

August 6, 2020

The Honorable Mitch McConnell
Majority Leader
United States Senate

The Honorable Nancy Pelosi
Speaker of the House
United States House of Representatives

The Honorable Charles Schumer
Minority Leader
United States Senate

The Honorable Kevin McCarthy
Minority Leader
United States House of Representatives

Dear Congressional Leaders:

We hope that you and those around you are all safe and well. These past several months have been worse than many of us ever envisioned. Yet as the COVID-19 pandemic continues plaguing our nation, it is also highlighting tremendous opportunities for improvement in our health care system – opportunities we must address now if we hope to avoid similar crises in the future.

With this in mind, we seek your support for two policy reforms that will immediately expand our ability to deliver better health care to more people at a lower cost.

The first reform we seek is a permanent extension of our authority to use telehealth tools to evaluate, counsel, and monitor patients. Since March, when government officials at the state and federal levels expanded this authority on a temporary basis, it has proven to be widely popular, successful, and cost-effective in diagnosing and helping millions of patients – many of whom are economically stressed or lack easy access to a health care facility. Telehealth has also provided significant protection to vulnerable patients with co-existing conditions, who have been able to avoid unnecessary visits to large medical centers.

For example, since the Centers for Medicare and Medicaid Services (CMS) approved telehealth for delivery of more than 80 new services during the pandemic, more than 11.3 million of the program’s beneficiaries have accessed such care from the safety of their own homes.¹ Similarly, the Department of Veterans Affairs (VA) has provided our nation’s veterans with mental health services through 1.1 million telehealth visits.² Nationally, among the general public, nearly one in two consumers have used telehealth to replace a cancelled in-person appointment – a number that will only rise as COVID-19 continues to plague communities across our country.³

¹ Pifer, “Medicare members using telehealth grew 120 times in early weeks of COVID-19,” May 27, 2020

² Ogrysko, “How VA drastically expanded telehealth during the pandemic,” June 24, 2020

³ McKinsey & Co., “Telehealth: A quarter-trillion-dollar post-COVID-19 reality?” May 29, 2020

Permanently expanding medically appropriate telehealth options will dramatically improve our costly and bureaucratic health care system. One analysis found that telehealth programs in the VA reduced hospitalizations by as much as 40 percent, saving \$6,500 for every enrollee.⁴ Beyond the VA, studies show that digitally delivered care is typically about half of the cost of services provided in doctors' offices and urgent care clinics.⁵ Telehealth can also help reduce unnecessary and costly emergency room trips for patients with chronic conditions.⁶

While a great deal of medical treatment still requires physical examination, in-person imaging or surgical intervention, telehealth has already begun to revolutionize health care. This is especially true for preventive health care, as telehealth enables more patients to access the care they need sooner, which in turn allows them to live longer, improves their quality of life, and cuts costs for all stakeholders.

In summary, a permanent extension of current telehealth authority – a policy that enjoys strong bipartisan support – would reduce patient exposure to unnecessary risk, expand access to quality health care for many more patients, enhance the health care system's overall efficiency, and lower the total cost of delivery.

The second reform we seek is related to the first: nationwide reciprocity of medical licensing, to enable Americans everywhere to access the health care they need. Currently, an amalgam of state-by-state licensing requirements prevents most specialists and other medical experts from providing diagnostic services, even second opinions, outside of their own state. This is not only inefficient but unfair to patients, because it denies many people in rural and other under-served areas of America equal access to a full range of medical expertise and care, and increases costs for everyone. During the COVID-19 pandemic, CMS and many states have temporarily removed barriers to care by recognizing the credentials of certified health professionals regardless of which state licensed them. This temporary, live-saving reciprocity should be made permanent.

If this pandemic has taught us anything, it's that a parochial approach to public health undermines everyone's safety. By contrast, if we were to pair reciprocal licensing with the permanent extension of telehealth authority, all health care providers could better collaborate to optimize delivery of health care for all Americans, including those who need to visit hospitals for hands-on treatment, or just need a second opinion to make an informed decision about their own care.

These two related reforms are straightforward and common sense, leveraging the latest medical knowledge with the advancing power of technology. They would also help accelerate the overdue transformation of American health care, which must quickly adapt in significant ways to overcome the current pandemic and better prepare for future challenges.

⁴ [American Hospital Association, "Telehealth: Helping Hospitals Deliver Cost-Effective Care," April 22, 2016](#)

⁵ [Oelrich & Langlands, "The coronavirus pandemic has boosted telehealth," June 8, 2020](#)

⁶ [Wicklund, "Hospital's Telehealth Program Reduces ER Visits," mHealthIntelligence, January 25, 2019](#)

Thank you for your consideration. Now is the time to act, and we look forward to collaborating with all stakeholders to advance these urgent and critical reforms. If you have any questions, please contact us – we would be eager to discuss these reforms with you in greater detail, and how they would benefit your constituents and our nation.

Sincerely,

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