



## Bill Summary

AB 688, the Telehealth for All Act of 2025, requires the Department of Health Care Services (DHCS) to utilize Medi-Cal data and other available data sources to produce a publicly available biennial Medi-Cal telehealth utilization report. This report will analyze telehealth access, utilization, quality of care, clinical outcomes, and preventive care. The first report will be published in 2028 and updated every two years thereafter.

## Existing Law

Defines "telehealth" as the mode of delivering health care services and public health via information and communication technologies to facilitate the diagnosis, consultation, treatment, education, care management, and self-management of a patient's health care. Telehealth includes asynchronous store-and-forward transfers and synchronous interactions. (BPC §2290.5)

Requires DHCS to develop a telehealth research and evaluation plan to analyze the relationship between telehealth and access to care, quality of care, Medi-Cal program costs, utilization, and program integrity, prioritizing an equity framework with stratification by geographic and demographic factors. (WIC §14132.725)

## Background

The use of telehealth must be optimized in California by establishing state policy for all residents, beginning with prioritizing data collection from the State's Medi-Cal Program. The purpose of this policy is to increase access to health care and behavioral health by maximizing the use of telehealth to augment and enhance health and medical care for those who are medically underserved, ultimately improving individual patient outcomes and overall population health.

Morbidity and mortality data must be collected to fully inform telehealth policy. Social and economic forces, combined with biological and environmental factors, influence population health. Measuring health outcomes and the role of social determinants of health allows for a more comprehensive approach that considers health inequality and inequity. This approach requires analyzing outcomes based on factors such as medical care, public health interventions, social and physical environments, genetics, and individual behavior.

Fact-finding conferences in 2020 convened by the California Emerging Technology Fund (CETF), CENIC, Partners in Care Foundation, and the California Primary Care Association found that telehealth significantly reduced behavioral health "no-show" rates and that community clinics need additional support. A Skilled Nursing Facility Pilot Project led by CETF found that telehealth reduced costly hospital transfers by 20%, with 94% of patients and families expressing satisfaction. A Federal Communications Commission (FCC) grant to CETF and 12 partners found that 98.5% of providers were comfortable with telehealth but needed more support for data collection and optimization. However, the 2023 Statewide Digital Equity Survey found a decline in telehealth use from 51% in 2021 to 46% in 2023, with low-income households at 42% and those with language barriers at 37%. These findings highlight the need for data collection to evaluate telehealth's impact on patient outcomes and population health.

Additionally, public health research reveals higher mortality and morbidity rates for all leading causes of death in low-income households and communities of color. Limited access to health care and medical expertise contributes to these

disparities. The challenge remains to measure the extent to which telehealth access can reduce adverse health outcomes for economically and medically disadvantaged residents. AB 688 is a crucial step toward achieving health equity.

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### **Need for AB 688**

For California to optimize telehealth, it must establish state policy informed by Medi-Cal program data. The biennial reports will provide insights into who has access to telehealth, how access influences health outcomes, and how utilization varies across populations. These insights will help ensure equitable access to telehealth services for all Californians, particularly those in medically underserved communities. AB 688 is the next essential step beyond reimbursement parity, ensuring data-driven policies that support telehealth expansion and equity.

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### **Support**

California Emerging Technology Fund (CETF)  
(Co-Sponsor)  
California Primary Care Association  
(Co-Sponsor)

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### **For More Information**

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