

CONGRESS ONCE AGAIN TRYING TO CONNECT ON TELEHEALTH

On October 30, a bipartisan, bicameral group of lawmakers reintroduced the **Creating Opportunities Now for Necessary and Effective Care Technologies ("CONNECT") for Health Act** (S. 2741/ H.R. 4932). This legislation is intended to remove roadblocks to telehealth expansion in Medicare by giving providers the freedom to use alternative payment models and incentive programs, reducing geographic and site-specific barriers to coverage and maximizing opportunities to use telehealth to help underserved populations. A fact sheet for the CONNECT Act of 2019 can be found [here](#).

The bill was introduced by Sens. Brian Schatz (D-HI), Roger Wicker (R-MS), Ben Cardin (D-MD), John Thune (R-SD), Mark Warner (D-VA) and Cindy Hyde-Smith (R-MS). The companion House bill was introduced by Reps. Mike Thompson (D-CA), Peter Welch (D-VT), David Schweikert (R-AZ) and Bill Johnson (R-OH). This is the third time the group, all members of the Congressional Telehealth Caucus, has introduced legislation focused on expanding the use of telehealth.

The comprehensive telehealth package would remove geographic restrictions on payment for various services, including for virtual mental health treatment and certain emergency medical care services. The bill would add a patient's home as an originating site for mental health services. The bill would also encourage CMS's Center for Medicare and Medicaid Innovation ("CMMI") to test out new telehealth payment models for Medicare. It would allow some restrictions on telehealth coverage to be waived during national and public health emergencies. The Act would give HHS the authority to waive telehealth restrictions in Medicare, such as geographic limitations, originating site requirements and technology limitations, provided that HHS determines that the waiver doesn't limit benefit coverage or reduce the quality of care and that it would reduce spending.

Additionally, the legislation would: remove restrictions on rural health clinics and Federally Qualified Health Centers and allow them to provide care via telehealth; allow Medicare beneficiaries to use telehealth for hospice recertification; and require the Medicare Payment Advisory Commission ("MedPAC") to study how different payers cover the home as an originating telehealth site and if it would be suitable for Medicare to offer in-home care via telehealth.

While the telehealth package is unlikely to pass as a stand-alone package, a number of provisions from the bill could be advanced in other legislative vehicles. Last Congress, a number of provisions included in the CONNECT Act, including the expansion of telestroke coverage and the reclassification of telehealth as a basic benefit in Medicare Advantage plans, made it into the 2018 Bipartisan Budget Act. The Congressional Telehealth Caucus aims to push the entire bill through, and have received endorsements from more than 120 organizations to support passing the entire package.

IN OTHER TELEHEALTH NEWS, DEA MISSES SPECIAL REGISTRATION DEADLINE

The Drug Enforcement Administration ("DEA") was directed last year, as part of the **SUPPORT Act**, to develop a special registration process that would supplement the more limited exceptions for telemedicine prescriptions currently permitted by the federal Ryan Haight Online Pharmacy Consumer Protection Act of 2008. Lawmakers gave the DEA until October 24, 2019, or one year from enactment of The Support Act, to develop and promulgate the pertinent rules. Although the deadline has passed, the requirement to develop the special registration remains in place. Hall Render's telemedicine team will continue to monitor this matter for any developments and will provide an update when the DEA releases the special registration rule.

If you have any questions or would like additional information about this topic, please contact:

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More information on Hall Render's Telemedicine services can be found [here](#).