

Telehealth Increases Savings & Access, Unless Government Interferes: Oppose HB 1726, SB 724, SB 1043



Mandating the same payment for brick-and-mortar office visits and telehealth visits undermines telehealth's promises of efficiency and innovation

TAHP opposes bills that move Texas to a one-size-fits all health care system. Government rate setting through payment parity interferes with innovation and competition to lower costs.

Telehealth is a cheaper, more affordable option than an office visit, unless government interference destroys market incentives.

Independent experts across the political spectrum say **telemedicine payment parity mandates are harmful to the future of telehealth and do not improve value.**

- **The Brookings Institute stated that** "While payment parity acts as a strong incentive for more physicians to adopt telemedicine platforms, enforcing equal payment could also undermine telemedicine's cost-effectiveness."
- **The Texas Public Policy Foundation** noted that "telemedicine continues to thrive and remain cost-effective in states that do not have parity laws".
- **The Progressive Policy Institute** argues that telehealth payment parity "makes sense during a public health crisis where the goal is to encourage telehealth use, but at other times there's little reason to peg remote rates to in-person rates. Part of the promise of telehealth is that it can reduce costs."
- **The Texas Conservative Coalition Research Institute (TCCRI)** found that "Such mandates, while generally well-meaning, can actually have an adverse impact, creating higher costs and greater hesitance in widespread adoption."
- **The Foundation for Government Accountability** stressed that "it makes little sense that policy should mandate the same payment rate, including in many cases a facility fee, even if the service is delivered from a home office."
- **The Committee for a Responsible Federal Budget** raised concerns that "telehealth services should ideally help providers reduce the cost of care, but payment incentives might lead to more costly care—especially if telehealth services continue to be reimbursed at parity with in-person care."

Telehealth rates are not a market problem that need to be solved with government rate setting — Texas has an increased supply and demand for telehealth that already allows for competitive negotiated private market rates.