

118TH CONGRESS
1ST SESSION

H. R. 1110

To direct the Secretary of Health and Human Services, the Medicare Payment Advisory Commission, and the Medicaid and CHIP Payment and Access Commission to conduct studies and report to Congress on actions taken to expand access to telehealth services under the Medicare, Medicaid, and Children’s Health Insurance programs during the COVID–19 emergency.

IN THE HOUSE OF REPRESENTATIVES

FEBRUARY 21, 2023

Mr. BALDERSON (for himself, Mrs. LEE of Nevada, Mrs. HINSON, and Mr. NEGUSE) introduced the following bill; which was referred to the Committee on Energy and Commerce, and in addition to the Committee on Ways and Means, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

A BILL

To direct the Secretary of Health and Human Services, the Medicare Payment Advisory Commission, and the Medicaid and CHIP Payment and Access Commission to conduct studies and report to Congress on actions taken to expand access to telehealth services under the Medicare, Medicaid, and Children’s Health Insurance programs during the COVID–19 emergency.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

1 **SECTION 1. SHORT TITLE.**

2 This Act may be cited as the “Knowing the Efficiency
3 and Efficacy of Permanent Telehealth Options Act of
4 2023” or the “KEEP Telehealth Options Act of 2023”.

5 **SEC. 2. STUDIES AND REPORTS ON THE EXPANSION OF AC-**
6 **CESS TO TELEHEALTH SERVICES DURING**
7 **THE COVID-19 EMERGENCY.**

8 (a) HHS.—

9 (1) IN GENERAL.—Not later than 180 days
10 after the date of the enactment of this Act, the Sec-
11 retary, in consultation with the Administrator, shall
12 conduct a study and submit to Congress a report on
13 actions taken by the Secretary during the emergency
14 period described in section 1135(g)(1)(B) of the So-
15 cial Security Act (42 U.S.C. 1320b-5(g)(1)(B)) and
16 through December 31, 2024, to expand access to
17 telehealth services under the Medicare program, the
18 Medicaid program, and the Children’s Health Insur-
19 ance program. Such report shall include the fol-
20 lowing:

21 (A) A comprehensive list of telehealth serv-
22 ices available under such programs and an ex-
23 planation of all actions undertaken by the Sec-
24 retary during such emergency period and
25 through December 31, 2024, to expand access
26 to such services.

1 (B) A comprehensive list of types of pro-
2 viders that may be reimbursed for such services
3 furnished under such programs during such pe-
4 riod and through December 31, 2024, including
5 a list of services which may only be reimbursed
6 under such programs during such period and
7 through December 31, 2024, if furnished by
8 such providers in-person.

9 (C) A quantitative analysis of the use of
10 such telehealth services under such programs
11 during such period and through December 31,
12 2024, including data points on use by rural, mi-
13 nority, low-income, and elderly populations.

14 (D) A quantitative analysis of the use of
15 such services under such programs during such
16 period and through December 31, 2024, for
17 mental and behavioral health treatments.

18 (E) An analysis of the public health im-
19 pacts of the actions described in subparagraph
20 (A).

21 (2) PUBLICATION OF REPORT.—Not later than
22 180 days after the date of the enactment of this Act,
23 the Secretary shall publish on the public website of
24 the Department of Health and Human Services the
25 report described in paragraph (1).

1 (b) MEDPAC AND MACPAC.—

2 (1) IN GENERAL.—Not later than 1 year after
3 the date of enactment of this Act, the Medicare Pay-
4 ment Advisory Commission and the Medicaid and
5 CHIP Payment and Access Commission, in consulta-
6 tion with the Inspector General of the Department
7 of Health and Human Services, shall each conduct
8 a study and submit to Congress a report on—

9 (A) any improvements to, or barriers in,
10 access to telehealth services under—

11 (i) in the case of the report submitted
12 by the Medicare Payment Advisory Com-
13 mission, the Medicare program; and

14 (ii) in the case of the report submitted
15 by the Medicaid and CHIP Payment and
16 Access Commission, the Medicaid and Chil-
17 dren’s Health Insurance programs;

18 during the emergency period described in sub-
19 section (a)(1) and through December 31, 2024;
20 and

21 (B) what is known about any increased
22 risk in increased fraudulent activity, including
23 the types of fraudulent activity, that could be
24 associated with the expansion of access to such

1 services under such programs during such pe-
2 riod and through December 31, 2024.

3 (2) RECOMMENDATIONS.—The reports sub-
4 mitted under paragraph (1) shall include rec-
5 ommendations, as appropriate, on—

6 (A) potential improvements to telehealth
7 services, and expansions of such services, under
8 the programs described in paragraph (1)(A);
9 and

10 (B) possible approaches to addressing any
11 fraudulent activity described in paragraph
12 (1)(B).

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