

Statement for the Record from the American Occupational Therapy Association, American Speech-Language-Hearing Association, and National Association of Rehabilitation Providers and Agencies for the Energy and Commerce Committee’s Subcommittee on Health Hearing on “The Long Haul: Forging a Path Through the Lingering Effects of COVID-19” May 11, 2021

Chairman Pallone, Ranking Member McMorris Rodgers, and members of the subcommittee:

Thank you for hosting this important hearing on addressing the needs of patients with long-term symptoms of Coronavirus Disease 2019 (COVID-19). We would like to highlight how audiologists, occupational therapy practitioners, speech language pathologists and physical therapists can improve the quality and outcomes of care for “Post-Acute Sequelae of SARS-CoV-2 infection,” or PASC.¹ Individuals with PASC experience a range of symptoms and medical complications for weeks and even months after recovering from the acute phase of illness, sometimes even after testing COVID-negative. These ongoing symptoms can complicate return to normal routines and the workforce.

Members of the American Occupational Therapy Association (AOTA), the American Speech-Language-Hearing Association (ASHA), and the National Association of Rehabilitation Providers and Agencies (NARA) provide multidisciplinary, person-centered, skilled services across the continuum of care in numerous settings, including—but not limited to—physician offices, telehealth visits, outpatient clinics, home health, assisted living and independent living facilities, memory care facilities, skilled nursing facilities, inpatient rehabilitation facilities, schools, hospitals, behavioral health centers, community health centers, and correctional facilities.

AOTA, ASHA, and NARA members are rehabilitation professionals uniquely positioned to provide critical services to PASC patients. The deficits that individuals experience include headache, fatigue, brain fog, cardiopulmonary issues, pain, anxiety, depression, dizziness, balance problems, swallowing impairments, and muscle weakness, all of which impact day-to-day function.² Rehabilitation professionals have expertise in assessing the entire individual to recognize strengths, identify deficits and develop a treatment plan to assist patients in meeting their treatment goals.

Individuals with PASC, often self-described as “long-haulers” or “long-COVID,” do not need to suffer indefinitely. Services provided by audiologists, occupational therapy professionals, physical therapy professionals, and speech-language pathologists can mitigate the impact of the lasting effects of the virus and help patients regain functional abilities faster. These clinicians are critical members of the interprofessional care team and should be included in physician orders and as part of care plans while the patient transitions between levels of care from the hospital to post-acute care to outpatient services. Patients suffering from PASC should know audiologists and therapy professionals stand ready to assist them in addressing their various symptoms, no matter how severe.

- Referral to audiology, occupational therapy, physical therapy, and speech-language pathology can help PASC patients avoid misdiagnosis, gain a timelier diagnosis,

prevent opioid dependency, and ensure a return to meaningful occupations and maximum level of function.

- Therapy and audiology professionals are uniquely suited to assist patients in developing compensatory strategies to manage any long-term symptoms and engage in productive daily life tasks and roles.
- Interdisciplinary teams composed of occupational therapy practitioners, speech language pathologists, physical therapists and audiology professionals have the skill set necessary to assess both the physical and psychosocial components of PASC.

Our coalition of providers appreciate that the National Institutes of Health recognized the crucial role of rehabilitation services last September when it released a Notice of Special Interest (NOSI) to encourage research applications in areas related to COVID-19 and associated rehabilitation and mitigation efforts. The NOSI expresses specific interest in research to address the rehabilitation needs of COVID-19 survivors, understand the impact of disrupted rehabilitation services, and assess the impact of the pandemic on people with physical disabilities.

OTA, ASHA, and NARA are committed to providing multidisciplinary care and improving outcomes for those experiencing PASC. Our associations provide extensive resources to our members to enhance professional competencies for identifying and using evidence-based practices in treating PASC.³ We look forward to the results of this hearing and working collaboratively with the Committee to identify policy solutions and help PASC individuals return to normal routines with work and their personal lives.



Wendy C. Hildenbrand, PhD, MPH, OTR/L, FAOTA
President, American Occupational Therapy Association



Kelly Cooney, CCC-SLP, CHC
President, National Association of Rehabilitation Providers and Agencies



A. Lynn Williams, PhD, CCC-SLP
President, American Speech-Language-Hearing Association

¹ USA Today. (2021) *Fauci Announces Nationwide Initiative*.
<https://www.usatoday.com/story/news/health/2021/02/24/covid-19-long-haulers-fauci-announces-launch-nationwide-initiative/4572768001/>.

² MEDrxiv. (2020) *Characterizing Long COVID in an International Cohort: 7 Months of Symptoms and Their Impact*.
<https://www.medrxiv.org/content/10.1101/2020.12.24.20248802v2>.

³ American Speech-Language-Hearing Association. (n.d.). *Research Articles Related to Speech-Language Pathology Services in Health Care During COVID-19*. <https://www.asha.org/slp/healthcare/research-articles-related-to-slp-services-in-health-care-during-covid-19/>.