

# Telehealth Roundup: Federal Bill Seeks to Expand Medicare Use of Telehealth; Delaware and Connecticut Update Telemedicine Laws

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On July 7<sup>th</sup>, the **House** introduced much anticipated bipartisan telehealth legislation. The [Medicare Telehealth Parity Act of 2015](#), introduced by Representative Mike Thompson (D-CA) and co-sponsored by Representatives Gregg Harper (R-MS), Diane Black (R-TN), and Peter Welch (D-VT), would gradually increase the scope of telehealth services covered by Medicare and addresses many of the current limitations in Medicare's coverage of services provided to patients remotely.

Over a four-year implementation period, the bill, if enacted, would incrementally expand coverage for telehealth services by easing current limitations on coverage. Specifically, the bill would:

- Expand the provider types whose services are covered to include certain allied health professions, including physical and occupational therapists and audiologists;
- Expand the types of services that are covered to include services like audiology and outpatient therapy services;
- Relax the "originating site" requirements for certain services;
- Expand the geographic locations in which telehealth services are covered; and
- Establish coverage for remote patient monitoring for certain chronic conditions.

Notably, the bipartisan measure would, two years after enactment, permit reimbursement under Medicare for certain services provided in a beneficiary's home, regardless of rural or urban designation. The bill is similar to the **Medicare Telehealth Parity Act of 2014**, also introduced by Representative Thompson, and is one of a growing number of legislative efforts to expand the use of telehealth in federal healthcare programs. Working groups are being initiated in both chambers of Congress, with introductions of additional measures likely in the coming months.

Meanwhile, the Administration proposed last week to waive, in bundled payment demonstrations, Medicare requirements for patients to be in a health care setting or a rural area to be eligible for

follow-up telemedicine visits after knee- and hip-replacement surgery. The Centers for Medicare and Medicaid Services (CMS) noted it plans to monitor telehealth services for overutilization or reductions in medically necessary care.

And finally, in the states, Delaware and Connecticut recently enacted laws expanding the use of telehealth. Both the Delaware [law](#) and the Connecticut [law](#) require commercial payors to reimburse for telemedicine services on the same basis as for services provided in traditional, in-person settings and establish practice standards for providers using telemedicine. A number of other state legislatures are considering similar legislation this term and many state boards of medicine are developing new practice rules related to the use of telemedicine. Mintz Levin and [ML Strategies](#) continue to monitor these federal and state developments.

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