October 17, 2017

Director, Regulation Policy and Management
Department of Veterans Affairs
810 Vermont Avenue, NW
Room 1063B
Washington, DC 20420

Re: RIN 2900-AQ06-Authority of Health Care Providers to Practice Telehealth

Dear Director, Regulation Policy and Management:

On behalf of our more than 100,000 member physical therapists, physical therapist assistants, and students of physical therapy, the American Physical Therapy Association (APTA) respectfully submits comments to the Department of Veterans Affairs (VA) regarding the VA’s Authority of Health Care Providers to Practice Telehealth proposed rule. The mission of APTA is to further the profession’s role in the prevention, diagnosis, and treatment of movement dysfunctions and the enhancement of the physical health and functional abilities of members of the public. APTA applauds the VA for issuing this proposed rule, which clarifies that VA health care providers may “exercise their authority to provide care through the use of telehealth, notwithstanding any state laws, rules, or licensure, registration, or certification requirements to the contrary.”¹

Physical therapists are highly trained professionals who see patients in a variety of settings. Physical therapists perform evaluations including a patient’s history, a review of systems, and an administration of standardized tests and objective measures based on the patient’s presentation and the findings in the review of systems. Through a collaborative process with the patient, and other members of the health care team when indicated, the physical therapist develops goals and a plan of care to address the needs of the patient. The physical therapist executes that plan of care with the patient through the provision of specific techniques and procedures designed to optimize movement and function, decrease and/or manage pain, and reduce the risk for adverse events including further

functional decline, falls, progression of pain, or the long-term need for pain medication, avoidable surgical procedures and/or hospitalizations, and disability.

APTA strongly supports the VA’s proposal to expand access to telehealth services by preempting state laws and regulations that have inhibited the effective delivery of telehealth services to veterans. The VA’s telehealth proposal will eliminate access barriers for veterans while offering additional clarity to state licensing boards surrounding licensure exceptions for VA health professionals. Allowing VA health care providers, including physical therapists, to provide telehealth services across state lines will lead to reduced health care expenditures, increased patient access to care, and improved management of chronic disease, particularly in rural and underserved areas. Patient geography no longer will be a barrier to receiving timely, appropriate medical care. While we do not believe rehabilitative services furnished via telehealth would replace traditional clinical care, it does give physical therapists and physical therapist assistants the flexibility to provide care in a greater capacity.

We appreciate that the VA is actively working to better enhance the connection between veterans and their health care providers, regardless of their respective geographic locations. By expanding the telehealth program to allow VA health care providers to deliver telehealth within states and across state lines, the VA is ensuring that veterans’ access to high-quality care will be improved. It also allows for seamless and immediate access for veteran-centered health care. Moreover, the proposal, if finalized, would assist the VA in its efforts to recruit the highest-quality medical professionals into the VA health care system.

In an effort to improve licensure portability for physical therapists and physical therapist assistants, the Federation of State Boards for Physical Therapy, with support from APTA, recently developed an interstate licensure compact for physical therapy.2 The purpose of the Physical Therapy Licensure Compact (PTLC) is to increase consumer access to physical therapy services by reducing regulatory barriers to interstate mobility and cross-state practice. Under the compact, physical therapists and physical therapist assistants will be able to select additional participating states in which they wish to practice and apply for privileges, while maintaining licensure in their home state. This compact, currently adopted in 14 states, also will allow physical therapists located in states that have signed onto the PTLC to use telehealth to expand their practices and enhance patient access. Currently, the Compact Commission is forming and finalizing rules and bylaws; the data systems required to implement and maintain the compact also are in the process of being developed. We anticipate that the PTLC will be operational in 2018.

Telerehabilitation has the potential to greatly enhance patient health and wellbeing, a benefit the VA has recognized. Proper application of telehealth rehabilitation therapy services potentially can have a dramatic impact on improving care, and reducing negative consequences and costs of care, by ensuring access to specialized care in geographic

2 For more information, please visit: http://www.fsbpt.org/FreeResources/PhysicalTherapyLicensurecompact.aspx
areas that face difficulties in maintaining and staffing full-service hospitals. Telehealth therapy services have the potential to prevent falls, functional decline, costly emergency room visits, and hospital admissions and readmissions.

Wider use of telehealth will help veterans overcome access barriers to high-quality rehabilitative services. APTA thanks the VA for the opportunity to comment on the Authority of Health Care Providers to Practice Telehealth proposed rule. We strongly support the VA’s proposal and encourage the VA to finalize the rule as proposed. Should you have any questions regarding our comments, please contact Kara Gainer, Director of Regulatory Affairs, at karagainer@apta.org or 703/706-8547.

Thank you for your consideration.

Sincerely,

Sharon L. Dunn PT, PhD
Board-Certified Orthopaedic Clinical Specialist
President

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