



WOMENHEART

THE NATIONAL COALITION FOR
WOMEN WITH HEART DISEASE

October 19, 2021

The Honorable Anna Eshoo
U.S. House of Representatives
2125 Rayburn House Office Building
Washington, DC 20515

The Honorable Brett Guthrie
U.S. House of Representatives
2322 Rayburn House Office Building
Washington, DC 20515

Dear Chairwoman Eshoo and Ranking Member Guthrie,

I am writing on behalf of WomenHeart: The National Coalition for Women with Heart Disease to express our support for the Increasing Access to Quality Cardiac Rehabilitation Act of 2021 (H.R. 1956). This bipartisan, bicameral legislation would expand patient access to critical cardiovascular and pulmonary rehabilitation services (CR/PR).

While cardiac rehabilitation is an incredibly effective treatment, it is under-utilized. Women, especially, are less likely to be referred, to enroll once referred, and to complete a full course of cardiac rehab, compared to men. Research found that women were 12% less likely to be referred than men, and Blacks, Hispanics, and Asian patients were 20%, 36%, and 50% less likely to be referred than white patients. Aside from lack of referral, women experience other barriers to attending regular cardiac rehab sessions, including financial constraints; lack of program availability, transportation, and access; higher levels of psychological stress and depression, which have been shown to decrease participation; and lack of awareness among women about their coronary heart disease risk.

The Increasing Access to Quality Cardiac Rehabilitation Act starts to remove some of the barriers by expanding access to care. It would authorize physician assistants, nurse practitioners, and clinical nurse specialists (advanced practice providers or APPs) to order and supervise CR/PR starting in 2022. Current Medicare law prevents APPs from supervising and ordering CR/PR services, even though qualified APPs are often authorized to perform these services under state law, often serve as primary care providers for patients, and are routinely on the front line in critical care environments, such as hospitals and hospital clinics, emergency rooms, and intensive care units. The restriction under current law results in fewer Medicare beneficiaries being able to access these valuable and outcome improving services, especially in underserved and rural areas, which will be exacerbated by the increase in COVID-19 patients who may need these services.

We urge you to support this legislation.

Sincerely,

Celina Gorre, CEO
WomenHeart

Cc: The Honorable Lisa Blunt Rochester