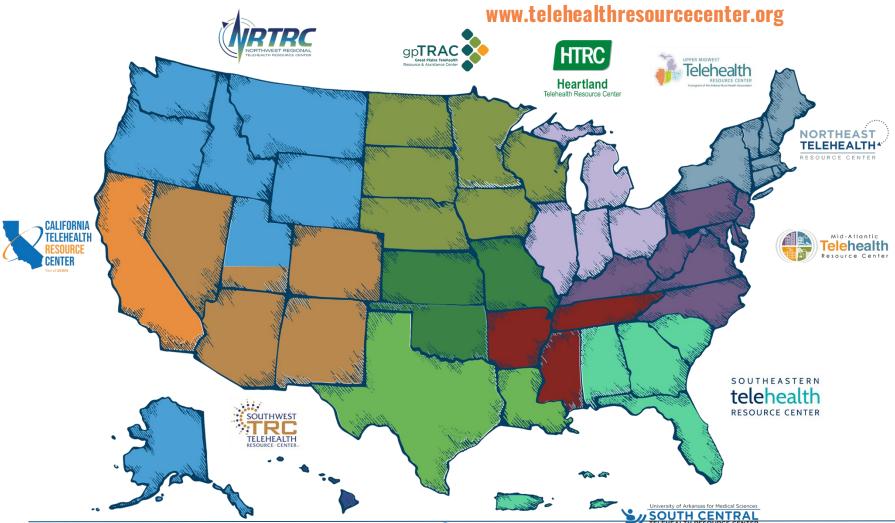


Federal Telehealth Policy in 2025

January 9, 2025



HRSA Funded Telehealth Resource Centers















Webinar Tips and Notes

- Your phone &/or computer microphone has been muted.
- If we do not reach your question, please contact your regional TRC.
 There may be delays in response time:
 https://telehealthresourcecenter.org/contact-us/
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FEDERAL TELEHEALTH POLICY UPDATE

January 9, 2025



Amy Durbin, *Policy Advisor, CCHP*



is a non-profit, non-partisan organization that seeks to advance state and national telehealth policy to promote improvements in health systems and greater health equity.

DISCLAIMERS

- Any information provided in today's talk is not to be regarded as legal advice. Today's talk is purely for informational purposes.
- Always consult with legal counsel.
- CCHP has no relevant financial interest, arrangement, or affiliation with any organizations related to commercial products or services discussed in this program.



ABOUT CCHP

- Established in 2009 as a program under the Public Health Institute
- Became federally designated national telehealth policy resource center in 2012 through a grant from HRSA
- Work with a variety of funders and partners on the state and federal levels
- Administrator National Consortium of Telehealth Resource Centers
- Convener for California Telehealth Policy Coalition







NATIONAL CONSORTIUM OF TRCS

TelehealthResourceCenter.org











TODAY'S AGENDA

- Overview sources that shape telehealth policy
- Current status of federal Medicare telehealth policy
- Frequently Asked Questions
 - What if the waivers are not extended
 - PFS vs. Continuing Resolution Action
- Other policies beyond Medicare
 - Telehealth & Prescribing of Controlled Substances
 - What's going on in the states



SOURCES OF TELEHEALTH POLICY



LEGISLATION/LAWS



REGULATIONS



AGENCY GUIDELINES





FEDERAL: CMS & Medicare

(Reimbursement & Coverage)



MEDICARE TELEHEALTH POLICY EVOLUTION

Pre-Covid
Fairly Limited

During Pandemic
Series of Waivers

Post-Pandemic

Majority of waivers extended & were extended again for 3 months after CR passed in Dec. 2024



MEDICARE TELEHEALTH POLICY

WAIVER DURING COVID-19	REMAINS UNTIL MARCH 31, 2025
Waiver of geographic requirement	
All eligible providers in Medicare & FQHCs/RHCs to be eligible providers	
Site limitation waived (allowing places such as the home)	
Allow some services to be provided via audio-only*	
Delay of prior in-person visit before telemental health services provided w/o meeting geographic req & in the home	



MEDICARE TELEHEALTH POLICY

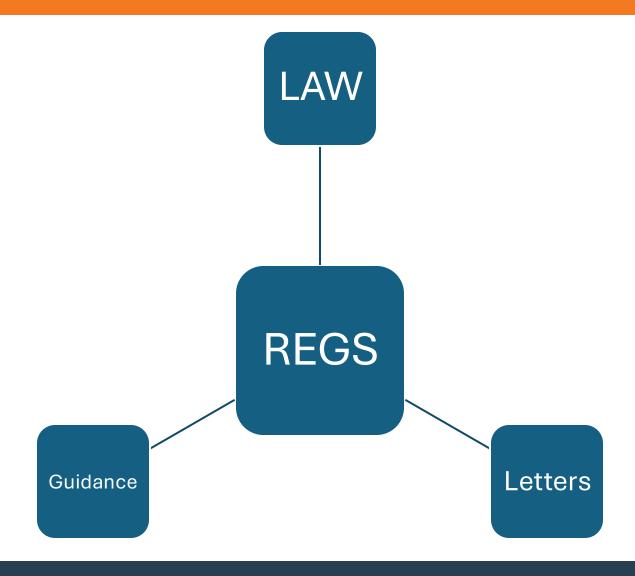
WAIVER DURING COVID-19	REMAINS UNTIL THE END OF 2025
Allowing provider to use business address rather than putting home address*	
Waiving frequency limit on telehealth visits in certain settings*	
Allowing for direct supervision to be done via telehealth*	Some remain intact such as supervision of residents when the service is furnished virtually.
Expanded list of eligible services to be provided via telehealth	Varies, but mostly remains intact



FREQUENTLY ASKED QUESTIONS



LEGISLATIVE VS. ADMINISTRATIVE ACTIONS



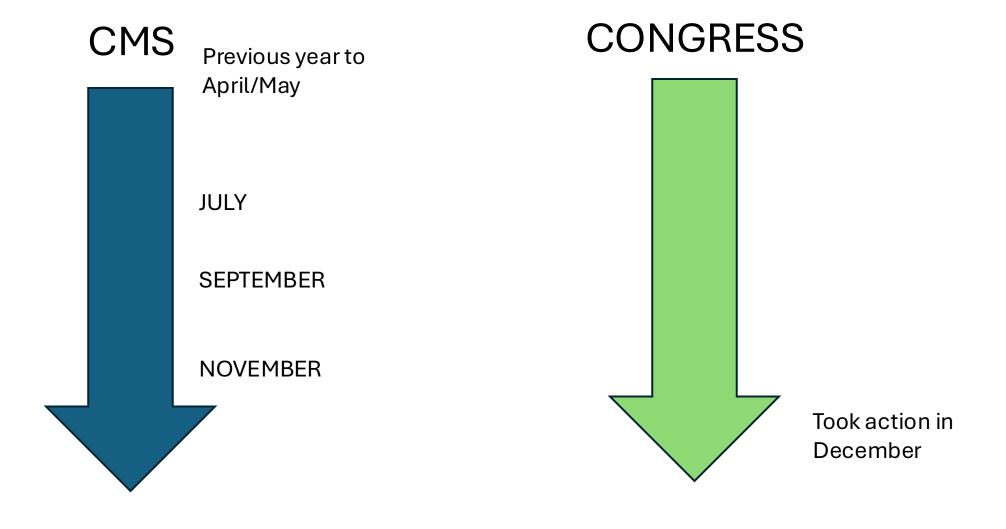


LEGISLATIVE VS. ADMINISTRATIVE ACTIONS





LEGISLATIVE VS. ADMINISTRATIVE ACTIONS





CURRENT MEDICARE TELEHEALTH POLICY



FQHCs & RHCs can be telehealth providers to Medicare enrollees to March 31, 2025

FQHCs & RHCs can use telehealth to provide services to Medicare enrollees to Dec 31, 2025





AUDIO-ONLY

What audio-only is covered now?

PFS 2025

Deletion of audio-only codes 99441-99443. Available are some audio-only codes for mental & behavioral health. Definition change to telecommunication system to include audio-only if the patient cannot or does not want Live Video, telehealth provider can do live video & the patient is in the home.

https://www.cms.gov/medicare/coverage/telehealth/list-services

HR 10545

the Secretary shall continue to provide coverage and payment under this part for telehealth services identified in paragraph (4)(F)(i) as of March 15, 2022, that are furnished via an audio-only communications system during the period beginning on the first day after the end of such emergency period and ending on March 31, 2025. For purposes of the previous sentence, the term "telehealth service" means a telehealth service identified as of March 15, 2022, by a HCPCS code (and any succeeding codes) for which the Secretary has not applied the requirements of paragraph (1) and the first sentence of section 410.78(a)(3) of title 42, Code of Federal Regulations, during such emergency period.



MEDICARE TELEHEALTH POLICY W/NO EXTENSION

POLICY	EXCEPTIONS TO THIS POLICY
Originating site must be in a specifically defined rural area/HPSA or non-MSA	Does not apply to stroke, ESRD and some mental health services if certain conditions met
Limited list of eligible facilities for originating site	Limited exceptions for the home for certain mental health services (if certain conditions met), SUD, ESRD
Limited list of eligible providers, will exclude FQHCs, RHCs, PTs, OTs, SLP	NOTE: Exception discussed on next slide
Audio-only references will be gone from statute	NOTE: Exception discussed on next slide
For mental health services taking place in the home & not meeting geographic requirement or falling into one of the previously identified exceptions, prior in-person visit	NOTE: Exception discussed on next slide



MEDICARE TELEHEALTH POLICY W/NO EXTENSION

POLICY	EXCEPTIONS TO THIS POLICY (Created by CMS)
Limited list of eligible providers, will exclude FQHCs, RHCs, PTs, OTs, SLP	2025 PFS CMS allowed FQHC and RHC to continue to provide services via telehealth through 2025
Audio-only references will be gone from statute	CMS had redefined telecommunication system to include services provided via audio-only in the home if the patient requested audio-only or couldn't use live video. Still limited, reference back to what services are eligible in the home.
For mental health services taking place in the home & not meeting geographic requirement or falling into one of the previously identified exceptions, prior in-person visit and every 12 months thereafter	CMS allows for exceptions to the subsequent in- person visits every 12 months if the provider and patient determine it would be detrimental to delay services if they can't meet the in-person visit within 12 month timeframe



AUDIO-ONLY

But in the PFS it says an interactive telecommunication system:

May also include two-way, real-time audio-only communication technology for any telehealth service furnished to a <u>beneficiary in their</u> <u>home</u> if the distant site physician or practitioner is technically capable of using an interactive telecommunications system as defined as multimedia communications equipment that includes, at a minimum, audio and video equipment permitting two-way, real-time interactive communication, but the patient is not capable of, or does not consent to, the use of video technology.



FEDERAL: Prescribing & Controlled Substances



CONTROLLED SUBSTANCE PRESCRIBING VIA TELEHEALTH

Limited
Exceptions in
Evan Haight Act

(2008), which requires inperson visit prior to online prescribing

One exception is when PHE declared, COVID activated exception Early 2023, DEA Issues Proposed

Receives massive feedback and decides to delay final rule Temporary extension issued to 11/2023

Late 2023, DEA extended the

through to the end of 2024

Mid-2024 DEA
Attempts Another
Proposed PostPHE Rule –
Receives
Pushback

Nov 2024, DEA extends the waiver one additional yaer to the end of 2025

DEA Third Extension on Telehealth Prescribing Waiver (2024)



STATE TELEHEALTH POLICY



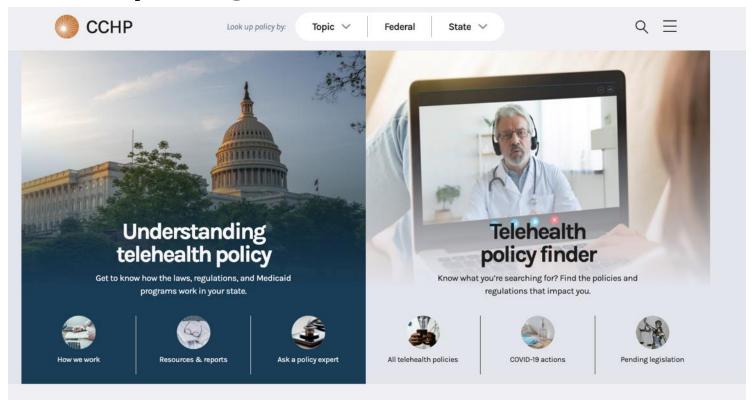
IMPACT OF FEDERAL LEGISLATION ON STATES

- Status of federal telehealth Medicare waivers does not have an immediate direct impact on states' telehealth policy
- Majority of States have finalized their post-pandemic telehealth policies
 - A few states had been aligning their dates with the federal waivers, though not necessarily their policy content, but no longer appears to be the case
 - States can still mirror federal telehealth policy, though not necessarily the permanent policies
 - Example Adoption of Communications Technology Based Services (CTBS) codes for their Medicaid programs



CCHP

CCHP Website – cchpca.org



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THE NATIONAL
TELEHEALTH POLICY
RESOURCE CENTER

Thank You!

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APPENDIX



CCHP

Telehealth Policy Finder Tool

- Includes all state and federal telehealth specific laws, regulations, policies, and active legislation – rolling updates every 3 months
- Can Search by State, Federal, or by Category/Topic
 - Medicare; Medicaid Live Video, Store & Forward, RPM;
 Private Payer Laws; Professional Regulation, Licensing,
 Prescribing & More

Policy Trend Maps

 Highlights telehealth trends across the states in Medicaid reimbursement by modality, private payer laws and payment



RESOURCES

- CCHP Newsletter What Might Happen Next?
- CCHP Fact Sheet Final PFS 2025
- CCHP Fall 2024 Edition of State Policy Summary Report



Our Next Webinar

The NCTRC Webinar Series

Occurs 3rd Thursday of every month.

Hosting TRC: Mid-Atlantic Telehealth Resource Center (MATRC)

Telehealth Topic: Breaking Down Barriers to Telehealth: How the Digital Health

Readiness Screener Can Drive Equity and Access

Date: January 16, 2025

Times: 11 AM – 12 PM (PT)



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