

08/06/2021

Hi REDC Members,

Here is your weekly update!

## I. Telehealth

### • **Bipartisan Policy Center Releases Virtual Care Survey**

- A new national [survey](#) conducted by BPC and Social Sciences Research Solutions (SSRS) shows that access to telehealth kept people out of the ER
  - 14% of respondents who used telehealth said they would have sought care in an ER or urgent care if telehealth was not available and more than half had their primary health issue resolved.
  - One-third of U.S. adults surveyed reported having a telehealth visit for themselves or a dependent last year with Medicare beneficiaries.
  - The most common reason for a telehealth visit was a preventive service, prescription refill, or routine visit for a chronic illness
    - Rural residents said they were more likely to use telehealth for surgical consults than people living in non-rural areas.
  - 8 in 10 adults said they would likely use telehealth in the future.
    - Importantly, 58% of Black respondents said they would likely use telehealth for a routine visit for a chronic illness compared to 45% of white respondents
- The top challenges reported include:
  - 45% of adults reported technology-related difficulties accessing telehealth, including digital literacy
  - Access to high-speed internet
  - Securing the appropriate devices
  - 35% of rural residents and 42% of older adults said access to high-speed broadband was an obstacle, compared to 24% of non-rural residents and 21% of younger adults.

### • **EDOT Act Reintroduced to the House**

- Last week, the Evaluating Disparities and Outcomes of Telehealth (EDOT) During the COVID-19 Emergency Act was reintroduced in the House by Rep. Robin Kelly (D-IL-02). The press release featuring the REDC Consortium can be viewed [here](#).

- This legislation was endorsed last Congress by the REDC Consortium and endorsed again this Congress. The legislation would:
  - Require HH to study the impact of telehealth on utilization, cost, fraud, privacy, and equitable access with the Medicare and Medicaid programs during COVID-19
  - Require that the study include a summary of telehealth utilization data, such as (1) the number of telehealth visits (auto-only and video visits) and in-person visits, disaggregated by service type (mental health, primary care); (2) any changes in utilization compared prior to the public health emergency; 3) demographic characteristics; 4) geographic data on both the patients utilizing the services and the corresponding providers offering the services
  - Direct Medicare to include a description of expenditures and savings and any instances of fraud identified by the HHS Secretary.

## II. ACA

- **American Rescue Plan Cut ACA Premiums by 40%**

- More than 1.5 million people have enrolled in health plans through Healthcare.gov marketplace since the opening of the special enrollment window on February 15
- Another 2.5 million who already had coverage took advantage of expanded assistance created by the ARP stimulus
- Average premiums for returning customers in the 36 states using the federal marketplace dropped from \$104/mo. to \$62/mo.
- The expanded premium assistance is set to expire in 2022, but Democrats continue to fight to extend this through budget reconciliation

## III. NDAA and SERVE Act

- The House is now in August recess while the Senate is hard at work on bipartisan infrastructure and budget reconciliation.
- We are still working hard to get a SERVE Act amendment into the House Full Armed Services Committee Markup on Sept. 1st.
- This Full Committee amendment strategy has been composed of the following steps:
  - (1) See if we can cut the mandatory spending even further, limiting it to active-duty TRICARE beneficiaries
  - (2) Pressuring Chairman Adam Smith (D-[WA-9](#)) in Seattle area and Ranking Member Mike Rogers (R-[AL-3](#)) from Eastern Alabama
  - (3) Securing a Republican from HASC to co-lead w/ Moulton a HASC Amt. for the Sept. 1st Full Committee markup, since Katko isn't on Committee

- (4) Week before the markup, pressure HASC Members to co-sponsor the amendment and vote in favor of it
- Emily on our team has already reached out for your help with more grasstops; **if you have any relationships, know any non-eating disorders organizations or business leaders in the following Congressional districts, please let us know so we can collaborate to put more pressure on the members:**
  - **Bacon (R-[NE-2](#)) SERVE Act Co-Sponsor:** This is NE Nebraska with the main city being Papillion.
  - **Hartzler (R-[MO-4](#)) SERVE Act Co-Sponsor:** This is Western Missouri, the district just south of Kansas City, MO and KS.
  - **Turner (R-[OH-10](#)):** This is Dayton area (SW Ohio)
  - **McClain (R-[MI-10](#)):** This is just north of Detroit.
  - **Stefanik (R-[NY-21](#)):** This is the NE tip of New York.
  - **Gallagher (R-[WI-08](#)):** This is the NE end of Wisconsin.
  - **Ranking Member Mike Rogers (R-[AL-3](#))** This is Eastern Alabama.
- We also were quoted in the Task & Purpose article [Inside the US military's pervasive culture of eating disorders \(taskandpurpose.com\)](#), which has been an essential lobbying/educational tool as we follow up with congressional offices

Have a great weekend!

Best Regards,  
Center Road Solutions Team