

United States Senate

WASHINGTON, DC 20510

September 23, 2024

The Honorable Charles Schumer
Majority Leader
United States Senate
Washington, D.C. 20510

The Honorable Mitch McConnell
Minority Leader
United States Senate
Washington, D.C. 20510

Dear Leader Schumer and Leader McConnell:

With the end-of-year expiration of telehealth flexibilities rapidly approaching, we write to urge you to prioritize policies that ensure all Medicare beneficiaries retain access to telehealth services. At least 66 Democratic and Republican Senators support permanently expanding telehealth access,¹ and similar provisions have passed on a bipartisan unanimous basis in committees of jurisdiction in the House of Representatives. The Senate must quickly act to advance these policies, which protect access to telehealth services and align with your objective to advance bipartisan legislation that promotes the health and well-being of Americans.

Under your leadership, Congress has recognized the critical role of telehealth in health care delivery by expanding coverage during and after the COVID-19 public health emergency. Most recently in the Consolidated Appropriations Act, 2023, Congress enacted a two-year extension of Medicare telehealth services coverage. This ensured continuity of care and provided time for experts to evaluate the effects of expanded telehealth services. Recent studies by leading researchers and the Medicare Payment Advisory Commission (MedPAC) are clear: Telehealth provides essential access to care and improves outcomes, including reduced emergency department utilization and improved medication adherence.²

Access to telehealth is at-risk, as noted by Centers for Medicare and Medicaid Services (CMS) in the Calendar Year 2025 Medicare Physician Fee Schedule Proposed Rule: “absent Congressional action, beginning January 1, 2025, statutory restrictions on geography, site of service, and practitioner type that existed prior to the COVID-19 PHE will go back into effect”.³ Consequently, Congress must advance policies from our consensus bipartisan bill, the *CONNECT for Health Act*, before the coverage extension lapses. We urge you to prioritize the

¹ Creating Opportunities Now for Necessary and Effective Care Technologies (CONNECT) for Health Act of 2023, S. 2016, 118th Cong. (2023).

² Carter H. Nakamoto, David M. Cutler, Nancy D. Beaulieu, Lori Uscher-Pines, and Ateev Mehrotra. “The Impact Of Telemedicine On Medicare Utilization, Spending, And Quality, 2019–22.” *Health Affairs* 43, no. 5 (April 2024): 691-700, <https://doi.org/10.1377/hlthaff.2023.01142>.

³ Centers for Medicare and Medicaid Services, “Medicare and Medicaid Programs, Calendar Year 2025 Payment Policies under the Physician Fee Schedule and Other Changes to Part B Payment and Coverage Policies; etc.,” Department of Health and Human Services, July 2024.

following provisions from our bill, which would improve American's access to and quality of care:

- **Telehealth should be available to all Medicare beneficiaries, regardless of where they live.** Therefore, Congress should permanently remove geographic restrictions on telehealth services and permit the home and other clinically appropriate settings as originating sites. If budget constraints make permanent policy out of reach, given the significant costs required to ramp up and provide high quality telehealth programs, Congress must provide the maximum extension possible at an adequate length for providers to make necessary investments.
- **Practitioners should be able to provide clinically appropriate telehealth services.** The flexibility to provide telehealth, within state scope of practice laws, is particularly critical given high rates of provider shortages across disciplines.⁴ Therefore, Congress should expand the authority for practitioners eligible to furnish telehealth services.
- **Federally qualified health centers and rural health clinics should be able to provide telehealth services, free from unnecessary barriers and disincentives.** Therefore, Congress should include federally qualified health centers and rural health clinics as distant site providers and telehealth should be integrated into these providers' payment systems.
- **Telemental health services should be accessible, free from barriers.** Telehealth has transformed mental and behavioral health care, now accounting for 40 percent of telehealth services provided under the Medicare Physician Fee Schedule.⁵ Notably, just 20 percent of Medicare beneficiaries with a telemental health visit in the preceding quarter would satisfy the requirements to access these services under current statute.⁶ Therefore, Congress should permanently repeal the six-month in-person visit requirement for telemental health services.
- **Patients receiving hospice care should be permitted to receive assessments by telehealth.** Therefore, Congress should allow for the use of telehealth in the recertification of a Medicare beneficiary for hospice.
- **Medicare beneficiaries and providers should be supported as health care continues to transition.** Therefore, Congress should provide resources to improve beneficiary engagement and health care professional use of telehealth. Congress should also task the Centers for Medicare and Medicaid Services to ensure that telehealth quality is effectively measured, and that limited outlier billing patterns are addressed.

Medicare beneficiaries have come to rely on expanded access to telehealth services and are satisfied with the care they receive.⁷ We must provide patients and clinicians with long-term certainty of their ability to access and provide care through telehealth. The *CONNECT for Health Act* will help us achieve this shared goal and has strong, bipartisan support in the Senate. Further, the Ways & Means and Energy & Commerce Committees have unanimously advanced telehealth legislation. We appreciate your collaboration and leadership on this issue and look forward to working with you to ensure access to telehealth services is retained by the end of 2024.

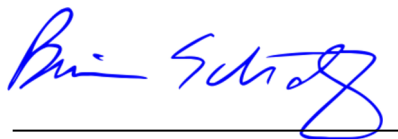
⁴ Health Resources & Services Administration. "Workforce Projections." 2024. National Center for Health Workforce Analysis. <https://data.hrsa.gov/topics/health-workforce/workforce-projections>

⁵ Brian O'Donnell, Ledia Tabor, "Telehealth in Medicare: Status Report" (presentation, Advising the Congress on Medicare Issues, April 11, 2024.)

⁶ Ibid.

⁷ Ibid.

Sincerely,



Brian Schatz
United States Senator



Roger F. Wicker
United States Senator



Benjamin L. Cardin
United States Senator



Cindy Hyde-Smith
United States Senator



Mark R. Warner
United States Senator

cc:

The Honorable Ron Wyden, Chair, Senate Committee on Finance

The Honorable Mike Crapo, Ranking Member, Senate Committee on

Finance