CALL TO ACTION: AMERICA NEEDS A FEDERAL COMMISSION TO DEVELOP A COMPREHENSIVE NATIONAL PLAN TO DEFEND THE LONG COVID “PASC” CRISIS

An estimated 10-30% of individuals infected with COVID-19 develop Post-Acute Sequelae of SARS-CoV-2 (‘PASC’ or “Long COVID”), regardless of whether these individuals exhibited COVID-19 symptoms. Due to the high infection rate in the United States, 3 to 10 million Americans are likely to experience the varied and often debilitating PASC symptoms, preventing them from fully returning to their communities and America from restoring economic stability. A comprehensive federal plan is needed to defeat this national crisis. The American Academy of Physical Medicine and Rehabilitation (“AAPM&R”) represents physicians who treat these patients daily and witness the lack of coordinated, multidisciplinary resources needed to treat the influx of individuals impacted by PASC.

A comprehensive national plan must include a commitment to three major priorities:

1. Resources to build necessary clinical infrastructure to address the needs of patients with PASC;
2. Equitable access to care for all patients affected by PASC; and
3. Continued funding for research that advances a fundamental understanding of PASC and rapid dissemination of best practices to mitigate its effects.

To develop this comprehensive plan, we recommend the immediate formation of a federal commission with a diversity of expertise to develop priority recommendations for addressing infrastructure needs and other gaps in access to timely and appropriate clinical care for all individuals with PASC.

Resources to Build Necessary Infrastructure and PASC Treatment Capacity: Currently, the rehabilitation system in the United States lacks the infrastructure and funding to meet this crisis. AAPM&R has convened 25 newly formed post-COVID clinics from across the country to create a Multidisciplinary Collaborative of experts to better understand the needs of treating PASC. The Collaborative aims to develop clinical guidance to improve quality of care and formal education resources to improve experience-of-care and health equity for patients with PASC and includes practitioners from multiple medical specialties and health care disciplines, federal representation, and patient organizations. The need for these clinics far outstrips the resources available. Local health systems need resources—perhaps as part of the recently enacted American Rescue Plan Act—for the necessary facilities, medical professionals, and supplies to support patients and provide expert care. Additionally, this care must be supported through appropriate reimbursement to ensure clinicians are able to provide care to PASC patients consistently. Appropriate ICD-10 codes must be developed for PASC in the immediate term and a formal provider designation for these PASC multidisciplinary clinics or another long-term payment strategy should be established under the Medicare program.

Equitable Access to Care for All Patients with PASC: All PASC patients need timely and local access to multidisciplinary care to ensure their broad and varied PASC symptoms are addressed. It is imperative that the commission’s plan address inequities in our health care system that result in diminished and limited access to sustainable quality PASC care due to race, ethnicity, neighborhood or geographic location, socioeconomic factors, and disability status. Additionally, patients who do not recover quickly need equitable access to strengthened safety-net care, including disability evaluation and benefits.

Continued Funding for Research that Advances Medical Understanding and Treatment of PASC: Results from ongoing and future PASC research are needed to support providers in real-time through rapid development and widespread dissemination of best practices for PASC care. Research must be inclusive of all populations, including people with disabilities and underlying health conditions.

AAPM&R urges the Biden Administration to launch a federal commission of diverse experts to develop a comprehensive federal crisis plan and prioritize actions to address the care needs of patients with Long COVID. AAPM&R stands ready to assist.

Contact: Reva Singh, AAPM&R Director of Advocacy and Government Affairs; 847.737.6030; rsingh@aapmr.org.