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July 2nd, 2020

Seema Verma, Administrator Centers for Medicare & Medicaid Services Department of Health and Human Services Att: CMS-5531-IFC P.O. Box 8016 Baltimore, MD 21244-8016

Re: Additional Policy and Regulatory Revisions in Response to COVID-19 (CMS-5531-IFC)

Dear Administrator Verma,

The Global Healthy Living Foundation (GHLF) writes to you regarding the expansion of covered telehealth services included in the Additional Policy and Regulatory Revisions in Response to COVID-19 Interim Final Rule with Comment (IFC).

By way of background, GHLF is a 21-year-old non-profit patient organization reaching millions of chronically ill patients and their caregivers across the country through social media, community events, and online support and education. Our ArthritisPower registry of nearly 30,000 patient participants was developed as part of the National Patient-Centered Clinical Research Network (PCORnet) with data capture mapped to the PCORnet Common Data Model. GHLF works to improve the quality of life for patients living with chronic disease by making sure their voices are heard and advocating for improved access to care at the local and federal level. Our patients suffer from chronic conditions including arthritis, psoriasis, gastrointestinal disease, cardiovascular disease, sickle cell, lung disease, MS, diabetes, migraine and others.

Our patient community is among the most vulnerable groups to contract severe cases of COVID-19 and many have been sheltering in place safely for the past three months. However, just because they have put their lives on hold for the coronavirus, it does not mean that their chronic conditions have hit the pause button as well. At the beginning of this pandemic, CMS began to expand telehealth services after recognizing the need to remove the choice from patients between seeking care for their conditions and staying safely isolated at home.

According to American Hospital Association (AHA) data, the use of telehealth in hospitals has grown from 2010-2017 from 35 percent to 76 percent of hospitals using telehealth systems. A 2018 JAMA study examined trends in telemedicine use in a large commercially insured population and similarly found that telemedicine increased substantially from 2005 to 2017. The

 $^{^1\} https://www.aha.org/system/files/2019-02/fact-sheet-telehealth-2-4-19.pdf$

study also found that there was a rapid increase in primary care telemedicine visits between 2016 and 2017 after insurance coverage expanded.2

During the COVID-19 pandemic, telehealth is being embraced like never before. Providers and patients are finding new ways to communicate, which has led to an increase in demand for telehealth services. Telehealth allows medical professionals to provide care at a distance which is extremely important during this public health emergency. Telehealth services help keep people safe during this pandemic while also meeting patients' needs by providing immediate access to providers without risk of exposure.

GHLF asked our patient community to rate their experience with telemedicine over the past two months on a scale of 1-10 (10 being an excellent experience). Seventy-three percent of respondents said they have used telemedicine in the past two months and of those who have used it, they rated with experience as a 7.9, with 41 percent giving it a score of 10. Further, based on responses to a social media prompt from our organization, we found that patients are positive about these visits when telehealth is done correctly.3

GHLF strongly supports the reforms made to the telehealth approval process and we applaud the Centers for Medicare & Medicaid Services (CMS) for taking preemptive action for further expansion of telehealth services. With this IFC, CMS reaffirms that commitment to ensuring patients receive the highest quality care possible with the fewest delays. By moving the approval of further telehealth services to a subregulatory process and not explicitly stating an approval criteria or process, CMS is giving itself the flexibility to approve future telehealth services without the previously required comment period. This will get care into the hands of patients faster and guarantee that CMS will be able to ensure that patients receive the highest quality care without risking their own personal health.

We appreciate the opportunity to provide comments on regulatory changes that will have direct impacts on our patient community. Please contact me at snewmark@ghlf.org for more information from the perspective of chronically ill patients, including those with psoriasis, inflammatory bowel disease and autoimmune arthritis or any other chronic conditions.

Respectfully submitted,

Steven Newmark, JD, MPA

Director of Policy and General Counsel

Global Healthy Living Foundation

² https://jamanetwork.com/journals/jama/fullarticle/2716547

³ https://www.facebook.com/creakyjoints/photos/a.10150251886510303/10156918373490303/?type=3&theater