

OLICY | The Issue: Making Telehealth Permanent

Why advocate for the continuation of telehealth?



Patient Experience Policy Forum (PXPF) advocates for and helps shape national and local laws on issues like telehealth that directly affect patients, families and care partners.

Why advocate for continuing telehealth?

During COVID, telehealth, including live audio and video services, gave more people access to high-quality patient health care. Telecare has many benefits that are needed to continue to provide safe and effective health care to as many people as possible. Here is why we are fighting to make telehealth permanent:

Telehealth makes it easier for more people to get quality health care services

- > People who live in remote or rural locations do not have to travel or ask someone to drive them to appointments
- > Fewer people need to take off from work
- > It eliminates the need for child or elder care
- > Patients, families and care partners can more easily be involved.

Telehealth gives more patients access to quality healthcare and ongoing care management when clinically appropriate

- > Underserved patients, including people of all races, ethnicities, income levels and locations, will have more access to quality healthcare.
- > Patients who live in rural areas will have more access to care from providers who may live in another state or far away and providers can offer telehealth services in geographic areas with few or no primary and specialty providers (U.S Government Office of Health Policy).
- > Patients can use telehealth from home for all healthcare services instead of being required to use telehealth at local care centers—92% of Medicare patients were able to use telehealth from home under the COVID-19 emergency laws (U.S Government Office of Health Policy).
- > More patients can use telehealth as an alternative to emergency rooms and urgent care centers (Telehealth Impact: Patient Survey Analysis).

The laws that gave everyone access to telehealth services and all of these important benefits may end soon—unless Congress passes new laws that make telehealth services permanent for all people through important policy changes.

PXPF's Telehealth Policy Priorities

At PXPF, we have identified priority areas for policy change to ensure equitable and easy access to a broad scope of telehealth services for patients and care partners, as well as adequate, permanent payment by all payors. We support ongoing legislative efforts that reflect our priorities, but we need your voice to ensure proposed legislation is passed and change is enacted.

Proposed Federal Legislation

CONNECT for Health Act (S.1512/H.R.2903)

The Issue: If the emergency COVID telehealth laws disappear, Medicare is will not cover telehealth services (two-way audio-visual services) unless they are provided at an approved rural site. This means that all patients (rural and non-rural) must receive services at clinical site (doctor's office, healthcare clinic or hospital).

What this bill does:

- > Allows Medicare patients to use telehealth services from anywhere (including rural areas).
- > Allows patients to receive telehealth care in their homes and at more kinds of federally qualified health care centers including rural health clinics and clinics/offices where their telehealth doctor is located.
- > Allows the CMS (Center for Medicare and Medicaid Services) to generally waive coverage restrictions during any public health emergency.
- > Provides the Secretary of Health and Human Services (HSS) the authority to waive telehealth location restrictions.
- > Requires a study to learn more about the effects of telehealth and how telehealth has been used during the pandemic.

Telehealth Modernization Act (S.368/H.R.1332)

The Issue: Access to telehealth will not be available to all people after the COVID-19 Public Health Emergency ends.

What this bill does:

- > Permanently removes both the originating site (place where patients must go to receive care) and geographic restrictions for care.
- > Allow for the patient's home to serve as an approved site for all healthcare services.
- > Designates rural health clinics and federally qualified health centers as distant sites where patients may receive care.
- > Gives the Secretary of Health and Human Services (HSS) the authority to permanently allow Medicare to cover more telehealth services.
- > Allows all types of medical providers like doctors, physician assistants, nurses and others to provide telehealth services as defined by the CMS (Center for Medicare and Medicaid Services).

TREAT Act (S.168/H.R.708)

The Issue: During the pandemic, Public Health Emergency laws have allowed patients to receive out-of-state telehealth services. If the TREAT Act is not passed, patients will not be able to receive telehealth services from health care providers across state lines. In addition, Medicare will require providers to be licensed in the state where the patient is located.

What this bill does:

- > Enables health care providers to practice across state lines for six months after the Public Health Emergency ends.
- > Allows more healthcare providers to offer telehealth services to patients who live in a geographic area that has few or no primary or specialty providers.
- > Increases access to care and expertise from providers that may live in another state or far from patients' homes.

The Patient Experience Policy Forum (PXPF), supported by The Beryl Institute, is a broad-based and diverse coalition of patients, family members, caregivers, and health care professionals uniquely led by a balanced board of patient/family partners and senior patient experience leaders. Our purpose and commitment are to advocate for, and help shape, policy at the national and local levels on issues that directly affect patient, family and care partner experience and elevate the human experience in health care. We do so through convening policy forums, educating policy makers, sponsoring advocacy events, providing communication updates, and publishing calls to action.