April 3, 2020

Dear Secretary Azar and Administrator Verma:

As leading national organizations representing the interests of Medicare patients, health care professionals, providers and other stakeholders from across the mental health, substance use, medical, allied health, disability, and aging fields, we urge you to immediately expand Medicare coverage of telehealth to allow audio-only communications and waive the current Medicare requirement for audio-video connecting during the COVID-19 public health emergency. Although we applaud your recent efforts to expand telehealth services during this crisis, such as the recent March 17th guidance from the Centers for Medicare & Medicaid Services (CMS) allowing greater flexibility in Medicare-covered telehealth services, the current requirement for audio-video connection is proving to be a significant barrier for many health care providers and Medicare beneficiaries. A number of state Medicaid programs and private insurers are now covering audio-only telehealth, and we urge you to make this change for Medicare as well.

Under current regulations, CMS only covers telehealth services conducted through “communications equipment that includes, at a minimum, audio and video equipment permitting two-way, real-time interactive communication” (42 C.F.R. §410.78(a)(3)). This rule allows telehealth to be offered to Medicare beneficiaries only through video-conferencing on laptops, tablets, smartphones, and other similar devices, but excludes telephones, such as flip phones. Section 3703 of the recently enacted Coronavirus Aid, Relief, and Economic Security Act, however, now provides clear authority for the Secretary of the U.S. Department of Health & Human Services to waive this requirement during a public health emergency, and we urge you to take this step immediately during the remainder of this current crisis.

Many Medicare beneficiaries and some providers lack access to devices with video-conferencing capabilities, broadband or the internet, or simply do not know how to use these devices to communicate in this manner. According to recent reports from the Federal Communications Commission and others, between 21.3 million and 42 million Americans still lack broadband access.1 Moreover, our organizations are hearing from our provider agencies, health care professionals, and patients that many Medicare beneficiaries cannot currently be served through Medicare-covered telehealth under the existing restrictions because they do not have access to, or the capability to use, videoconferencing. This is especially true among more vulnerable populations, including older adults, beneficiaries who suffer from mental health and substance use conditions and may be experiencing even greater anxiety and depression now, those located in rural areas, or those with lower incomes. At a time when older adults, particularly those

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with chronic conditions or mental health/substance use conditions, are extremely vulnerable to the ravages of COVID-19 and isolated in their homes, they urgently need to be able to connect to their health care providers by whatever means are available to them.

For these reasons, we urge you to bolster our nation’s creative responses to the pandemic by lifting the current prohibition on audio-only telehealth for the duration of this extreme public health emergency. Medicare beneficiaries should not be denied access to needed telehealth services because they lack video-conferencing capabilities, and their sole means of accessing care by telephone fails to meet the definition of an interactive telecommunications system.

Thank you in advance for considering this critical matter.

Sincerely,

2020 Moms
A New PATH (Parents for Addiction Treatment & Healing)
American Association for Psychoanalysis in Clinical Social Work
American Association on Health and Disability
American College of Medical Toxicology
American Council of the Blind
American Foundation for Suicide Prevention
American Geriatrics Society
American Music Therapy Association
American Network of Community Options & Resources (ANCOR)
American Nurses Association
American Physical Therapy Association
American Podiatric Medical Association
American Psychiatric Association
American Psychiatric Nurses Association
American Psychological Association
American Society of Addiction Medicine
Anxiety and Depression Association of America
The Arc of the United States
Association for Ambulatory Behavioral Healthcare
Association for Behavioral Health and Wellness
Association of Jewish Aging Services
Association of University Centers on Disabilities (AUCD)
Autistic Women & Nonbinary Network
California Society for Clinical Social Work
Center for Medicare Advocacy
Center on Addiction
Centerstone
Central City Concern
Children and Adults with Attention-Deficit/Hyperactivity Disorder
Christopher & Dana Reeve Foundation
Clinical Social Work Association
Coalition to End Social Isolation and Loneliness
Community Catalyst
Depression and Bipolar Support Alliance
Disability Rights Education & Defense Fund
Eating Disorders Coalition for Research, Policy & Action
Faces & Voices of Recovery
Global Alliance for Behavioral Health and Social Justice
International Association for Indigenous Aging
International OCD Foundation
Justice in Aging
The Jewish Federations of North America
The Kennedy Forum
Kristine Rickards, LCSW
Lakeshore Foundation
LeadingAge
Life Span Psychotherapy
Medicare Rights Center
Mental Health America
The Michael J. Fox Foundation for Parkinson's Research
NAADAC, the Association for Addiction Professionals
NACBHDD and NARMH
NASTAD
National Adult Day Services Association (NADSA)
National Adult Protective Services Association
National Alliance for Medication Assisted Recovery
National Alliance on Mental Illness
National Association for Behavioral Healthcare
National Association for Home Care & Hospice
National Association of Area Agencies on Aging
National Association of Nutrition and Aging Services Programs (NANASP)
National Association of Pediatric Nurse Practitioners
National Association of Social Workers
National Association of State Long-Term Care Ombudsman Programs (NASOP)
National Association of State Mental Health Program Directors
National Consumer Voice for Quality Long-Term Care
National Council for Behavioral Health
National Council on Aging
National Council on Independent Living
National Disability Rights Network
National Eating Disorders Association
National Federation of Families for Children’s Mental Health
National Health Care for the Homeless Council
National Health Law Program
National League for Nursing
National PACE Association
National Respite Coalition
Network of Jewish Human Service Agencies
Psychotherapy Action Network (PsiAN)
RespectAbility
Shatterproof
SMART Recovery
Treatment Communities of America
The Trevor Project
Turn-Key Health