



ARIZONA

HEALTH CARE COST CONTAINMENT SYSTEM

Telehealth Advisory Committee Biannual Meeting Minutes

May 21, 2026

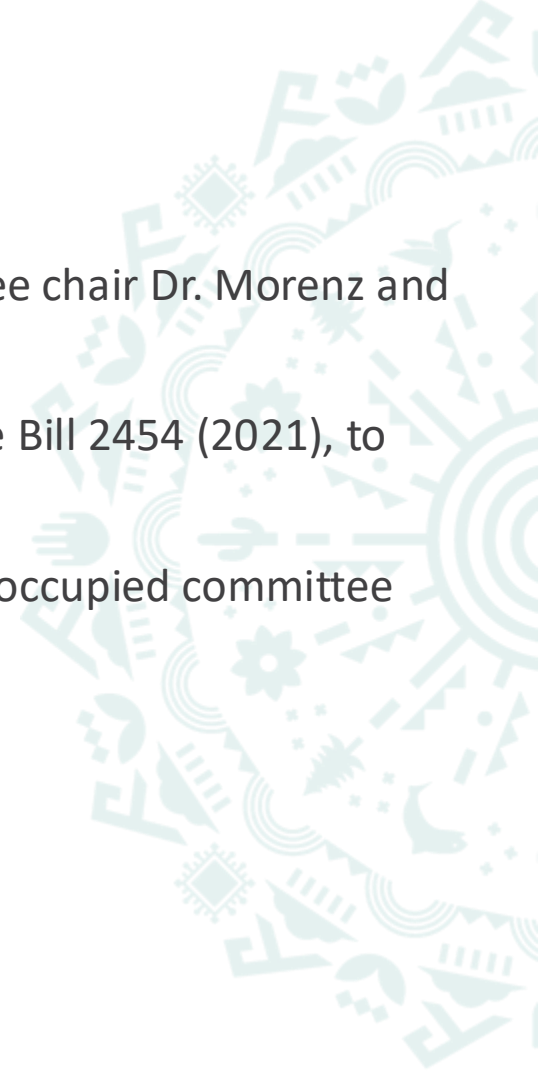
Call to Order

- The meeting was called to order by Dr. Roger Willcox, Medical Director, who also noted that the session was being recorded.



Welcome and Opening Remarks

- Dr. Willcox acknowledged the contributions of former committee chair Dr. Morenz and her role in advancing telehealth initiatives.
- Overview of the committee's purpose, established under House Bill 2454 (2021), to support telehealth development and policy in Arizona.
- Noted ongoing vacancies and encouraged recruitment to fill unoccupied committee positions.



Introductions

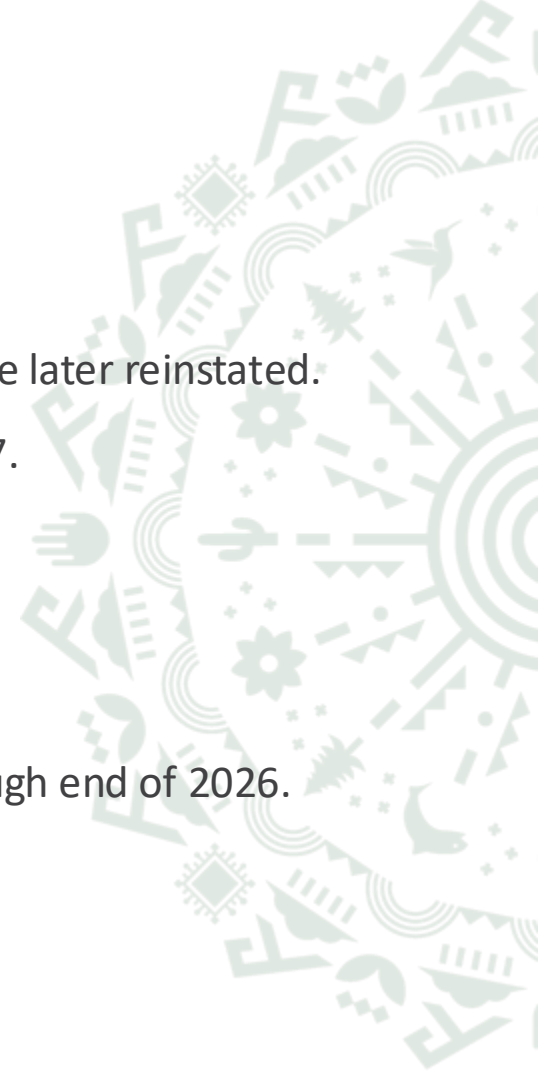
- AHCCCS (Dr. Roger Willcox)
- AHCCCS (Jeanette Datcher)
- Arizona Commission of the Deaf & Hard of Hearing (Nikki Soukup)
- Arizona Occupational Therapy Association (Sue Dahl-Popolizio)
- AZ Autism United (Amy Enriquez)
- AZ State Board of Nursing (Manny Romo)
- GlobalMed (Joel Barthelemy)
- Mayo Clinic (Praneetha Elugunti)
- Midwestern University / AZ Osteopathic Medical Association (Dr. Shannon Scott)
- The CORE Institute / AZ Medical Association (Dr. William Thompson)
- Touchstone Health Services (Kimberly Egan)



Federal & State Telehealth Policy Updates

- CMS / Medicare Updates

- Telehealth flexibilities initially expired in October 2025 but were later reinstated.
- Flexibilities are currently extended through December 31, 2027.
- Continued coverage:
 - Audio-only services
 - Expanded provider eligibility
- Controlled substance prescribing via telehealth extended through end of 2026.



Federal & State Telehealth Policy Updates (Cont)

- Arizona Medicaid (AHCCCS)
 - AHCCCS maintained telehealth coverage without interruptions during federal uncertainty.
 - Decision made to maintain reimbursement parity (especially for video visits).
 - Telehealth reimbursement remained revenue-neutral, avoiding rate reductions.

Telehealth Utilization & Trends

- Telehealth usage remains stable post-pandemic, with slight expected declines compared to peak levels.
- Most common use cases:
 - Behavioral health (e.g., anxiety, autism, ADHD)
 - Chronic conditions (e.g., hypertension, diabetes)
 - Substance use disorders
- Urban areas show higher usage; rural access disparities persist.



Emerging Telehealth Modalities

- Asynchronous Telehealth

- Increasing adoption in:

- Remote patient monitoring
 - Remote therapeutic monitoring
 - Store-and-forward specialty consults

- Emphasis on proper documentation and billing practices.

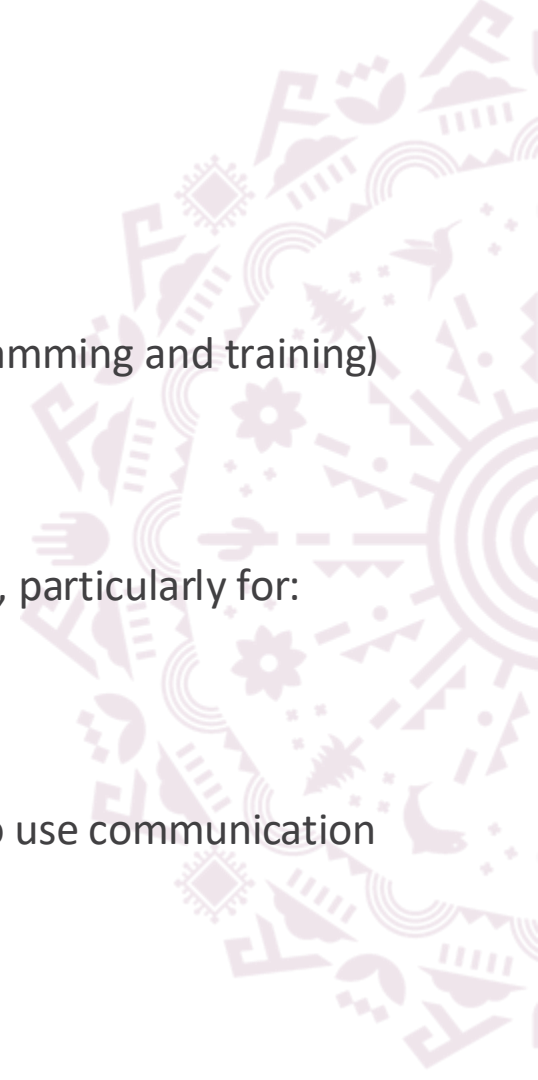
- Audio-Only Services

- Recognized as critical for underserved and vulnerable populations lacking access to technology.
 - Strong committee support for continued coverage.



Key Discussion: CPT Code 92609

- Background
 - CPT 92609 (speech-generating device therapy, including programming and training) was previously closed due to low utilization.
- Issue Presented
 - Amy Enriquez proposed reinstating the code for telehealth use, particularly for:
 - Caregiver training
 - Follow-up support
 - Highlighted improved outcomes when caregivers are trained to use communication devices.



Key Discussion: CPT Code 92609 (Cont)

- Committee Discussion
 - Benefits of telehealth:
 - Increased access for rural patients
 - Reduced burden on families
 - Improved adherence and device utilization
 - Barriers to previous utilization:
 - Limited awareness among providers
 - Focus on evaluations over training
 - Suggested outreach through professional associations to promote use.

Key Discussion: CPT Code 92609 (Cont)

- Recommendation/Motion
 - Committee reached consensus to:
 - Recommend reinstating CPT 92609
 - Limit telehealth use to caregiver training and follow-up
 - Require initial programming to be conducted in person

Open Forum Discussion

- Key discussion points:
 - Continued support for audio-only services to address equity gaps.
 - Concern regarding low telehealth utilization in rural counties.
 - Clarification that utilization data may reflect provider location rather than patient location, potentially underrepresenting rural use.
 - Recognition of ongoing efforts to expand technology access in rural areas.



Action Items

- Submit formal recommendation to reconsider CPT 92609 with telehealth limitations.
- Explore improved outreach strategies to increase provider awareness and usage of CPT codes.
- Investigate methods to better measure rural telehealth utilization (patient vs. provider location).
- Continue monitoring federal telehealth policy changes approaching the 2027 expiration.

Meeting was adjourned at 10:57 am.