



AMERICAN ASSOCIATION FOR RESPIRATORY CARE
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March 24, 2020

Jerome M. Adams, M.D., M.P.H.
VADM, U.S. Public Health Service
U.S. Surgeon General
Department of Health and Human Services
Washington, D.C. 20201

Dear Surgeon General Adams:

I am writing as Chair of the Board of Medical Advisors (Board), the physician advisory arm of the American Association for Respiratory Care (AARC), to ask for your assistance in recognizing the valuable contributions respiratory therapists make every day on the front line as they dedicate themselves to saving lives and combating the deadly novel coronavirus outbreak, or COVID-19. The AARC is a national professional organization with membership of over 45,000 respiratory therapists and whose organizational activities impact over 150,000 practicing respiratory therapists across the country.

The individual members of the Board represent physicians and national societies who are experts in a wide range of respiratory specialties, including pulmonologists, asthma and allergy specialists, medical directors of respiratory care, anesthesiologists, sleep medicine and critical care physicians. As physicians we recognize the invaluable skills and knowledge that the respiratory therapist provides us as we treat our respiratory-compromised patients. As a practicing anesthesiologist, you are intimately aware of the skill set and expertise these specialized health care professionals bring to the health care system. Yet, we are painfully aware that in national press conferences conducted by the Administration and the Vice President's Task Force specifically, it is the physicians and nurses who are called out and recognized for their contributions.

It goes without saying that physicians and nurses are on the front line every day in caring for the nation's population. COVID-19 is a respiratory disease and, now more than ever, respiratory therapists who are in closest proximity to the patient managing the airways and supporting respiration with mechanical ventilation should be recognized as vital to combating this deadly virus.

The Time is Now for Respiratory Therapists to Get the Recognition they Deserve

Respiratory therapists are the essential health care providers when it comes to management of individuals who have been mechanically ventilated. I know I am preaching to the choir from

your experience in the ICU when I emphasize their critical role in monitoring and assessing the patient's respiratory needs and response to therapy. These are the highly trained experts, working together with physicians and nurses, who monitor settings to ensure the ventilator is operating properly and that the settings are adjusted as the patient's condition changes. It is my hope, and that of my physician colleagues, that these dedicated professionals who work long hours to treat those who have tested positive for COVID-19 along with their peers will get a "shout out" in the press briefings and subsequent news media so the general public is aware of their valuable contributions. I hope we can count on your support in making that happen.

The AARC also sent a letter to the Vice President, a copy of which you received, recommending his task force include the respiratory care profession in future discussions as the Administration continues its goal to bring this deadly pandemic under control. We hope you agree that their expertise and insight into the current system could be valuable to the task force moving forward.

Barriers Need to be Lifted to Include Respiratory Therapists as Telehealth Practitioners

We applaud the recent actions by the Administration to expand the use of telehealth during the national public health emergency to include an individual's home as a telehealth site. Allowing Americans to receive the care they need without exposing themselves to the virus unnecessarily and by ensuring hospital resources are reserved for those most in need is an appropriate response under the circumstances. Unfortunately, when the nation needs them most, respiratory therapists are not included among those professionals who can furnish telehealth services. By adding them to the roster of telehealth practitioners, respiratory therapists would be able to:

- Keep at-risk individuals out of hospitals by addressing the usual non-COVID-19 related respiratory conditions (e.g., flu, pulmonary infections, asthma attacks, COPD exacerbations, etc.).
- Expand their expertise and access, especially to individuals living in rural areas, by providing evaluation and assessment of the patient's respiratory needs without face-to-face visits.
- Avoid the need to put high at-risk patients with underlying respiratory conditions in the emergency department or hospital by teaching self-management techniques to lessen their exposure to COVID-19 positive patients.

Digital medicine services can benefit individuals at the greatest risk of contracting this disease, especially the 50+ million Medicare beneficiaries who because of their age or other underlying conditions are the most vulnerable. The safest way to combat this disease and provide such services is voice and video technology that enables a patient in their home to connect with clinicians. While those with the most severe symptoms are hospitalized, it has been reported that many individuals have mild symptoms and do not need to be hospitalized.

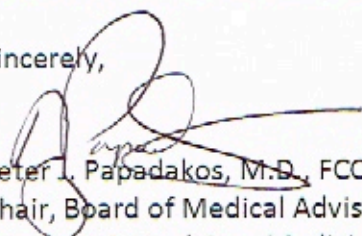
The "incident to" benefit under which respiratory therapists are eligible to work in the outpatient setting hamper the ability to provide the full range of services within their scope of

practice because the “direct supervision” requirement limits the physician’s ability to fully utilize their expertise for fear that there will be no reimbursement for their services. Lifting current restrictions for the duration of the pandemic would then allow respiratory therapists to furnish chronic disease management services that include self-management education and training, evaluation and demonstration of proper inhaler techniques and smoking cessation counseling under the physician’s general supervision via telehealth. This can save resources for those with COVID-19 as well as protect the many vulnerable Medicare beneficiaries from exposure and keep them out of hospitals and emergency departments.

The AARC has made these recommendations to Congressional leaders as they continue to develop stimulus packages, as well as to Secretary Azar, Administrator Verma and Vice President Pence. As a board of medical advisors and practicing physicians, we support these recommendations and look to your expertise and support as well.

We appreciate your advice and wisdom as the nation’s physician during this stressful time, and hope that you agree that respiratory therapists deserve support and recognition for their dedication and selfless contributions to the nation’s well-being.

Sincerely,



Peter L. Papadakos, M.D., FCCM, FCCP, FAARC
Chair, Board of Medical Advisors, AARC
Director, Critical Care Medicine
University of Rochester

cc:

Karen S. Schell, DHSc, RRT-NPS, RRT-SDS, RPFT, RPSGT, AE-C, CTTS
President, AARC