

## The Future of Telehealth: Congress Must Extend the Current Flexibilities to Ensure Access to Care

Telehealth is a vital tool that expands access to quality health care, particularly to patients in rural and underserved areas, individuals with disabilities, and elderly patients who have difficulty traveling. It can reduce the time it takes to obtain medical expertise and allows for remote monitoring of chronically ill patients. The flexibilities provided by Congress and the administration at the onset of the COVID-19 pandemic have enabled teaching hospitals, faculty physicians, and other health care providers to rapidly implement telehealth to provide continued access to medical care for their patients.

In March and April 2020, faculty physician practices at academic medical centers on average were providing approximately 50% of their ambulatory visits via telehealth – a dramatic increase from the use of telehealth prior to the pandemic. While many patients have returned to in-person health care, some also continue to rely on telehealth to access important health care services.

In order to enable teaching hospitals and faculty physicians, as well as other health care providers, to continue providing high-quality virtual care to their patients, we urge Congress and the Biden administration to maintain many of the current telehealth flexibilities beyond the end of the public health emergency and to ensure that providers are adequately reimbursed for providing telehealth services. Specifically, Congress and the administration should:

- Remove patient location and rural site requirements to allow patients to access telehealth visits in any location. By eliminating the geographic and originating site restrictions, patients will be able to receive telehealth services in any location, including their home. This would allow patients who find travel to an in-person appointment challenging to receive important care, especially those patients with chronic conditions or disabilities who need regular monitoring.
- Allow payment for audio-only services. Audio-only calls improve access to virtual care for patients who do not have access to the devices or broadband connection that are necessary for audiovisual calls. Patients in rural areas or those with lower socioeconomic status are more likely to have limited broadband access and may not have access to the technology needed for two-way video communication. According to the Pew Research Center, about one-third of adults with household incomes below \$30,000 do not own a smartphone and about 44% do not have home broadband services.¹ Without coverage and payment for

<sup>&</sup>lt;sup>1</sup> Pew Research Center, Digital divide persists even as lower-income Americans makes gains in tech adoption. May 7, 2019. <a href="https://www.pewresearch.org/fact-tank/2019/05/07/digital-divide-persists-even-as-lower-income-americans-make-gains-in-tech-adoption/">https://www.pewresearch.org/fact-tank/2019/05/07/digital-divide-persists-even-as-lower-income-americans-make-gains-in-tech-adoption/</a>



- audio-only services, there will be inequities in access to health care services for these populations.
- Takes Steps to Improve Access to Broadband Technology. In many parts of the country, providers and their patients have limited access to broadband connectivity, which has been a major barrier to use of telehealth. This is particularly true for rural areas and underserved communities. The Federal Communications Commission has reported that 30% of rural residents lack broadband services.<sup>2</sup> Also, racial and ethnic minorities, older adults, and those with lower levels of socioeconomic status are less likely to have broadband access. In order to expand access to telehealth and other important online services, Congress must take steps to increase funding for broadband access and infrastructure development.
- Remove in-person requirements for telemental health visits. The
  Consolidated Appropriations Act of 2021 expanded access to telehealth services
  in Medicare to allow patients to receive mental health services via telehealth in
  any location, including from the beneficiary's home. However, it includes a
  provision that requires the patient to be seen in person at least once every six
  months, which creates barriers to care for those seeking mental and behavioral
  health services, particularly for patients in rural and underserved areas.
- Allow patients to access telehealth services across state lines as appropriate. Reimbursing providers for telehealth services that are provided across state lines improves patient access to services and helps improve continuity of care for patients who have relocated or traveled to receive their surgery or other services from a specialist in another state.
- Reimburse providers the same amount for telehealth services as in-person visits. To ensure adequate access to virtual care, providers should be paid the same amount for telehealth services as services delivered in-person. Teaching hospitals and faculty physician practice plans have invested significant infrastructure costs to fully implement their telehealth programs. Physicians and hospitals also have ongoing costs as they employ medical assistants, nurses, and other staff to engage patients, coordinate care, and provide technical support during telehealth visits. Providers must have access to technology and a platform that allows health care professionals to participate in the visit as necessary. Without appropriate reimbursement, providers may no longer be able to continue to provide telehealth services to their patients.

For questions or more information, please contact Jason Kleinman, AAMC Office of Government Relations, at <a href="mailto:ikleinman@aamc.org">ikleinman@aamc.org</a> or 202-903-0806.

-

<sup>&</sup>lt;sup>2</sup> Federal Communications Commission, 2018 Broadband Deployment Report, February 2, 2018. https://www.fcc.gov/reports-research/reports/broadband-progress-reports/2018-broadband-deployment-report