

**Congress of the United States**  
**Washington, DC 20515**

May 13, 2020

The Honorable Nancy Pelosi  
Speaker of the House  
United States House of Representatives  
H-222 The Capitol  
Washington, DC 20515

The Honorable Kevin McCarthy  
House Minority Leader  
United States House of Representatives  
H-204 The Capitol  
Washington, DC 20515

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

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

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

Thank you for your leadership during this difficult time and for your commitment to bipartisan solutions to address the health and financial impact of the COVID-19 pandemic on our nation and its citizens. Older adults have the highest risks associated with COVID-19, bearing higher hospitalization and mortality rates than any other population. As you craft upcoming emergency COVID-19 relief packages, we respectfully request that you include the provisions contained in H.R. 4056/ S.2446, the Medicare Audiologist Access and Services Act, to enable vulnerable seniors to readily access critical hearing and balance healthcare services.

As COVID-19 forces many seniors into isolation, outdated Medicare requirements limit their ability to access the audiology services they need. Unlike other government programs and private insurers, including Medicare Advantage plans, Medicare currently mandates that beneficiaries obtain a physician order before they are allowed to access an audiologist, even for a hearing test. Medicare laws have never been updated to reclassify audiologists from suppliers to practitioners. Due to this shortfall, audiologists are excluded from health professionals who are authorized by statute to be reimbursed for services provided through telehealth.

Congress provided the Secretary of the Department of Health and Human Services (HHS) broad waiver authority under Section 3703 of the Coronavirus Aid, Relief, and Economic Security (CARES) Act (P.L. 116-136) to waive the requirements within Section 1834(m) of the Social Security Act, which restricts coverage of telehealth services to only those services provided by physicians and practitioners. This broad authority gives the Secretary the ability to designate additional categories of clinicians, including audiologists, as authorized to provide and be

reimbursed for services to Medicare beneficiaries through telehealth. However, to date, the Secretary has only granted waivers pertaining to audiologists for four billing codes that are not typically provided by the majority of audiologists to the Medicare population. At this time it is necessary to remove the physician order requirement for Medicare beneficiaries who need audiology services and expand the waiver to include all services that audiologists are already authorized to bill for medically necessary in-person visits so long as they can safely and effectively provide these services through telehealth.

At the present time, many seniors are effectively cut off from the world as senior living facilities across the country have enforced a lockdown and states have issued stay-at-home orders. This is a frightening time for many seniors and communicating adequately is essential for them to interact with caregivers and medical professionals, and allows them to stay connected with family members and friends through technology.

Even under the best of circumstances, Medicare beneficiaries face significant barriers in accessing the services of an audiologist. H.R. 4056/ S.2446 was introduced long before the current public health crisis. This legislation eliminates outdated physician order requirements, and makes technical updates to the Medicare statute to classify audiologists appropriately as practitioners, and to authorize Medicare to reimburse audiologists for the Medicare-covered, medically necessary treatment services that they are licensed to provide.

Evidence reveals delayed treatment and non-treatment of audiologic conditions elevates the risk for falls and fall-related injuries, depression, and cognitive decline, all of which carry tremendous societal and financial costs. According to the Centers for [Centers for Disease Control and Prevention](#), individuals with even mild hearing loss are three times more likely to experience a fall. Falls are the leading cause of fatal injury for Americans over age 65.<sup>1</sup> In addition, [research is now emerging](#) indicating that seniors with untreated hearing loss are more likely to develop cognitive decline up to 40% faster than those without hearing loss.<sup>2</sup> [A recent comprehensive study](#) with more than 147,000 participants found that older adults with hearing loss were 47% more likely to experience depression than those with normal hearing.<sup>3</sup>

H.R. 4056/ S.2446 have broad bipartisan support in the House and Senate from members across our respective caucuses and conferences. At a time when our nation faces unprecedented economic challenges, it is important to note that the Medicare Audiologist Access and Services Act will not add *new* services into the Medicare system. This legislation provides better access to

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<sup>1</sup> Elizabeth Burns and Ramakrishna Kakara, "Deaths from Falls Among Persons Aged  $\geq$  65 Years," *Morbidity and Mortality Weekly Report* 67, no. 18 (2018): 509-514, <http://dx.doi.org/10.15585/mmwr.mm6718a1>.

<sup>2</sup> Frank R. Lin et al., "Hearing Loss and Cognitive Decline in Older Adults," *JAMA Internal Medicine* 173, no. 4 (2013): 293-299, <http://dx.doi.org/10.1001/jamainternmed.2013.1868>.

<sup>3</sup> Blake J. Lawrence et al., "Hearing Loss and Depression in Older Adults: A Systematic Review and Meta-analysis," *The Gerontologist* 60, no. 3 (2020): 137-154, <https://doi.org/10.1093/geront/gnz009>.

care for Medicare beneficiaries, while creating meaningful efficiencies in the way that covered audiology services are delivered.

We appreciate your consideration of our important request to include these provisions in impending COVID-19 legislation to remedy outdated barriers to hearing and balance healthcare for our nation's most vulnerable and to allow audiologists to be better deployed to serve them, now and in the future.

Sincerely,



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Tom Rice  
Member of Congress



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Elizabeth Warren  
United States Senator



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Matt Cartwright  
Member of Congress



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Rand Paul  
United States Senator



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Krysten Sinema  
United States Senator



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Darren Soto  
Member of Congress



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Gus M. Bilirakis  
Member of Congress



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Rodney Davis  
Member of Congress