

Enabling Technology in Long-Term Services and Supports and Medicare



Technology is increasingly being used to support individuals receiving health care at home or services to help them live independently. A growing number of people are now using what is referred to as “enabling technology” — a broad category of tools designed to promote independence and improve quality of life. Whether someone has Medicare, Medicaid, or both, they generally want to live independently for as long as possible, and enabling technology may help achieve this goal.

What is Enabling Technology?

Enabling technology includes a wide range of devices and technologies that assist individuals in living as independently as possible. Some examples of enabling technology include communication systems, mobile applications, wearable smart devices, and remote patient monitoring or support systems.

Although often used interchangeably, “enabling technology” and “assistive technology” are not the same. “Assistive technology” is specifically designed to help people with disabilities overcome barriers and more fully participate in their daily lives. In contrast, “enabling technology” is a broader term. It includes tools that empower any individual, including those without disabilities, to live more independently, especially those recovering at home after hospitalization. In this way, assistive technology is a subset of enabling technology that focuses on addressing the needs of individuals with disabilities.

There is currently no nationally standardized definition of enabling technology, resulting in significant variations in terminology and usage across states, health plans, vendors, and federal agencies. Commonly used overlapping terms include assistive technology, remote patient monitoring, remote supports, and personal emergency response systems. This inconsistency can create barriers to access and confusion about available services.

Enabling technology is essential for enhancing the quality of care and outcomes for individuals receiving long-term services and supports (LTSS). Examples of LTSS are personal care, medication management, and food preparation. The use of enabling technology promotes a person’s independence, enhances their overall quality of life, and helps individuals participate fully in their daily activities.

Enabling Technology Categories

- Adaptive Equipment
- Home Sensors
- Communication Systems
- Mobile Applications
- Wearable or other Smart Devices
- Remote Monitoring or Support Systems
- Other

Additionally, enabling technology provides valuable support to caregivers and direct care workers by easing their workload and reducing reliance on already overstretched resources. These tools are not meant to replace caregivers, but rather to complement their efforts and increase overall efficiency and effectiveness.

Enabling Technology is used to:

- Promote independence
- Improve quality of life and quality outcomes
- Support caregivers and the direct care workforce
- Enable people to participate more fully in their everyday lives

California and New York are among several states that have prioritized the provision of enabling technology for older adults and people with disabilities. The New York Aging Department funds enabling technologies for older adults and their caregivers, providing these innovations to Area Agencies on Aging (AAAs) for testing and evaluation. The state has piloted technologies that help prevent falls and combat isolation and loneliness, among other initiatives. California's Health and Human Services Agency provided devices, connectivity, and digital literacy training to older adults and individuals with disabilities through the "Connections, Health, Aging and Technology (CHAT)" pilot. Through the state's AAAs, iPads were

provided to older adults to reduce social isolation among participants and improve digital literacy. See Advancing States' [The State of Enabling Technology in LTSS Programs in 2024](#) for more information on enabling technology in states' LTSS systems.

Medicare and Enabling Technology

Starting in 2018, Medicare began covering remote patient monitoring, or RPM, which enables the collection and transmission of a patient's health data, such as blood pressure, heart rate, and temperature, directly in their home. RPM encompasses remote physiologic monitoring and remote therapeutic monitoring, enabling clinicians to remotely monitor and manage a person's health condition in real-time, providing timely interventions. Medicare providers may bill for RPM with certain services, including Chronic Care Management and Chronic Pain Management. According to the [U.S. Department of Health and Human Services \(HHS\) Office of the Inspector General](#), Original Medicare beneficiaries must meet three criteria to qualify for services:

- Have a chronic or acute condition that requires monitoring.
- Use an internet-connected device that meets the Food and Drug Administration definition of a medical device and digitally uploads data.
- Collect and transmit health data on at least 16 days every 30 days.

RPM is also utilized in Medicare's [Acute Hospital Care at Home](#) (AHCAH) initiative, launched in November 2020 during the COVID-19 Public Health Emergency. This initiative enables certain

Medicare-certified hospitals to deliver acute inpatient-level care in a patient's home, rather than in a traditional hospital setting. To participate, individuals must receive at least one daily clinician visit (which may be remote after the initial in-person assessment); receive two in-person visits per day, including at least one visit with a registered nurse; and have access to on-demand remote audio communication. The technology used includes RPM devices, tablets (e.g., iPads), and wearable personal emergency response devices. Unless Congress acts, the AHCAH initiative is set to expire on September 30, 2025.

Growth and Oversight Concerns

Since Medicare began covering RPM in 2018, its use has grown rapidly, and so have concerns about misuse and fraud. Between 2019 and 2022, the number of Medicare beneficiaries utilizing RPM [increased tenfold](#), which may be attributed to providers' billing practices and the growing number of individuals accessing Medicare services through telehealth. In comparison, the number of Original Medicare enrollees using remote patient monitoring grew ninefold between 2019 and 2022, and for Medicare Advantage enrollees, the number was 14 times higher. Additionally, the [HHS-OIG study](#) found that 43% of beneficiaries receiving remote patient monitoring did not meet all three required conditions for participation, raising red flags about potential fraudulent billing.

The Senior Medicare Patrol (SMP) has warned of potential fraud, errors, and abuse related to remote patient monitoring. Beneficiaries are urged to check their Medicare statements for Remote Physiological Monitoring or Remote Therapeutic Monitoring services they did not need, did not get, did not agree to, or were from a provider they did not know. For more information, visit SMP's [Remote Patient Monitoring \(RPM\) Fraud](#) page.

Future of Enabling Technology

As the health care landscape evolves, enabling technology is poised to play an even more central role in supporting independent living, improving health outcomes, and alleviating pressure on caregivers and health care systems. Federal and state leaders have expressed an interest in leveraging technology; however, to fully realize these benefits, policymakers, providers, and technology developers must collaborate to establish clear definitions, ensure appropriate oversight, and address barriers such as digital literacy gaps and potential misuse. By proactively addressing these challenges, stakeholders can develop a more effective and person-centered approach to LTSS that leverages technology's full potential.

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