CHG Healthcare



6 essential considerations for every telehealth program

Telehealth can be a valuable option for patient care. Not only is it popular—used by 54% of Americans[1]—it can be cost effective, as well.

How Americans value the convenience of telehealth

Among individuals who have used telehealth, **89%** said they were satisfied with their visit and preferred it to in-person care, due to its convenience.

1. Licensing and credentialing for telehealth

Federal and state laws require providers delivering care to be licensed in the state from which they're delivering care (the "distant site") and the state where the patient is located (the "originating site").

Fortunately, most states have cross-state licensing, which include telehealth-specific exceptions that allow providers to offer care in a different state if certain conditions are met.

To deliver telehealth services, a provider must be credentialed for and have privileges at the facility they will be working, regardless of whether they're physically on-site. This can be done by a traditional in-house credentialing process, or through credentialing by proxy. This is true for both rural and urban locations.

2. Controlled substance prescribing

Broader flexibility allowing remote prescribing of Schedule II–V controlled substances without an in-person evaluation remains temporary—currently extended through December 31, 2026—while the DEA finalizes a permanent Special Registration framework, expected around November 2026.

3. Telehealth reimbursements

Reimbursement rates for telehealth services vary by payer and may differ if you're receiving payment from a private payer, Medicare, or a state Medicaid plan.

Some reimbursements may be subject to local parity laws. There are two types of parity:

- **Payment parity,** where visits are reimbursed at the same payment rate, or amount, as if care had been delivered in person.
- **Service (or coverage) parity,** where the same services must be covered for telehealth as they would be if delivered in person.

Parity laws vary by state and are subject to change. For the most up-to-date information, visit *CCHP website.*

4. Billing for telehealth

The billing process for telehealth claims varies by payer. Many states have active legislative efforts to reevaluate telehealth reimbursement policies, both for private payers and CMS services.

- **Medicare:** With this expansion of telehealth care in 2020, Medicare patients were able to receive virtual treatment for a wider range of services from more types of providers. Only services on the Medicare Telehealth Services List are eligible for reimbursement, and CMS updates that list every January 1. While many temporary COVID-era provisions have expired, several remain in effect through December 31, 2027.
- **Medicaid:** Medicaid has both coverage and payment parity laws in place in all 50 states and the District of Columbia.
- **Private insurance:** Each private insurer has its own billing process, but most states have laws requiring private payers to reimburse for telemedicine visits, as well as in-person care.

5. Telehealth technology

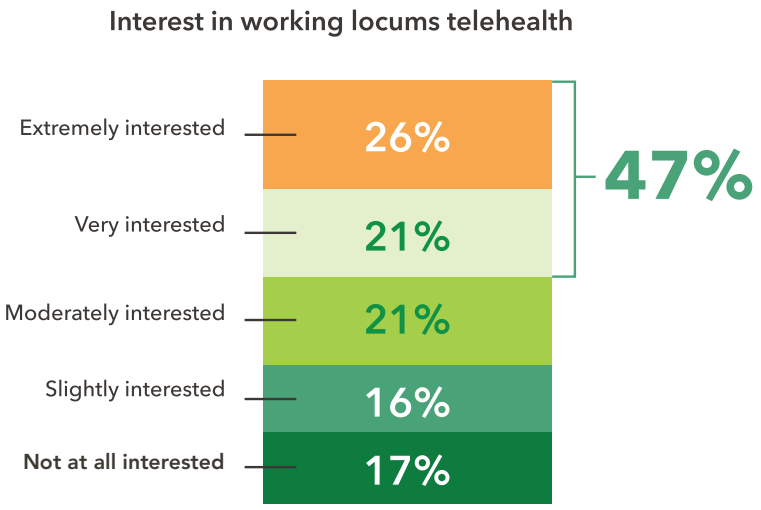
Many healthcare facilities use the telehealth capability built into their electronic health record (EHR) system. Other HIPAA-compliant technologies can be used for telehealth visits, as well. Ask the following key questions before implementing a telehealth technology provider:

- Is your technology HIPAA compliant?
- Can visits be scheduled through the platform?
- Does it require patients to download and install an app?
- Can patients complete any necessary forms through the platform?
- Can patients upload photos or attachments through the platform?
- How does it integrate into your EHR?

For tips on telehealth technology implementation, see the Health Resources and Services Administration's guide: ***Getting started with telehealth.***

6. Locum tenens and telehealth

Many physicians are interested in working telehealth shifts as locums.[2]



Source: *CHG Healthcare Locums Experience Survey,* January 2025

CHG Healthcare staffs more than 130 physician specialties in both hybrid and full telehealth environments in all 50 states and multiple international locations. CHG can stand up an entire staffing pool or supplement an existing physician group, and all providers are screened and credentialed to meet quality requirements.

Interested in learning more about staffing your telehealth program with locum tenens providers? Call CHG at 866.588.5996 or email ecs.contact@chghealthcare.com to learn more.

1. 2024 National Telehealth Survey. Public Opinion Strategies. Mar. 4, 2024. https://pos.org/2024-national-telehealth-survey/

2. CHG Healthcare Locums Experience Survey, January 2025.

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