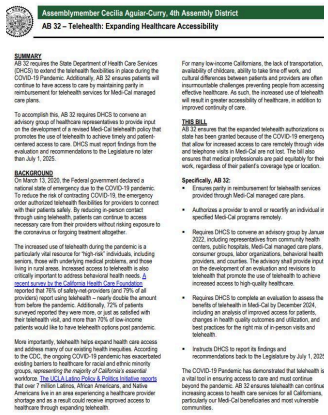
California Association of Local Behavioral Health Boards and Commissions

Call for Action! AB 32: Telehealth

Suggested email below.

Find Your Representative



Assemblymember Cecilia Aguiar-Curry, 4th Assembly District

AB 32 – Telehealth: Expanding Healthcare Accessibility

SUMMARY

AB 32 requires the State Department of Health Care Services (DHCS) to extend the telehealth flexibilities in place during the COVID-19 Pandemic. Additionally, AB 32 ensures patients will continue to have access to care by maintaining parity in reimbursement for telehealth services for Medi-Cal managed care plans.

To accomplish this, AB 32 requires DHCS to convene an advisory group of healthcare representatives to provide input on the development of a revised Medi-Cal telehealth policy that promotes the use of telehealth to achieve timely and patient-centered access to care. DHCS must report findings from the evaluation and recommendations to the Legislature no later than July 1, 2025.

BACKGROUND

On March 13, 2020, the Federal government declared a national state of emergency due to the COVID-19 pandemic. To reduce the risk of contracting COVID-19, the emergency order authorized telehealth flexibilities for providers to connect with their patients safely. By reducing in-person contact through using telehealth, patients can continue to access necessary care from their providers without risking exposure to the coronavirus or forgoing treatment altogether.

The increased use of telehealth during the pandemic is a particularly vital resource for "high-risk" individuals, including seniors, those with underlying medical problems, and those living in rural areas. Increased access to telehealth is also critically important to address behavioral health needs. A recent survey by the California Health Care Foundation reported that 76% of safety-net providers (and 79% of all providers) report using telehealth – nearly double the amount from before the pandemic. Additionally, 72% of patients surveyed reported they were more, or just as satisfied with their telehealth visit, and more than 70% of low-income patients would like to have telehealth options post pandemic.

More importantly, telehealth helps expand health care access and address many of our existing health inequities. According to the CDC, the ongoing COVID-19 pandemic has exacerbated existing barriers to healthcare for racial and ethnic minority groups, representing the majority of California's essential workforce. The UCLA Latino Policy & Politics Initiative reports that over 7 million Latinos, African Americans, and Native Americans live in an area experiencing a healthcare provider shortage and as a result could receive improved access to healthcare through expanding telehealth.

For many low-income Californians, the lack of transportation, availability of childcare, ability to take time off work, and cultural differences between patients and providers are often insurmountable challenges preventing people from accessing effective healthcare. As such, the increased use of telehealth will result in greater accessibility of healthcare, in addition to improved continuity of care.

THIS BILL

AB 32 ensures that the expanded telehealth authorizations o state has been granted because of the COVID-19 emergency, that allow for increased access to care remotely through vide and telephone visits in Medi-Cal are not lost. The bill also ensures that medical professionals are paid equitably for this work, regardless of their patient's coverage type or location.

Specifically, AB 32:

- Ensures parity in reimbursement for telehealth services provided through Medi-Cal managed care plans.
- Authorizes a provider to enroll or recertify an individual i specified Medi-Cal programs remotely.
- Requires DHCS to convene an advisory group by Janua 2022, including representatives from community health centers, public hospitals, Medi-Cal managed care plans, consumer groups, labor organizations, behavioral health providers, and counties. The advisory shall provide input on the development of an evaluation and revisions to telehealth that promote the use of telehealth to achieve increased access to high-quality healthcare.
- Requires DHCS to complete an evaluation to assess the benefits of telehealth in Medi-Cal by December 2024, including an analysis of improved access for patients, changes in health quality outcomes and utilization, and best practices for the right mix of in-person visits and telehealth.
- Instructs DHCS to report its findings and recommendations back to the Legislature by July 1, 202

The COVID-19 Pandemic has demonstrated that telehealth is a vital tool in ensuring access to care and must continue beyond the pandemic. AB 32 ensures telehealth can continue increasing access to health care services for all Californians, particularly our Medi-Cal beneficiaries and most vulnerable communities.

AB 32 Fact Sheet

EMAIL: Find Your Representative

Dear _____,

I urge you to support AB 32 (Aguiar-Curry). Increased use of telehealth during the pandemic expanded the capacity of CA's behavioral health system, resulting in increased access and parity. Because it is important to continue access to telehealth even after the pandemic ends, this bill addresses:

- **Parity**: Ensures provision of telehealth services provided through Medi-Cal
- **Best Practices:** Requires CA's Department of Health Care Services to convene an advisory group in order to evaluate and analyze the use of best practices in telehealth to extend and promote increased access to high-quality care.

I encourage you to support this important piece of legislation.

Sincerely,