COVID-19 Telehealth Waivers Won’t Last Forever, But Permanent Regulatory Changes Are Afoot

Healthcare providers are increasingly realizing the potential that telemedicine has to offer. Not only has it been the most talked-about healthcare solution lately, but waivers from the Centers for Medicare and Medicaid Services (CMS) have enabled providers to begin implementing telemedicine tools themselves, resulting in skyrocketing adoption over the past year. Now, these waivers might be temporary for the time being, but with telehealth adoption at an all-time high, federal and state governments are under increasing pressure to make these emergency measures permanent.

Congress is under particular pressure to pass laws expanding telehealth coverage since it has emerged as an effective solution for virtual care delivery, and the Centers for Medicare & Medicaid Services has conveyed a willingness to review as well as revise its existing guidelines for coverage. So what happens to telehealth given the rapid pace at which it is being adopted by healthcare providers across the United States? What does this fast approaching “new normal” have in store for connected health solutions?

In this piece, we examine a few potential regulatory changes that might be underway on the virtual care front, and how exactly, if implemented, those changes will impact telehealth care providers.

1) Telehealth Coverage Will Soon Be a Widely Accepted Practice

In 1997, Congress had declared that telehealth services could only be reimbursed under certain scenarios. Not much changed until last year when the Centers for Medicare and Medicaid Services gave Medicare Advantage plans more latitude. However, today, the technology itself has transformed quite a bit. The actual
technological advances happening in the field have left the regulatory framework far behind.

While the waivers currently in effect will disperse once the pandemic subsides, elected officials will have reason to contemplate more enduring regulatory changes given how the country can use telehealth expansion to achieve huge market savings year after year. These savings can primarily be achieved by lifting restrictions on telehealth coverage and reimbursement and prohibiting commercial payers from imposing similar coverage and reimbursement restrictions.

Telehealth has successfully demonstrated its potential in everything, from streamlining primary care visits to making specialized care more accessible for people with chronic diseases. Therefore, industry experts are continually urging that post-COVID, Congress should address the geographic expansion of telehealth access. Reimbursement will soon follow.

### 2) Telehealth Services May Be Billed at Rates Similar to In-Person Visits

While conventionally, telehealth services have almost always been reimbursed at rates far lower than that of in-person visits, they are steadily catching pace, especially since the onset of the COVID-19 pandemic. This has largely occurred because in March 2020, CMS authorized providers to offer many additional healthcare services via telehealth and charge for telehealth visits at the same rate as in-person visits.

Although as of now, this waiver will only stay in effect for the duration of the emergency declaration, it has enabled healthcare providers to continue offering basic consultations that otherwise would be lost to them.

Prior to the COVID-19 health emergency, telehealth was only widely accepted as a means to deliver primary care to people living in the rural landscapes of America. And even in those cases, it could only be performed at a sanctioned facility in the area.

When the pandemic hit America, physicians in private practices started to
experience huge changes because they couldn’t see patients in person anymore. Now they are swiftly adapting to this change. If they don’t do so, they will be left with limited options to generate revenue since patients aren’t willing to visit healthcare facilities due to increased fear of infection.

As one of the most significant waivers, it has served as a wake-up call for providers who weren’t initially in favor of telehealth or did not see it as a credible solution.

As providers try telemedicine to maintain patient contact during the Covid-19 pandemic, they also experience its benefits firsthand – from being able to sustain or even grow their practice, to acquiring a patient base beyond geographical barriers. Therefore, it wouldn’t be wrong to expect that many of these providers will likely continue to provide telehealth even after the pandemic.

In addition, there are many financial benefits that come alongside the implementation of telehealth, such as less administrative and staffing costs in the case of providers and negligible to no commute costs for patients. As such, a lot of industry experts are hopeful that Congress will permanently adopt billing for telehealth services that are well within the range assigned for in-person or in-office visits, even post-pandemic.

3) Relaxations Pertaining to Telehealth Licensure Might Be Underway

One of telehealth’s most poignant advantages is that it connects patients and doctors at a distance. Licensure laws restrict the geographic footprints of aspiring virtual care physicians, while giving patients access to only doctors who have a license in their state of residence.

In the past, a few states have attempted to get past the artificial barriers put in place at the state boundary lines by joining the Interstate Medical Licensure Compact. For instance, only two years ago, the Florida legislature passed a law wherein it authorized out-of-state healthcare professionals to deliver telehealth services to local residents. Having examined a patient in person previously is no longer a primary requirement for practicing telemedicine in Florida.
For all these reasons and many more, healthcare experts predict that states may soon relax telehealth licensure requirements, as more and more care providers adopt telemedicine and attempt to make virtual care delivery more seamless.

All in all, telehealth is a valid care mechanism and has emerged as an invaluable means to deliver care. Telemedicine can help provide much needed care to those in rural areas and also offer cost savings in doing so. It is about time that regulatory entities stop restricting providers from embracing it. We’ve come this far and there should be no going back from here. Efforts should only be made towards augmenting this technology moving forward.

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