

**Committee on Energy and Commerce**  
**Opening Statement as Prepared for Delivery**  
**of**  
**Subcommittee on Health Ranking Member Anna Eshoo**

*Hearing on “Legislative Proposals to Support Patient Access to Telehealth Services”*

**April 10, 2024**

Thank you, Mr. Chairman and good morning, colleagues. Good morning to the witnesses and thank you for being here. We all are looking forward to hearing from you. Today, our Subcommittee will consider 15 bills to expand access to telehealth, the majority of which are bipartisan. That’s good news to everyone here in the hearing room.

Telehealth is I think one of the few bright spots that emerged from the pandemic. During the public health emergency, HHS waived many outdated rules and payment policies surrounding telehealth coverage in traditional Medicare. These changes ensured continuity of care for patients who, like the rest of us, needed to stay home and out of crowded care settings such as doctor’s offices or hospitals.

The year before the pandemic, 2 million of the 66 million total Medicare beneficiaries used telehealth services. I know I represent the Stanford Medical Center in Palo Alto California and previous to the pandemic there was a single digit usage of telehealth with many suspicions about it which really prevented people from moving forward and using it. When they did it zoomed up to 90 something percent approval. So those numbers really speak for themselves. From March 2020 to February 2021, the HHS Office of the Inspector General found the number of beneficiaries using telehealth skyrocketed to 40 percent of all Medicare patients. So, this reflects what we experienced in my own congressional district.

Importantly, telehealth served as a lifeline to beneficiaries, as I said, who were isolated from their families and in need of mental health services. By the end of 2020, virtual visits with mental health providers were as common as in-person visits. Telehealth I think has been a godsend to the disabled community as well and we need to make sure that this is protected because they obviously use services on a more frequent basis. The whole notion of having to travel, to park, to get in, all of that is especially burdensome to that community.

I think the changes HHS made also set the standard for private insurance companies who increased telehealth offerings for millions of Americans.

So, this issue of telehealth remains an issue in all of our view, this is not a partisan issue, it remains a very important tool across healthcare for all the obvious reasons that the Chairman of the committee expressed.

There’s an urgent need to extend these flexibilities because they are going to run out, we need to take action on this.

There’s more that I can say about it. We are all for it. We know that what HHS did during the pandemic, they cleared many of the weeds away. I don’t want to see inside the healthcare industry, and its not called industry for nothing, the gaming of telehealth. We are

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going to look to you to give us advice about how best to structure it as we move forward to meet the needs of so many Americans that who already have had a good experience with it and want to continue it and make sure that those who would game it won't be able to because there's costs, money, associated with this.

Thank you, Mr. Chairman, for holding this hearing. I want to thank the members of the committee who have offering legislation. Thank you and I yield back.