

June 1, 2020

Seema Verma  
Administrator  
Centers for Medicare & Medicaid Services  
U.S. Department of Health and Human Services  
Attention: CMS-1744-IFC  
P.O. Box 8016  
Baltimore, MD 21244-8016

Submitted electronically to <http://www.regulations.gov>

Re: Medicare and Medicaid Programs; Policy and Regulatory Revisions in Response to the COVID-19 Public Health Emergency

Dear Administrator Verma:

I write to provide comments on *Medicare and Medicaid Programs; Policy and Regulatory Revisions in Response to the COVID-19 Public Health Emergency* (CMS-1744-IFC).

The National Association of Social Workers (NASW) represents more than 110,000 social workers nationwide. Many of these social workers serve Medicare beneficiaries in numerous settings, including home health. NASW urges the Centers for Medicare & Medicaid Services (CMS) to allow provision of medical social services via telehealth—both audio-only and two-way audio-video—during the COVID-19 public health emergency (PHE). These services are provided by both home health social workers (individuals with a master’s degree in social work, or MSW) and social work assistants (individuals with a bachelor’s degree in social work [BSW] or another bachelor’s-level degree).

Access to home health services is critical during this unprecedented PHE. Home health services help prevent hospitalization and stays in skilled nursing facilities, inpatient rehabilitation facilities, and other inpatient settings. Similarly, home health services are essential when beneficiaries transition home from the hospital and postacute settings—whether they’ve received inpatient care for COVID-19 or for other conditions. Consequently, NASW supports CMS’s clarification, within the interim final rule, of “homebound” status under the Medicare home health benefit.

Yet, NASW has learned that many Medicare beneficiaries are declining in-person visits from home health personnel because they fear exposure to COVID-19. Moreover, many home health social workers have told NASW that they lack sufficient personal protective equipment to conduct home visits safely. Given these circumstances, NASW appreciates CMS’s flexibility regarding Medicare home health agencies’ use of

technology during the PHE. Despite this flexibility, however, many social workers have informed NASW that their agencies are not permitting them to use telehealth. Instead, these staff members are encouraged or required to continue in-person visits, at risk both to their own health and safety and that of the beneficiaries whom they serve.

The aforementioned factors have decreased beneficiaries' access to home health services at a time when they are most needed. To mitigate this problem, NASW urges CMS to allow home health social workers and social work assistants to provide services via telehealth (both audio-only and two-way audio-video) during the PHE. Such flexibility would match that outlined in the interim final rule for nurses (page 19248). It could also match the telehealth flexibility granted to occupational therapists (OTs), physical therapists (PTs), and speech-language pathologists (SLPs) in the Administration's *Second Round of Sweeping Changes to Support U.S. Healthcare System During COVID-19 Pandemic*, announced on April 30; CMS staff told NASW during the May 13 National Medicare Education Program call that these changes *might* apply to OT, PT, and SLP services provided in home health settings. Most importantly, allowing home health social workers and social work assistants to provide services via telehealth would ensure ongoing access to home health services while protecting the health and safety of Medicare beneficiaries, family caregivers, and home health staff.

Thank you for the opportunity to provide input on the interim final rule. If you have any questions or require additional information, please contact me at [amangum.nasw@socialworkers.org](mailto:amangum.nasw@socialworkers.org) or (202) 336-8210.

Sincerely,

A handwritten signature in cursive script that reads "Anna Mangum".

Anna Mangum, MSW, MPH  
Deputy Director, Programs