

TELEHEALTH ACT

SPONSORED BY CONGRESSWOMAN ANN WAGNER

In August 2020, Congresswoman Ann Wagner, Chair of the Suburban Caucus, introduced the *Telehealth Act*. This package includes nine telehealth bills introduced by Republican lawmakers that will expand access to and affordability of telehealth services. The Suburban Caucus strongly supports increased telehealth options for all Americans both during and beyond the current public health emergency.

The Suburban Caucus telehealth package includes the following pieces of legislation:

H.R. 7338, Advancing Telehealth Beyond COVID-19 Act (Rep. Cheney)

This legislation would allow the Secretary of the Department of Health and Human Services to waive the originating site (the location of the beneficiary at the time the service is furnished) and geographical limitations beyond the public health emergency period that was specified in the CARES Act. Before this waiver went into effect, Medicare beneficiaries who wanted to utilize telehealth services could only do so at a designated “originating site” and only in the event of a physician shortage. The bill would also make permanent the telehealth coverage at Federally Qualified Health Centers (FQHC) and Rural Health Clinics (RHC). This will give rural providers the ability to serve patients remotely while being properly compensated for their work. Finally, the bill removes restrictions that limit health care providers’ ability to provide access to smart devices and innovative digital technology to their patients. Allowing Medicare providers to remotely monitor and track their patient’s health will improve quality of life while reducing costly trips to the emergency room.

H.R. 5473, EASE Behavioral Health Services Act (Rep. Bilirakis)

This legislation would expand access to telehealth services for individuals suffering from behavioral and mental health issues. By providing an exception from Medicare’s geographic restrictions to telehealth services, this bill would allow for initial patient evaluations, follow-up medical management, and other behavioral health services to be administered via telehealth. Additionally, this legislation requires the Secretary of the Department of Health and Human Services to issue guidance for federal reimbursement for telehealth treatment of substance abuse disorders under Medicaid.

S. 4039, Telemedicine Everywhere Lifting Everyone’s Healthcare Experience and Long Term Health (TELEHEALTH) HSA Act (Sen. Loeffler)

This bill would permanently extend a provision of the CARES Act that temporarily allows health savings account eligible high-deductible health plans to offer first-dollar coverage of telehealth services.

H.R. 3228, VA Mission Telehealth Clarification Act (Rep. Carter)

This bill would provide a technical fix to the VA Mission Act in order to allow trainees satisfying health professional training program requirements to use telehealth systems while supervised by an appropriately credentialed VA staff member.

H.R. 4900, Telehealth Across States Lines Act (Rep. Roe)

This legislation would establish a uniform standard of nationwide best practices for the provision of telehealth across state lines. This standard will be crafted in consultation with a myriad of stakeholders, including consumers, primary care providers, specialists, surgeons, emergency medicine providers, technology experts, and federal agencies. Additionally, this bill incentivizes the expansion of telehealth services with the creation of a new payment system for the adoption of telehealth services and a five-year grant program aimed at expanding access for rural communities.

S. 4103, TREATS Act (Sen. Portman)

The *Telehealth Response for E-prescribing Addiction Therapy Services (TREATS) Act* would support the expansion of telehealth services for substance use disorder treatment. The bill would build upon the Trump Administration's action to waive regulatory restrictions for accessing care in the wake of the COVID-19 pandemic. While the temporary waivers provide a necessary reprieve for patients so that they may continue their treatments and counseling virtually, they are time limited and will ultimately expire at the conclusion of the Public Health Emergency. The *TREATS Act* would extend these telehealth flexibilities by making permanent key waivers, including the ability to prescribe Medication Assisted Therapies (MAT) and other necessary drugs without needing a prior in-person visit and the ability to bill Medicare for audio-only telehealth services to address broadband connectivity issues. By taking these steps, the *TREATS Act* will increase overall access to MAT and support telehealth needs in rural communities where broadband may be needed.

H.R. 7233, KEEP Telehealth Options Act (Rep. Balderson)

This bill would require studies by HHS and GAO so that Congress can get a comprehensive analysis of the current, temporary telehealth expansion programs under the public health emergency with the goal of moving toward permanent telehealth options for American patients and providers.

S. 3988, Enhancing Preparedness Through Telehealth Act (Sen. Cassidy)

This bill would direct the Department of Health and Human Services (HHS) to inventory telehealth programs across the country to learn how telehealth can be used more effectively in future health emergencies. The report would be performed every five years.

H.R. 7187, HEALTH Act (Rep. Glenn Thompson)

This legislation would make Medicare payments permanent for any telehealth services furnished by federally qualified health centers and rural health centers.