

119TH CONGRESS
2D SESSION

H. R. 10376

To amend title XVIII of the Social Security Act to establish reporting and transparency requirements for data related to telehealth services under the Medicare program.

IN THE HOUSE OF REPRESENTATIVES

SEPTEMBER 14, 2026

Mr. WALKINSHAW (for himself and Mr. CARTER of Georgia) introduced the following bill; which was referred to the Committee on Energy and Commerce, and in addition to the Committee on Ways and Means, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

A BILL

To amend title XVIII of the Social Security Act to establish reporting and transparency requirements for data related to telehealth services under the Medicare program.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Telehealth Reporting
5 and Transparency Act of 2026”.

1 **SEC. 2. ESTABLISHING REPORTING AND TRANSPARENCY**
2 **REQUIREMENTS FOR TELEHEALTH DATA**
3 **UNDER MEDICARE.**

4 (a) REPORTING AND TRANSPARENCY REQUIRE-
5 MENTS.—Section 1834(m) of the Social Security Act (42
6 U.S.C. 1395m(m)) is amended by adding at the end the
7 following new paragraph:

8 “(11) REPORTING AND TRANSPARENCY RE-
9 QUIREMENTS.—

10 “(A) ANNUAL TELEHEALTH REPORT.—

11 “(i) IN GENERAL.—Not later than 2
12 years after the date of the enactment of
13 this paragraph, and annually thereafter,
14 the Secretary shall submit to the Com-
15 mittee on Energy and Commerce of the
16 House of Representatives and the Com-
17 mittee on Health, Education, Labor, and
18 Pensions of the Senate a report that in-
19 cludes the information specified in clause
20 (ii) in accordance with the requirements in
21 clause (iii).

22 “(ii) INFORMATION SPECIFIED.—For
23 purposes of reports submitted under clause
24 (i), the information specified in this clause
25 is, with respect to claims for telehealth
26 services for which payment was made

1 under this subsection during the 12-month
2 period ending on the date that is 180 days
3 before the date on which such report is re-
4 quired to be submitted—

5 “(I) the total number of such
6 claims;

7 “(II) the geographic distribution
8 of such claims, including—

9 “(aa) with respect to each
10 State, the number of such claims
11 for which the originating site was
12 located in such State;

13 “(bb) the number of such
14 claims for which the originating
15 site was located in a rural area
16 (as defined in section
17 1886(d)(2)(D)); and

18 “(cc) the number of such
19 claims for which the originating
20 site was located in an urban area
21 (as defined in such section);

22 “(III) information with respect to
23 potential causes of any changes of 10
24 percent or more (or such other per-
25 centage as the Secretary may deter-

mine) in the numbers reported under subclause (I), subclause (II)(aa), subclause (II)(bb), or subclause (II)(cc) when compared to the previous 12-month period;

“(IV) the number of such claims disaggregated by the age, race, ethnicity, income level (or such other indicator of income status as the Secretary determines appropriate, including eligibility for the Medicare Savings Program, as defined in section 1144(c)(7), or for the low-income subsidy program under section 1860D–14), disability status, and, to the extent available, preferred language of individuals with respect to whom such claims were made;

“(V) an identification of which populations, if any, experienced rates of utilization of such services that, as determined by the Secretary, fell materially below the national average;

“(VI) to the extent practicable on the basis of Federal broadband avail-

1 ability data available to the Secretary,
2 a description of whether there are any
3 barriers to accessing broadband serv-
4 ices or telecommunication technologies
5 that may have limited access to such
6 services for the populations identified
7 under subclause (V);

8 “(VII) to the extent available,
9 metrics with respect to patient out-
10 comes after receiving such services for
11 disease management, behavioral
12 health, or preventive care;

13 “(VIII) an analysis (not includ-
14 ing individual medical record review)
15 of characteristics of such claims that
16 are indicative of improper billing, in-
17 cluding aberrant billing patterns iden-
18 tified through program integrity ana-
19 lytics;

20 “(IX) a description of any infor-
21 mation with respect to actions taken
22 to detect and prevent fraud, waste,
23 and abuse with respect to payments
24 for such services;

1 “(X) the number of physicians
2 and practitioners who furnished such
3 services;

4 “(XI) the specialties of such phy-
5 sicians and practitioners; and

6 “(XII) any barriers to furnishing
7 such services that are reported by
8 such physicians and practitioners.

9 “(iii) REQUIREMENTS.—For purposes
10 of clause (i), the requirements in this
11 clause are that the Secretary, in preparing
12 a report required by clause (i)—

13 “(I) shall rely on data already
14 available to the Secretary;

15 “(II) shall interpret such data
16 using appropriate context and meth-
17 odology, including by considering ex-
18 ternal factors affecting utilization of
19 telehealth services for which payment
20 is made under this subsection;

21 “(III) shall consult with individ-
22 uals enrolled under this part, physi-
23 cians and practitioners (including phy-
24 sicians and practitioners serving rural,
25 underserved, and low-income popu-

lations), beneficiary advocates, and such other telehealth stakeholders as the Secretary may designate; and

“(IV) may not impose new reporting or administrative requirements on physicians and practitioners for the purposes of gathering data for such report.

“(B) TRANSPARENCY REQUIREMENTS.—

“(i) PUBLIC DASHBOARD.—Beginning not later than 180 days after the first date on which a report is required to be submitted under subparagraph (A), the Secretary shall establish and maintain on the internet website of the Centers for Medicare & Medicaid Services a publicly available dashboard displaying the aggregated information included in the most recent report submitted under such subparagraph in a searchable and downloadable format.

“(ii) METHODOLOGY DISCLOSURE.—Not later than 180 days after each date on which a report is required to be submitted under subparagraph (A), the Secretary shall make publicly available on the inter-

1 net website of the Centers for Medicare &
2 Medicaid Services a description of any
3 standardized methodologies, definitions,
4 and data specifications that were used in
5 the preparation of such report.”.

6 (b) GAO AUDIT.—Not earlier than 3 years after the
7 date of the enactment of this Act and not later than 5
8 years after such date, the Comptroller General shall sub-
9 mit to Congress an audit of the implementation of this
10 Act that includes recommendations on how to improve the
11 quality and usefulness of data gathered with respect to
12 telehealth services for which payment is made under sec-
13 tion 1834(m) of the Social Security Act (42 U.S.C.
14 1395m(m)).

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