CONNECT for Health Act of 2023
Senators Schatz (D-HI), Wicker (R-MS), Cardin (D-MD), Thune (R-SD), Warner (D-VA), & Hyde-Smith (R-MS)

The CONNECT for Health Act of 2023 would permanently expand access to telehealth services—ensuring that Medicare beneficiaries can continue to receive essential care.

- Telehealth utilization surged in 2020 when CMS waived many statutory restrictions on telehealth to ensure continued access to health care during the public health emergency.
- Recent reports find that older adults and individuals from underserved communities benefited the most from expanded telehealth access.¹
- Since 2021, Medicare beneficiaries’ telehealth utilization has stabilized at 15 percent², while overall health care use is level, indicating that telehealth often substitutes in-person care.³
- With telehealth flexibilities set to expire at the end of 2024, beneficiaries will lose access to care due to statutory restrictions, including requirements that only permit beneficiaries to receive telehealth services if they are in rural areas and at certain clinical sites.
- Permanent changes to Medicare’s coverage of telehealth services are critical in order to protect access to care and fully integrate telehealth into care delivery.

Summary of the CONNECT for Health Act of 2023
Sec. 1 – Table of contents. Sec. 2 – Findings and sense of Congress.
Title I – Removing Barriers to Telehealth Coverage
Sec. 101 – Permanently removes geographic requirements for telehealth services.
Sec. 102 – Expands originating sites to include the patient’s home and other clinically appropriate sites.
Sec. 103 – Expands the authority for practitioners eligible to furnish telehealth services.
Sec. 104 – Improves Medicare’s process to add telehealth services.
Sec. 105 – Permanently allows Federally Qualified Health Centers and Rural Health Clinics to furnish telehealth services as distant site providers.
Sec. 106 – Removes restrictions for facilities of the Indian Health Service and Native Hawaiian Health Care.
Sec. 107 – Repeals the six-month in-person visit requirement for telemental health services.
Sec. 108 – Permanently allows for the waiver of telehealth restrictions during public health emergencies.
Sec. 109 – Permanently allows for the use of telehealth in the recertification of a beneficiary for hospice.

Title II – Program Integrity
Sec. 201 – Clarifies that the provision of technologies to a Medicare beneficiary for the purpose of telehealth services is not considered “remuneration” under fraud and abuse laws.
Sec. 202 – Provides additional resources to the HHS Office of Inspector General for telehealth oversight.
Sec. 203 – Addresses significant outlier billing patterns for telehealth services⁴ through provider notification and technical assistance.

Title III – Beneficiary and Provider Supports, Quality of Care, and Data
Sec. 301 – Provides additional resources and study to improve beneficiary engagement in telehealth.
Sec. 302 – Provides resources and training on telehealth for health care professionals.
Sec. 303 – Ensures the inclusion of telehealth in measuring quality of care.
Sec. 304 – Requires CMS to publish detailed information on utilization of telehealth services quarterly.

¹ https://oig.hhs.gov/oei/reports/OEI-02-20-00522.pdf
³ https://oig.hhs.gov/oei/reports/OEI-02-20-00520.pdf
⁴ https://oig.hhs.gov/oei/reports/OEI-02-20-00720.pdf
The CONNECT for Health Act Is Endorsed By 150+ Organizations