



Maintain the Key Patient Protection in the Audio-Only Telemedicine Law

Background

In 2021, the Washington State Legislature passed HB 1196 to establish audio-only telemedicine as a covered and reimbursable care option for patients. The new law treats audio-only telemedicine the same as audio-visual telemedicine by requiring payers such as Medicaid and commercial insurers to reimburse for audio-only telemedicine services at the same rate as services provided through audio-visual means. Beginning Jan. 1, 2023, providers must have an established relationship with their patients to be reimbursed by payers for audio-only telemedicine. The established relationship requirement requires the provider to see the patient in-person once annually, while also allowing providers to refer their established patients to other providers for audio-only telemedicine.

WSHA Position

The current established relationship provision ensures that providers see their patients in-person at least once per year to assess their overall health before receiving payment for audio-only telemedicine. The in-person visit provides a baseline understanding of the patient's health that helps ensure audio-only telemedicine is appropriate for the patient's condition and conducted safely. WSHA opposes removing the in-person visit requirement entirely because doing so would undermine the patient safety protections created by the in-person visit. However, WSHA supports an exception for behavioral health services since in-person interaction may not be necessary for all patients. WSHA also supports extending the established relationship time period to two years to increase access to care.

Key Messages

- The established relationship requirement is reasonable and ensures providers have sufficient knowledge about a patient to provide treatment through audio-only telemedicine as safely as possible.
- Audio-only telemedicine is intended to be an additive modality for treating patients, not a replacement for in-person care.
- Allowing an audio-visual visit to satisfy the in-person visit condition for all medical care would remove any impetus for in-person care for any condition. This could lead to situations in which patients with serious chronic conditions are only seen through remote care and never actually see their provider in person.
- Extending the established relationship time period beyond two years may inadvertently detract from the provider-patient relationship by making the time between visits longer. This is especially problematic for patients who are prone to underreport symptoms or conditions that would otherwise be identified during an in-person visit.

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