

August 19, 2020

The Honorable Nancy Pelosi
Speaker of the House
United States House of Representatives
Washington, DC 20515

The Honorable Mitch McConnell
Majority Leader
United States Senate
Washington, DC 20510

The Honorable Kevin McCarthy
Minority Leader
United States House of Representatives
Washington, DC 20515

The Honorable Charles Schumer
Minority Leader
United States Senate
Washington, DC 20510

Dear Speaker Pelosi, Leader McConnell, Leader McCarthy, and Leader Schumer:

Thank you for your continued leadership in responding to the COVID-19 pandemic.

The Heart Failure Society of America (HFSA) represents more than 2,000 members of the multidisciplinary heart failure team, including physicians, nurses, pharmacists, physician assistants, researchers, and patients, dedicated to significantly reducing the burden of heart failure and improving and expanding heart failure care through collaboration, education, innovation, research, and advocacy.

As you work toward a bipartisan agreement on the next coronavirus relief package, HFSA urges you to consider the following provisions important to patient access to care, scientific research, and safeguarding the stability of medical practices.

Access to Care

Maintain Telehealth Accessibility – The COVID-19 pandemic has generated an important opportunity to learn about delivering heart failure care in a different way that should be fully embraced well beyond the current crisis, and HFSA urges you to consider the evolving role of telehealth in our nation’s health care system beyond the COVID-19 pandemic. A [paper](#) developed by HFSA members and published in the Journal of Cardiac Failure delves into virtual visits and telehealth for the care of patients with heart failure in the COVID-19 era and reviews the platforms, reimbursement models, advantages and limitations of virtual visits. There is great potential to increase visits and maintain close patient interactions virtually beyond the end of the current public health emergency. Therefore, we urge Congress to maintain ongoing flexibilities beyond the expiration of the COVID-19 public health emergency (PHE) declaration to allow for the continued provision of telehealth. Current waivers related to geographic, originating site, and frequency restrictions should be extended to provide stability for patients and clinicians as permanent, long-term policies are designed and implemented. The next relief package should also ensure adequate payment for telehealth services, in line with in-person visits, while continuing coverage for audio-only services.



Ensure Timely Access to Health Care for Patients – HFSA urges you to include funds to prioritize the development of and access to consistent, unbiased, and reliable COVID-19 testing with rapid results, including antigen and antibody testing.

We also reconfirm our strong commitment to health equity in America. African Americans have a higher prevalence of heart failure, develop heart failure at an earlier age, have a higher degree of cardiac dysfunction and disease severity at the time of diagnosis, and have higher rates of heart failure hospitalizations compared to other races. These data underline the importance of recognizing the potential reasons for these disparities and developing effective strategies to eliminate racism and health inequity. The recent identification of health disparities during the COVID-19 pandemic is only the latest example of the challenges we face. We call on Congress to consider the role of racial and ethnic health disparities in negotiating the next COVID-19 package and to further address the disproportionate incidence of COVID-19 diagnoses in communities of color.

Congress should also make an effort to relieve administrative burdens for health care providers where possible. The next coronavirus response legislation should direct Medicare Advantage plans to waive prior authorization requirements until the current PHE is lifted and in the near term thereafter. HFSA supports the inclusion of the *Improving Seniors' Timely Access to Care Act* (H.R. 3107), which would streamline current prior authorization practices and increase transparency and accountability in Medicare Advantage. Lawmakers should also suspend administrative requirements that occupy critical clinician time and energy, including Medicare Incentive Payment System (MIPS) requirements and Appropriate Use Criteria (AUC).

Boost Vital Scientific Research

HFSA expresses strong support for much-needed emergency relief funding for the National Institutes of Health (NIH) and other federal science agencies. HFSA has heard from our members that existing research has slowed down or stopped and clinical trial operations have been modified due to COVID-19. In response to an ongoing survey, the members of the [HFSA Research Network](#) reported that their clinical research site has experienced changes in staffing including furloughs, reallocation of staff to COVID studies, personal time off, and remote working. Many sites are not open to new enrollment for trials. Recognizing the disruptions to clinical trials, the [Heart Failure Collaboratory](#) published a [statement](#) in *JACC: Heart Failure* specifically addressing heart failure clinical trials and outlining a number of guiding principles and possible trial conduct solutions for the COVID-19 pandemic.

HFSA supports passage of the *Research Investment to Secure the Economy (RISE) Act* (H.R. 7308). This bill would authorize \$10 billion in critical funding for NIH to recover from this unprecedented shut down and ensure that we embrace existing scientific opportunity and future innovation in heart failure and other areas. This supplemental funding would allow the duration of existing grants to be extended, enable researchers to complete work disrupted by COVID-19, extend the training of young investigators, and support the changes needed to safely resume on-site research activities.

Safeguard the Stability of Medical Practices

HFSA supports the inclusion of measures to safeguard the stability of medical practices, including additional funding for the Paycheck Protection Program (PPP) and the Provider Relief Fund, and extending the authority for the Small Business Administration to process PPP loans after August 8. The next COVID-19 legislative response should clarify that relief from the CARES Act Provider Relief Fund will not be subject to taxation. HFSA also supports a reduction of interest rates for loans offered through the Medicare Accelerated and Advanced Payment Program, which should result in CMS accepting new applications for the programs. Lawmakers should consider additional flexibilities for this program, including delaying recoupment until one year after the payment is issued or converting program loans into grants. We also support the inclusion of liability protections in the next COVID-19 relief package. HFSA supports the *Coronavirus Provider Protection Act* (H.R. 7059), which would expand liability protections for health care volunteers and providers on the front

lines of caring for patients during the pandemic. We urge you to include additional resources to ensure the availability of personal protective equipment (PPE) to all clinicians currently caring for patients and make sure that PPE can be easily obtained during any future national emergencies. The package should include efforts to prepare for the next PHE – supporting access to PPE in the future and strengthening our national stockpiles.

If we can provide additional information or answer any questions, please contact Sue Ramthun at sramthun@hfsa.org. And thank you again for your continued leadership.

Sincerely,

A handwritten signature in blue ink, appearing to read "Biykem Bozkurt".

Biykem Bozkurt, MD, PhD, FHFA
President
The Heart Failure Society of America