

# Protecting Rural Telehealth Access Act

## **The Problem**

Rural hospitals and health providers have faced many challenges in providing essential access to health care services to rural communities. Across the U.S., 136 rural hospitals have closed between 2010 and 2021. Roughly 60 million people, nearly one in five Americans, live in rural areas and depend on these rural health providers for care.

A variety of issues have put rural hospitals at risk. Low patient volume, heavy reliance on government payers like Medicaid and Medicare, as well as too much regulatory burden further stretching their shoe string budgets. The COVID-19 pandemic put further financial pressure on rural hospitals. Critical to supporting rural patients and hospitals during the COVID-19 pandemic, was the expansion of telehealth. The CARES Act provided a temporary solution for the pandemic by expanding telehealth, and Congress recognized the importance of telehealth and extended these flexibilities until December 2024.

Telehealth has allowed health providers to continue to reach patients at their home for medical check-ups and screenings, without patients having to travel hours. Patients are able to check in with doctors more frequently, and have easier access to medical advice. This is especially true for chronically ill patients, and for behavioral health patients for tele-therapy. By making these changes permanent, it allows rural hospitals and health centers to continue to build out their infrastructure, without having to worry about it only being temporary

Our rural health providers have worked tirelessly over the last year to support the nearly 20 percent of Americans who live in rural areas. Rural Americans on average are older, and have high rates of chronic health conditions. This makes support for rural health care imperative for ensuring the health of all Americans.

## **The Solution**

To ensure rural health providers and other underserved communities will be able to continue operating and treating patients, Senators Manchin, Ernst, and Moran are proposing the Protecting Rural Telehealth Access Act, to make permanent current telehealth flexibilities. Allowing for continuation of services without disruption to patients. This will allow rural providers to continue to build out their infrastructure, without having to worry about telehealth flexibilities only being temporary. Specifically it would:

- Allow payment-parity for audio-only health services for clinically appropriate appointments. During COVID-19, recognizing not everyone has access to the technology in their home, Congress made allowances for audio-only telephone services to be used to allow doctors to reach patients wherever they are.
- Permanently waive the geographic restriction allowing patients to be treated from their homes. Pre-COVID-19, the home was allowed as an eligible originating site in Medicare and some Medicaid programs, but only for very specific services, and only for the patient, not the provider.
- Permanently allow rural health clinics and Federally Qualified Health Centers to serve as distance sites for providing telehealth services.
- Lift the restrictions on “store and forward” technologies for telehealth. Currently this is only allowed in Hawaii and Alaska.
- Allows Critical Access Hospitals (CAHs) to directly bill for telehealth services.