

Make Telehealth Flexibilities Permanent

In 2020 CMS Implemented telehealth flexibilities that led to a rapid expansion in the use of telehealth by an array of providers, including sleep doctors, and their patients. For example, CMS waived requirements surrounding eligible "originating sites," allowing both telemedicine providers and their patients to be located at their home and remain eligible for Medicare coverage. This flexibility has allowed patients to receive at-home sleep consultations, as opposed to receiving such services in a sleep facility. Additionally, licensure waivers have allowed more providers to practice in states where they formerly were not licensed, expanding access to specialized sleep services.

Studies have shown that **telemedicine** is an effective way to diagnose and treat a variety of sleep conditions, including sleep apnea and insomnia. Pediatric sleep patients have also benefitted from telemedicine, which can be used to manage chronic sleep issues without requiring an in-office visit.

Current telehealth flexibilities expired October 1st, 2025. Without congressional action, patients risk experiencing losing access to safe, quality specialty care provided through telehealth services.

ASK: Make Permanent or Extend Telehealth Flexibilities

Previous legislation we have supported included:

- Permanently remove all geographic restrictions on telehealth services and expand originating sites to include the home and other sites.
- Permanently allow health centers and rural health clinics to provide telehealth services.
- Allow more eligible health care professionals to utilize telehealth services.
- Remove unnecessary in-person visit requirements for tele-mental health services.
- Allow for the waiver of telehealth restrictions during public health emergencies;
 and
- Require more published data to learn more about how telehealth is being used, impacts on quality of care, and how it can be improved to support patients and health care providers.

For additional information contact Eric Albrecht at ealbrecht@aasm.org.