Permanent Telehealth Talking Points

Core Message: Medicare telehealth has become a core part of how seniors, people with disabilities, rural residents, and patients with chronic and behavioral health conditions get care. Yet Congress continues to manage it through short-term extensions that create repeated deadlines, coverage lapses, and uncertainty for patients and providers. Current Medicare telehealth flexibilities are set to expire on December 31, 2027, just over 14 months from now.

The 2025 lapse showed what is at stake: when coverage ended, patients lost access to care and providers who kept serving them faced financial disruption. Congress has the evidence, the bipartisan support, and the time to replace the cycle of temporary fixes with a durable law.

Congress should enact permanent Medicare telehealth coverage and end the cycle of short-term extensions before the current flexibilities expire.

Short-Term Extensions Create Cliffs That Cut Patients Off from Care

Medicare telehealth coverage has lapsed before, and each lapse has disrupted care for real patients and the providers who serve them.

- Congress has repeatedly extended Medicare telehealth flexibilities on a bipartisan, bicameral basis, but extensions have often come at the last minute and coverage has lapsed, including in the fall of 2025.
- CMS data show that about one in four Medicare beneficiaries, roughly 6 to 8 million people, use telehealth each year.
- A Brown University research brief found that the 2025 lapse cut off telehealth access for more than 4 million Medicare beneficiaries.
- The same brief found financial disruption for about 30% of providers who deliver telehealth visits to Medicare beneficiaries.
- Providers who kept serving patients during the 2025 lapse needed Congress and CMS to arrange retroactive payment, and the Alliance urged both to do so.

Telehealth Is Essential Access for the Patients Who Need It Most

Telehealth reaches patients who face distance, frailty, disability, workforce shortages, and transportation barriers to in-person care.

- Telehealth helps patients for whom in-person visits are difficult, including those with frailty, weakened immune systems, neurodegenerative disorders, and other chronic conditions.
- It reduces transportation burdens and missed appointments, especially for people with disabilities or limited mobility.
- Rural patients depend on it to reach specialists who may be a long distance away.
- Telehealth is critical to behavioral health access.
- Telehealth expands access to palliative care, hospice consultations, and advance care planning for patients who are seriously ill and may find it hard to leave home.
- Telehealth infrastructure for frail elders, rural Americans, and people in long-term care, and permanent access is a question of equal care.

Permanent Policy Gives Providers and Health Systems the Certainty to Invest

Care teams cannot build or sustain virtual care programs around repeated expiration dates.

- Providers struggle to plan staffing, scheduling, technology, and patient outreach when the rules may change within months.
- Telehealth is now an established part of care delivery and not an experimental or temporary one.
- Health systems are using virtual care to extend scarce clinical resources. Johns Hopkins' virtual nursing platform, for example, has saved more than 3,000 hours of bedside nurse time and supported more than 16,000 virtual nursing sessions.
- Permanent law would also let CMS and clinicians focus on implementing sound oversight, such as the two telehealth modifiers Congress required in the latest extension, rather than on the next cliff.
    - The Alliance has asked Congress to work with CMS so that modifier implementation does not become overly burdensome and captures meaningful, nuanced data.

Permanence Is a Bipartisan, Evidence-Based Path Forward

Support for ending the cycle of temporary extensions spans parties, patient groups, clinicians, health systems, and employers.

- More than 200 health care organizations, clinicians, and patient advocacy groups signed the Telehealth Voters Pledge, delivered to Congress on July 23, 2026, with Reps. Matsui (D-CA) and Thompson (D-CA) as sponsors and Rep. Miller (R-WV) as a featured speaker.
- Signers and supporters include the American Heart Association, the National Alliance for Care at Home, the American Association of Nurse Practitioners, the National Association of Rural Health Clinics, CVS Health, and Amazon.
- Telehealth is a patient choice issue. A modern, patient-centered system lets patients and clinicians decide together when virtual care is appropriate.
- Cost concerns should be addressed with data, not with another round of temporary patches. The Alliance has noted that CBO cost estimates have not reflected stable utilization and that scoring limits should not block permanent policy, while respecting CBO's role.

The Time to Act Is Now

Congress has the evidence, the coalition, and the runway to act before coverage lapses again.

- The current extension runs through December 31, 2027. Waiting until the last minute has already cost patients access. Congress should act well ahead of the next deadline.
- Coalition members are raising permanent telehealth in town halls, debates, and public and private forums this fall, and are sharing patient stories, clinical data, and economic evidence with policymakers.
- Individuals can use the Alliance's "Tell Congress: Make Telehealth Permanent" letter tool at connectwithcare.org/pledge.