services (CMS) is taking to implement telehealth benefits for MA plans required under the Bipartisan Budget Act of 2018 (P.L. 115-123).

In the proposed rule, CMS defines telehealth benefits "...as services that meet the following: (1) are furnished by an MA plan for which benefits are available under Medicare Part B but which are not payable under section 1834(m) of the Act; and (2) have been identified by the MA plan for the applicable year as clinically appropriate to furnish through electronic exchange." We believe this will expand access to health care for MA plan beneficiaries by broadening the qualified health care providers eligible to provide telehealth services, when appropriate, including audiologists and speech-language pathologists (SLPs). Therefore, ASHA supports telehealth benefits as defined in the proposed rule and encourages CMS to finalize the proposal.

Further, CMS proposes to define "clinically appropriate" as benefits provided "...in a manner consistent with professionally recognized standards of health care." ASHA has extensively explored the application of telehealth to the services our members provide to patients, and

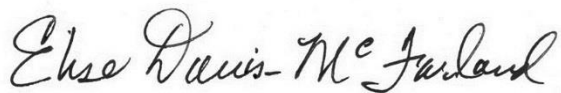
maintains that the use of telehealth should be based on the unique clinical presentation of the patient, the skills of the clinician, and the quality of telehealth services should be equivalent to services provided face-to-face.¹ Therefore, ASHA supports CMS' definition of "clinically appropriate" as proposed.

Finally, the proposed rule outlines what constitutes electronic exchange to include—but not limited to—"secure messaging, store and forward technologies, telephone, videoconferencing, other internet-enabled technologies, and other evolving technologies as appropriate for non-face-to-face communication." ASHA agrees with the concept of the proposed definition, but requests that CMS revise the technology definition to most accurately capture the details of the service delivery method and reflect recent Current Procedural Terminology (CPT®) codes that describe telehealth services as follows:

- **Synchronous** (client interactive)—services conducted with interactive audio and video connection in real time to create an in-person experience similar to that achieved in a traditional encounter. Synchronous services may connect a client or group of clients with a clinician, or they may include consultation between a clinician and a specialist.
- **Asynchronous** (store-and-forward)—images or data captured and transmitted (i.e., stored and forwarded) for later viewing or interpretation by a professional. Examples include transmission of voice clips, audiologic testing results, or outcomes of independent client practice.
- **Hybrid**—applications of telehealth that include combinations of synchronous, asynchronous, and/or in-person services.

Thank you for the opportunity to comment on this proposed rule. We look forward to working with CMS to ensure audiologists and SLPs are recognized as providers of telehealth services. If or your staff have any questions, please contact Sarah Warren, MA, ASHA's director for health care policy for Medicare, at swarren@asha.org.

Sincerely,



Elise Davis-McFarland, PhD, CCC-SLP
2018 ASHA President

¹ American Speech-Language-Hearing Association. (2018). *Practice Portal, Professional Issues: Telepractice*. Retrieved from <https://www.asha.org/practice-portal/professional-issues/telepractice/>.