July 10, 2020

RE: Underserved Communities Deserve Telehealth Access

Dear Representative ___________,

As Congress deliberates the future of telehealth policy, it is vitally important that underserved communities have full access to telehealth services. However, without Congressional action, patients in underserved communities will not have the same access to telehealth services as other patients.

This is because the clinicians who work in these underserved communities ~ in our rural health clinics and federally qualified health centers ~ have both temporary and inadequate telehealth policy.

The CARES Act, allowed rural health clinics and federally qualified health centers to provide distant site telehealth services for the first time, but only for the duration of the public health emergency and only through a "special payment rule." Unfortunately, these special payment rules for rural health clinics and federally qualified health centers cause unnecessary administrative burden, generate inaccurate claims data, and strongly incentivize in-person visits over telehealth.

In order to ensure patients have full access to the benefits of telehealth, it is imperative that rural health clinics and federally qualified health centers are reimbursed through their normal reimbursement systems. Payment should not vary based on whether the service was provided in-person or via telehealth. Parity between brick and mortar and telehealth payments is the longstanding policy for our fee-for-service peers and that same logic should extend to rural health clinics and federally qualified health centers.

Currently, there are two pieces of bipartisan legislation that would create the access to telehealth services that underserved communities deserve.

We urge Rep. __________ to support these solutions in any phase four Coronavirus package:

**The Improving Telehealth for Underserved Communities Act (H.R. 6792)** – allows rural health clinics and federally qualified health centers to be paid for telehealth through their normal reimbursement mechanisms for the duration of the public health emergency.

**The HEALTH Act (H.R. 7187)** – allows rural health clinics and federally qualified health centers to be paid for telehealth through their normal reimbursement mechanisms permanently.

Sincerely,

Nathan Baugh
Director of Government Affairs
National Association of Rural Health Clinics
(202) 543-0348