October 23, 2023

Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS–3442–P, Mail Stop C4–26–05
7500 Security Boulevard
Baltimore, MD 21244–1850

Re: ATA Action Comments on the CMS Proposed Rule 88 FR 61352

On behalf of ATA Action, the American Telemedicine Association’s trade organization focused on advocacy, thank you for the opportunity to comment on the Centers for Medicare & Medicaid Services (CMS) proposed rule intended to ensure safe and quality care in Medicare and Medicaid certified Long-Term Care (LTC) facilities. We appreciate your commitment to addressing the safety and quality of care for patients in these facilities.

This proposed rule comes at a time when LTCs are facing historic labor shortages and inflation. In a report dated June 2022 about a survey conducted by the National Center for Assisted Living with 120 assisted living providers, staffing issues have gotten worse for more than half of assisted living communities since the beginning of 2022. More than half (63%) of facilities have moderate to high levels of staffing shortages, and 87% of facilities report difficulties with hiring new staff. Some facilities have concerns about closing due to understaffing.¹

Telehealth can help mitigate the healthcare shortages by expanding access to providers, reducing burnout among local ones, improving workforce recruitment and retention, enhancing training, and reducing time spent on administrative tasks. Telehealth also can improve health outcomes by providing access to specialists and addressing the lack of trust in nursing homes health care staff. For example, patients have reported increased positive health behaviors, fewer symptoms, and higher quality of life and satisfaction with treatment when trust in their health care professional was higher.² In a study with informal and formal caregivers designed to explore their experiences and challenges with nursing home to emergency department transfers, it was found that telehealth might be able to mitigate some of those concerns. Transfers were commonly viewed as being influenced by a perceived lack of trust in nursing home care and capabilities. The distrust was driven by four main factors: questioning the quality of nursing home nurses' assessments, perceptions that physicians were absent from the nursing home, misunderstanding of the capabilities of nursing homes and emergency departments, and perceptions that responses to medical needs were inadequate.³ Telehealth can reduce these issues of distrust,⁴ which may not be addressed with the addition of staffing.

In a national study that included 664 nursing homes, administrators reported a wide range of telehealth use including approximately 16% having no telehealth use, 5% having the maximum amount of telehealth use, and 79% reporting partial telehealth implementations. These findings suggest that there are gaps and opportunities in the use of telehealth in nursing homes.⁵
Telehealth is an effective tool for helping to combat workforce shortages while delivering high quality care. ATA Action recommends policymakers consider policies that can streamline and expand the use of telehealth in long-term healthcare facilities.

Again, we applaud the CMS for soliciting feedback from stakeholders on this matter and appreciate its work to ensure quality and safe care in LTC facilities. With existing staffing shortages, telehealth can play a vital role to fill in this gap and keep these essential facilities open.

Thank you for your consideration of this information.

Kind regards,

Kyle Zebley
Executive Director
ATA Action

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