March 20, 2020

Majority Leader Mitch McConnell
S-230 Capitol
Washington, D.C. 20515

Minority Leader Chuck Schumer
S-221 Capitol
Washington, D.C. 20515

Speaker Nancy Pelosi
H-232 Capitol
Washington, D.C. 20515

Minority Leader Kevin McCarthy
H-204 Capitol
Washington, D.C. 20515

Dear Leaders:

The Health Innovation Alliance (HIA, www.health-innovation.org) writes to urge you to include technology provisions in the third coronavirus bill that will help halt the spread of the virus and assist public health authorities and hospitals assess their capacity and respond. HIA is a diverse coalition of health care providers, patient advocates, consumers, employers, technology companies and payers who support the adoption and use of health IT to improve health outcomes and to lower costs. We strive for an interoperable, patient-directed health system where providers are emboldened, not burdened, by technology and entrepreneurs are able to bring new products to market at the speed of innovation.

We believe the programs outlined below will slow the spread of the virus and they should be included in the fiscal stimulus bill.

At-Home Telehealth Testing and Treatment

During the COVID-19 pandemic, telehealth is a valuable tool in expanding access to testing and care in the home. This will help limit new infections while ensuring sick people receive the care they need. It will also help alleviate capacity issues by triaging patients who may have symptoms of the virus, but who do not require hospitalization. Finally, telehealth can help protect the health and safety of health workers by limiting needless exposure to infected patients.

On March 18, President Trump announced that researchers are looking into the efficacy of "self-swab" coronavirus testing. We urge Congress to require the U.S. Department of Health and Human Services (HHS) to work with the private sector in developing a self-swab test that can be done at home. Such a test could help dramatically reduce the number of infections by allowing symptomatic or non-symptomatic people determine their virus status without having to access facility-based or drive-through testing. By definition, facility and drive-through testing expose others to interactions with potentially COVID-positive individuals. It also requires protective gear that must be used and then replaced for each patient. Finally, facility-based and drive-through testing strains clinical capacity by requiring nursing and physician staff in person.

An at-home test addresses all of those problems by confining the virus to within a person's house. Congress should make in-home testing an option. In establishing the program, Congress should:

1. Require HHS to work with the private sector to develop an in-home test as an alternative to facility, office or drive-through testing.

2. Provide patients guidance on collecting specimens and securely shipping to a testing facility via a reimbursed telehealth visit.

3. Require test result reporting electronically in real-time to patient, provider and public health authority, such as through a real-time digital app.

4. Cover and reimburse in Medicare a telehealth visit to discuss test results, including any additional requirement to seek in-person care.

5. Allow telehealth services to be provided to Medicare beneficiaries by phone without any requirement that the patient and provider have a pre-existing relationship, as in Medicare Advantage.

Artificial Intelligence (AI)

It has been widely reported that the country lacks ventilators and I.C.U. beds to treat patients should there be a significant surge of new cases. As with Italy, the health system could become overwhelmed. Informed organization and action will be essential to contain COVID-19 as well as continue to aggressively pursue all action to prevent the spread, and ultimately eradicate the virus and return to normalcy.
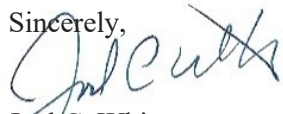
Congress should provide $50 million to HHS to contract with AI experts to predict the progression and spread of the coronavirus. The program should also provide for predictive modeling to inform capacity issues at health systems and in local communities for the following issues:

- Hospital staffing predictions (how many nurses)
- Predicting operational efficiency and resilience during a pandemic
- Hospital supply chain predictions
- Predicting responses by city, hospitals
- ICU transfers and triage
- Population risk segmentation
- Sepsis predictions

Information resulting from the program should be provided real-time to health systems and local community health departments to assist on the ground efforts to halt the spread of coronavirus and to better treat those with COVID-19. Data should also be used to produce reports to congress about actual and predicted capacity and resource use to help inform current and future hospital funding needs.

HIA supports the use of telehealth and AI to help stop the spread of the virus and to deploy resources to treat patients effectively. Congress and the administration have done much to advance digital health by addressing many reimbursement, coverage and licensure issues. We urge Congress to do more by including the measures outlined in this letter as additional weapons against the virus in the fiscal stimulus bill. Thank you for considering this approach, and feel free to call on me with any questions.

Sincerely,

Joel C. White
Executive Director