



January 13, 2023

Chiquita Brooks-LaSure  
Administrator  
Centers for Medicare & Medicaid Services  
Department of Health and Human Services  
7500 Security Boulevard  
Baltimore, MD 21244

Dear Administrator Brooks-LaSure:

Thank you for your ongoing leadership to ensure Medicare beneficiaries retain access to telehealth. We write today regarding the Centers for Medicare & Medicaid Services (CMS) implementation of the telehealth provisions in the Consolidated Appropriations Act, 2023. Given the new authority for coverage of telehealth services, we request that CMS proactively issue an Interim Final Rule (IFR) as soon as feasible to align the dates that telehealth policies will expire with the new statutory timeline.

Most urgently, action is needed to continue beneficiary access to the Medicare services currently scheduled to expire 151 days after the expiration of the COVID-19 public health emergency (PHE). Our understanding is that this policy was developed in order to align the availability of these services with the authorities that were extended under the Consolidated Appropriations Act, 2022. Now that authority has been extended to December 31, 2024, these services should be updated to align through an IFR. We note that, if the PHE were to expire on April 11, access would end 151 days after that date – in early September – creating a gap in coverage and what we believe would be an unintended barrier to accessing vital health care services. This timeline is too rapid for CMS to address in its annual CY2024 Medicare Physician Fee Schedule (PFS) rulemaking, so we request that you issue an interim final rule to implement these date changes and preserve beneficiary access for the latter half of CY2023 and into CY2024.

We also request that CMS take this IFR opportunity to update the timelines on Category 3 codes – creating stability and predictability for patients throughout the congressionally authorized extension of access to telehealth services through December 31, 2024. This approach builds on the intent of Category 3 codes – to create more predictability for patients and clinicians using these services. It would also allow CMS and other organizations time to gather additional data about the clinical benefit that providing these services via telehealth has had for Medicare beneficiaries.

Thank you for your consideration of this request and for your ongoing work to ensure beneficiary access to needed telehealth services. Please contact Chris Adamec ([cadamec@connectwithcare.org](mailto:cadamec@connectwithcare.org)) with any questions about this letter and request for a timely telehealth services IFR.

Sincerely

A handwritten signature in blue ink that reads "Krista Drobac".

Krista Drobac  
Executive Director, Alliance for Connected Care