ata ACTION
Telehealth Policy to Transform Healthcare

November 19, 2025

Chair Vern Buchanan
House Ways and Means Health Subcommittee
1139 Longworth HOB
Washington D.C. 20515

Ranking Member Lloyd Doggett
House Ways and Means Health Subcommittee
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Chairman, Ranking Member, and Members of the Subcommittee:

On behalf of ATA Action, the American Telemedicine Association's affiliated trade organization, thank you for convening this important hearing on modernizing care coordination to better prevent and treat chronic disease. We appreciate the Subcommittee's bipartisan commitment to advancing policies that expand access to high-quality, affordable, and patient-centered care.

ATA Action represents a broad national coalition of stakeholders committed to ensuring that digital health, telehealth, and virtual care are fully integrated into the healthcare system. We define telehealth in a comprehensive manner, including real-time audio-visual visits, audio-only visits, remote patient monitoring (RPM), asynchronous tools, digital therapeutics, and AI-enabled clinical support technologies. These modalities work together seamlessly to deliver continuous, coordinated, and personalized care for millions of patients—especially those managing chronic disease.

Telehealth Is Critical to Chronic Disease Management and Cost Reduction

Telehealth is proven to enhance chronic care management by improving early detection, strengthening care coordination, reducing avoidable hospitalizations, and supporting medication adherence. Patients with diabetes, heart failure, hypertension, COPD, cancer, long-COVID, and behavioral health conditions rely heavily on telehealth for routine follow-up, symptom monitoring, and specialist access.

Virtual care also drives cost savings by reducing unnecessary emergency department visits, preventing readmissions, supporting timely interventions through remote monitoring, and enabling hospitals and clinicians to manage higher patient volumes more efficiently. These tools are essential to strengthening the nation's chronic care infrastructure.

Shutdown-Related Telehealth Disruptions Harmed Patients and Chronic Care Programs

The recent expiration of Medicare telehealth flexibilities during the federal government shutdown demonstrated the fragility of temporary policies and the risks they pose to chronic disease care.

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According to a recent ATA/ATA Action survey, providers and hospital systems across the country reported significant consequences, including:

- Reduced telehealth services and, in some cases, complete suspension of virtual care offerings.
- Canceled or rescheduled chronic care visits that disrupted treatment for vulnerable patients.
- Major impacts on long-term care facilities, heart failure programs, behavioral health providers, and oncology follow-up clinics.
- Delays in reimbursement for virtual encounters, threatening the stability of after-hours and chronic care support services.
- Widespread patient confusion and anxiety due to uncertainty about continued access to telehealth.

These disruptions directly undermined chronic disease prevention and coordination, forcing patients to delay follow-ups, miss medication reviews, or navigate significant travel burdens for basic care. The instability of short-term extensions hinders care planning, staffing, innovation, and investments in chronic care infrastructure.

Congress Must Make Telehealth Flexibilities Permanent

To modernize chronic care, reduce costs, and improve patient outcomes, Congress must provide long-term stability. ATA Action strongly urges the Subcommittee and Congress to enact permanent telehealth solutions for Medicare beneficiaries, including:

- Eliminating outdated geographic and originating site restrictions.
- Providing permanent authority for audio-only care where clinically appropriate.
- Expanding the list of eligible providers to include therapists.
- Removing outdated and restrictive barriers such as the in-person requirement for telebehavioral and mental health care.
- Ensuring that Rural Health Clinics and Federally Qualified Health Centers can continue delivering telehealth services to the most vulnerable patients.

The CONNECT for Health Act (S. 1261/H.R. 4602) and the Telehealth Modernization Act of 2025 (H.R. 5081) offer strong bipartisan solutions to achieve these goals and ensure patients do not face further care disruptions.

Telehealth is integral to modern chronic disease management and a proven driver of better outcomes, improved access, and cost savings. The recent shutdown highlighted the urgent need for a permanent solution to avoid further harm to Medicare beneficiaries and the clinicians who care for them.

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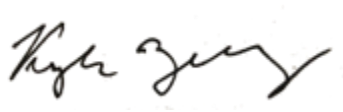
ATA Action thanks the Subcommittee for its leadership and ongoing commitment to strengthening care coordination for millions of Americans living with chronic disease. We stand ready to serve as a resource and partner as you continue this essential work.

Kind regards,



Kyle Zebley
Executive Director
ATA Action

ATA ACTION
601 13th St NW, 12th Floor Washington, DC 20005 | Info@ataaction.org