

Telehealth Likely to Continue to Flourish in Trump Administration



Telehealth is one of the most rapidly expanding sectors of contemporary

healthcare, and its expansion is not likely to slow down under the Trump administration.

Trump picks are friends of telehealth

[Tom Price](#), recently confirmed as Secretary of Department of Health and Human Services (HHS), has been called “telehealth friendly.” In the course of his congressional confirmation hearings, he referred to a Georgia telemedicine program dedicated to stroke treatment in glowing terms, and he indicated that doing more to take healthcare in the direction of remote access would be a boon for the industry. He touted telehealth as “hold[ing] great promise, particularly for rural areas experiencing physician shortages and for patients with limited mobility.”

And the support for telehealth is already robust in Washington. Last month nearly 40 Senators from both parties came together to send a letter to Price asking that the HHS throw its weight behind telemedicine.

Maureen Ohlhausen has recently been appointed as the acting chair of the Federal Trade Commission (FTC); she has spoken highly of telehealth and has expressed interest in exploring ways to rework healthcare professional licensing structures so that they can better mesh with the reality of telemedicine.

Bringing more flexibility and patient focus to healthcare

Another of Trump’s (though as-of-yet unconfirmed) picks is [Seema Verma](#), slated for Administrator of the Centers for Medicare and Medicaid Services (CMS). In her congressional confirmation hearings, she said, “[T]elehealth can provide innovative means of making healthcare more flexible and patient-centric. Innovation within the telehealth space could help to expand access with rural and underserved areas,” and she expressed her intention of working along with Congress to expand access to telehealth technology across the country.

Congress tackling bipartisan bills that involve telehealth

Indeed, Congress has been demonstrating its commitment to advancing telehealth through bills like the Furthering Access to Stroke Telemedicine Act (FAST), legislation that would broaden availability to telestroke resources for Medicare enrollees. Additionally, HR 766 is legislation that would set up a pilot program for telehealth expansion for Medicare beneficiaries residing in public housing.

Congress will also soon have two more bipartisan telehealth bills to ponder. One has the apt acronym of CONNECT: Creating

Opportunities Now for Necessary and Effective Care Technologies for Health Act, the goal of which is to make Medicare telehealth services reimbursement an actual overarching mandate that goes beyond the status-quo limited reimbursement structure. And the other is the Creating High-Quality Results and Outcomes Necessary to Improve Chronic Care Act of 2016 (CHRONIC), a piece of legislation that would revise those Medicare payment protocols that deal with the treatment of chronic medical conditions on a telehealth basis.

Parity legislation for telehealth

The issue of parity in telehealth—specifically, where telehealth intersects with private insurance—is especially relevant to telemedicine’s advancement. At the present time, 31 states have laws in place to ensure parity of payment for telehealth services. And so far this year, Washington, Oklahoma, Kansas, New York and Utah introduced legislation that addresses parity in telemedicine fees.

Last year saw the introduction of more than 150 bills involving telehealth. Around 30% of those went on to become law. So far there’s no evidence presented by the new administration that pro-telehealth pattern will backslide in the coming year.

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