

# **Telehealth Update**

February 25, 2021

The COVID-19 relief package making its way through Congress does not contain significant telehealth provisions, although there is some grant money included for rural health care development projects that could be used for telehealth. Click <u>here</u> for the amended language included in the House bill that will be voted on Friday.

In December 2020, Congress appropriated an additional \$249.95 million for a second round of funding for the COVID-19 Telehealth Program under the Consolidated Appropriations Act, 2021. The FCC is preparing for the next round of funding. Click <u>here</u> for the report and order.

#### **Congressional Hearing on Telehealth**

With the COVID-19 package nearing completion, the House is beginning to turn to other business. The House Energy and Commerce Health Subcommittee has scheduled a hearing on the future of telehealth for Tuesday, March 2 at 10:30 AM ET. To watch the hearing and read the witness statements, click <u>here</u>. This is likely to be the first of several hearings as Congress begins to look beyond COVID-19.

#### **HHS Secretary-Nominee Becerra Comments on Telehealth**

At his confirmation hearing before the Senate Finance Committee, HHS Secretary-Nominee Xavier Becerra expressed support for continuing telehealth post-pandemic, while recognizing that some parts of the country do not have the necessary broadband. "We can't go back to the old days," Becerra said. "We've learned so much from COVID and how indispensable telehealth has been, especially to our rural communities, but also to some of our inner-city communities. And here, it's become very obvious [if] you don't have broadband accessibility, you're in real trouble." Whether it's in rural or urban areas, Becerra said he's looking forward to working with Congress to make telehealth accessible to everyone. Click here to read his written statement and to watch the hearing. The devil is in the details, but this is a promising start.

# Legislative Update

Bills are being introduced - identical to bills introduced in the last session. A few notable bills are summarized below.

## Telehealth Modernization Act:

Senators Tim Scott (R-SC) and Brian Schatz (D-HI) re-introduced S. 368, the Telehealth Modernization Act. Click <u>here</u> for the press release; the bill would:

- Permanently eliminate Medicare's geographic and originating site restrictions;
- Allow the HHS Secretary to expand the types of practitioners eligible to provide Medicare-covered telehealth services;
- Allow the HHS Secretary to retain, as appropriate, the expanded list of telehealth services covered during the PHE, along with the sub-regulatory process for modifying the list;
- Permanently allow FQHCs and RHCs to serve as eligible distant sites for telehealth services; and
- Permanently allow for the use of telehealth, as clinically appropriate, to conduct face-to-face clinical assessments for home dialysis and face-to-face encounters for hospice care.

## The TREAT Act:

Senators Chris Murphy (D-CO) and Roy Blunt (R-MO) re-introduced S. 168, the Telehealth Reciprocity to Ensure Access to Treatment ACT (TREAT). Representatives Debbie Dingell (D-MI) and Bob Latta (R-OH) introduced the House companion, H.R. 708. Click <u>here</u> for the Senate bill; the House companion is not yet available. The bills would:

- Enable providers licensed in good standing to treat patients in any state during the PHE;
- Require providers to obtain oral or written acknowledgment of services;
- Require providers to notify a state or local licensing board within 30 days of first practicing in another state;
- Prevent providers from offering any service that is otherwise prohibited by a state where a patient is located; require adherence to specified prescribing requirements of the state;
- Allow states to pursue investigations and disciplinary actions, including the ability to exclude a clinician from practicing in the state;
- Not pertain to providers licensed under a compact agreement or licensed in the state where the patient resides; and
- Remain in effect through the PHE, followed by a 180-day phase-out period.

### Protecting Access to Post-COVID 19 Telehealth Act

H.R. 366, Protecting Access to Post-COVID-19 Telehealth Act, was re-introduced by Rep. Mike Thompson (D-CA). The bill would make permanent many of the temporary flexibilities allowed during the PHE. Click <u>here</u> for the bill.

#### **Reimbursement Update**

ICYMI – MACs are reprocessing FQHCs and RHC claims with HCPCS Code G2025 (payment for a telehealth distant site service furnished by a RHC or FQHC only). This updates the national rate to \$99.45 for services on or after January 1. Click <u>here</u> for the MLM.

For additional information, please contact our General Counsel Diane Turpin at 202-578-5444 or <u>diane.turpin@shcare.net</u>.