

**Opening Statement for the Honorable Brett Guthrie**  
**Legislative Proposals to Support Patient Access to Telehealth Services**

**April 10, 2024**

- Today we're here to examine long-term solutions to ensure individuals maintain access to affordable and high-quality telemedicine services that so many Americans have been able to rely upon over the past four years.
- It's been widely reported how popular telehealth has become for Medicare beneficiaries throughout the COVID-19 pandemic with over 28 million seniors utilizing telehealth care in just the first year of the pandemic. Virtually overnight, our health care system underwent a significant transition.

**Importance of Telehealth for Seniors During the Pandemic**

- Soon after the first case of COVID-19 was detected within our borders, Congress and the Centers for Medicare and Medicaid Services acted to remove barriers that had previously prevented

many seniors from utilizing telehealth. Seniors were allowed to use telehealth across the country and could now access their health care providers from the comfort of their home. Additionally, the number of health care services Medicare would cover if performed through telehealth increased from 118 to over 260.

- Restrictions such as requiring seniors to have an established pre-existing relationship with a health care provider to receive mental health services through telehealth were waived. Allowing patients to consult with a provider through a simple audio-only phone call if an audio-visual connection wasn't available. These flexibilities proved to be particularly impactful for those living in rural communities that so many of us have the privilege to represent.
- Thankfully, Congress, under the leadership of those on this committee, again took action to extend these valuable telehealth flexibilities beyond the pandemic through December 31 of this year, which is one reason we are here today. The looming deadline gives us the chance to examine long-term telehealth solutions that can drive innovation in health care through greater care delivery.

- I believe telehealth can expand access to both primary care and other specialty providers, improve the health and well-being of patients, and eventually drive significant cost-savings across our health care system.
- I am hopeful that the testimony today can answer outstanding questions and provide an update on where telehealth continues to be beneficial to patients in the post-COVID-19 era.

**Today's Legislation will help Ensure Millions of Seniors Maintain Access to Telehealth Care**

- The legislation we are discussing today looks at many facets of telehealth, from the now traditional issues such as originating site requirements, to improving our past investments in behavioral health, and new opportunities such as making it easier for those with language barriers to see a telehealth care provider and addressing challenges around physician licensure.
- A number of the bills make permanent a variety of COVID-era policies, most notably permanently waiving originating site

requirements as well as policies to expand the list of providers eligible to treat patients via telehealth.

- I want to thank Representative Carter for leading on one of these bills, H.R. 7623, the Telehealth Modernization Act.
- I also have to thank the newest member of the Energy and Commerce Committee, Representative John James, who is leading important legislation, H.R. 7858, Telehealth Enhancement for Mental Health Act. This bill will help us improve Medicare's delivery of critical tele-behavioral health care services, which played a significant role throughout the pandemic to help seniors cope with social isolation and substance use disorder.

### **Addressing Program Integrity and Cost Concerns**

- There are often two issues raised with telehealth. First, there have been concerns about increases in waste, fraud, and abuse. On that issue, it appears that telehealth can be used to deliver care without actually raising those serious concerns.
- According to the Office of Inspector General, of the over 700,000 providers they studied who provided telehealth care during the pandemic, less than 2,000 warranted further scrutiny resulting from

their telehealth billing practices, and mostly because they charged facility fees and for the actual telehealth visit.

- On cost, I want to remind my colleagues that the previous extension was estimated by the Congressional Budget Office (CBO) to increase costs to the Medicare program by over \$2 billion. Making these authorities permanent is likely to cost much more than a short-term extension, and we want to make sure that whatever we move out of committee is paid for and is delivering the best value for seniors.
- Starting today, I think that this committee can work together, to move legislation making sure seniors have access to telehealth when they want it while also including appropriate program integrity measures, addressing the costs of such access to the program.
- Thank you, and I yield 5 minutes to the Ranking Member of the Subcommittee, Ms. Eshoo.