

Congress of the United States

Washington, DC 20515

September 6, 2022

The Honorable Chiquita Brooks-LaSure
Administrator Centers for Medicare & Medicaid Services
U.S. Department of Health and Human Services
200 Independence Avenue SW
Washington, DC 20201

Dear Administrator Brooks-LaSure:

We write to thank you for recognizing the importance of coverage for audio-only telecommunication services for the initiation of buprenorphine in opioid treatment programs as part of the Calendar Year (CY) 2023 Medicare Physician Fee Schedule (PFS). This coverage will increase access to life-saving medications for patients all over the country—particularly in rural areas. However, we are requesting clarity from the Centers for Medicare & Medicaid Services' (CMS) on the Proposed Rule released on July 7, 2022 as it relates to audio-only telehealth services. As CMS seeks comments on the PFS Proposed Rule, we urge you to consider the important role that audio-only telecommunication systems play in delivering care to beneficiaries. Audio-only technology enables broader access to care, providing a new tool for providers particularly in rural and underserved areas.

The adoption of audio-only telehealth during the COVID-19 pandemic has given providers alternative options to communicate with patients, alleviating workforce burdens by shifting care interactions to telecommunication when in-person visits were not required for quality of care. The subsequent coverage decisions from CMS and corresponding Administration actionsⁱ have encouraged providers to adapt to meet the needs of patients, whether that be in-person or utilizing video or audio visits, and many providers support the continuation of audio-only telehealth.ⁱⁱ Further, telehealth has been proven to expand the provider pool, reduce cultural and language barriers, and help eliminate stigma surrounding mental health care.

As the Director of the HHS Office for Civil Rights, Lisa J. Pino, stated on June 13, 2022:

“While telehealth can significantly expand access to health care, certain populations may have difficulty accessing or be unable to access technologies used for audio-video telehealth because of various factors... Audio-only telehealth, especially using technologies that do not require broadband availability, can help address the needs of some of these individuals.”ⁱⁱⁱ Many community health centers and other safety net providers rely on audio-only services to provide care to some of the most vulnerable patients.^{iv}

Receiving high quality, affordable care should not require internet access. Taking advantage of video telehealth services requires digital literacy. Overall, 45 percent of adults experience some type of technology or access barrier to participate in telehealth services.^v We urge CMS to consider how ending coverage for audio-only telehealth for most services will compromise the provider-patient relationship and disproportionately impact populations who face barriers to accessing care.

How is CMS measuring the effectiveness of audio-only telehealth communications services as a tool to deliver quality health care services? When should Congress expect data to be available about the use of audio-only services, considering the characteristics that could impact use (geographic location, type of provider, facility)?

In many rural communities where internet is unreliable, audio-only telehealth services are an essential part of care delivery. Has CMS evaluated the potential impact that no longer covering broad audio-only services will have on rural communities specifically? If so, how will ending coverage for audio-only telehealth affect beneficiaries' ability to access care, particularly specialist care?

Audio-only services also help increase access to care for BIPOC communities. For example, older, Black patients are more likely to use audio-only telehealth than video-audio telehealth.^{vi} Considering the possibility of ending coverage for a majority of audio-only services, what other tools will the Biden Administration leverage to continue with their commitment to advancing health equity?

On behalf of the patients and providers in our districts and nationwide, we appreciate your attention to these concerns. We look forward to your response.

Sincerely,



Ann McLane Kuster
Member of Congress



Lori Trahan
Member of Congress



Peter Welch
Member of Congress

ⁱ<https://mhealthintelligence.com/features/hhs-providers-view-audio-only-telehealth-as-key-health-equity-strategy>

ⁱⁱ<https://www.fiercehealthcare.com/sponsored/future-telehealth-how-audio-only-services-improve-access-and-health-equity>

ⁱⁱⁱ<https://www.hhs.gov/about/news/2022/06/13/hhs-issues-guidance-hipaa-audio-telehealth.html>

^{iv}<https://www.sciencedirect.com/science/article/pii/S2667321522000166>

^vhttps://bipartisanpolicy.org/download/?file=/wp-content/uploads/2021/08/ssri_survey.pdf

^{vi}<https://link.springer.com/article/10.1007/s11606-021-07172-y>