



May 10, 2017

The Honorable Brian Schatz
United States Senate
722 Hart Senate Office Building
Washington, DC 20510

Dear Sen. Schatz:

On behalf of the American College of Physicians (ACP), I am writing to express our support for the CONNECT for Health Act, S. 1016. The legislation would substantially expand the use of telemedicine and remote patient monitoring (RPM) services by physicians and other clinicians to improve care of patients enrolled in Medicare. ACP strongly supports this objective and greatly appreciates your efforts to make telemedicine and RPM services more accessible.

The American College of Physicians is the largest medical specialty organization and the second-largest physician group in the United States. ACP members include 148,000 internal medicine physicians (internists), related subspecialists, and medical students. Internal medicine physicians are specialists who apply scientific knowledge and clinical expertise to the diagnosis, treatment, and compassionate care of adults across the spectrum from health to complex illness.

ACP supports the expanded role of telemedicine as a method of health care delivery that may enhance patient–physician collaborations, improve health outcomes, increase access to care and members of a patient's health care team, and reduce medical costs when used as a component of a patient's longitudinal care. ACP also supports lifting geographic site restrictions that limit reimbursement of telemedicine and telehealth services by Medicare to those that originate outside of metropolitan statistical areas or for patients who live in or receive service in health professional shortage areas.

- Accordingly, the College supports Accountable Care Organizations (ACOs) in the Medicare Shared Savings Program (MSSP) with two-sided risk being able to furnish telemedicine and RPM services to their Medicare patients not subject to geographic restrictions and originating site requirements under current law. ACP would prefer broadening this to allow *all* MSSP tracks (including those ACOs with one-sided risk) to remove those restrictions to expand the use of telehealth services.
- The Act would allow a Medicare Advantage plan to offer additional, clinically appropriate, telehealth benefits in its annual bid amount beyond the services that currently receive payment under Part B. ACP is supportive of this policy as it would

expand the role of telemedicine as a method of health-care delivery that may enhance patient care.

- The College also supports the Act requiring that Medicare cover the use of RPM services by Medicare providers for certain Medicare beneficiaries with chronic conditions. ACP believes that the use of RPM services for patients with chronic conditions could help control and manage those conditions and improve the health outcomes for those patients while lowering costs.
- Lastly, ACP supports lifting geographic-site restrictions for telestroke evaluation and management sites where the Medicare beneficiary is located. ACP believes that expanding the use of telemedicine for Medicare stroke is an area where evidence supports cost-effectiveness, safety, and positive health outcomes associated with telemedicine. Additionally ACP has previously supported stroke telehealth-services in chronic care policy options.

We appreciate your continued leadership on this important issue and will make every effort to help advance this necessary legislation. We stand ready to serve as a resource and welcome the opportunity to work with you going forward.

Sincerely,

A handwritten signature in black ink, appearing to read "Jack Ende", with a long horizontal flourish extending to the right.

Jack Ende, MD, MACP
President

Cc: House and Senate original cosponsors