



National Alliance
for Care at Home

One Voice for Care at Home | Advocacy

Make Telehealth Flexibilities Permanent

Ensure Access to Care at Home

THE ASK

Congress must act to **make permanent** the critical telehealth flexibilities that have dramatically improved access to home health, hospice, and palliative care. **Cosponsor the CONNECT for Health Act (H.R. 4206 and S. 1261).**

TOPLINE

- Telehealth flexibilities have been temporarily extended through September 30, 2025, under current law.
- Without further legislative action, care at home providers will lose the ability to use telehealth to care for, monitor, and recertify Medicare beneficiaries for eligibility. **This means disrupting care access and increasing provider burdens.**
- Telehealth has been successful at expanding access to care, ensuring patients receive the right care at the right time.

RATIONALE

Telehealth has been a lifeline for seniors with serious illnesses and patients in remote or underserved areas, allowing them to avoid unnecessary travel and delays in accessing care. By allowing seniors to access expanded telehealth services, we increase the likelihood that they can remain at home in their community.

One of the flexibilities, the Hospice Face-to-Face (F2F) requirement, is an administrative component of the recertification process to collect clinical information to determine continued eligibility. This critical flexibility enables physicians and nurse practitioners to spend time in direct patient care with more patients based on their individualized care needs.

By removing the originating site requirements, providers can deliver care to patients wherever they live, eliminating the need for eligible patients to travel to a facility for care. While telehealth has traditionally been viewed as a benefit for rural and remote patients, beneficiaries in high-traffic urban areas also require telehealth services. Removing geographic restrictions are an equitable way to ensure all seniors have equal access to telehealth. These two flexibilities are critical for home health providers.

Without action, beneficiaries will face disruptions in care, providers will face unnecessary administrative burdens, and clinicians will lose

valuable tools to manage care efficiently. This risks higher costs to the system and worse outcomes for patients and families.

PRESERVING AND MAKING THESE FLEXIBILITIES PERMANENT:

- Strengthens the healthcare workforce by reducing unnecessary travel and administrative strain.
- Expands equity by reaching patients in frontier, rural, and high-traffic urban areas.
- Ensures care at home remains patient-centered, accessible, and cost-effective.

SOLUTION

The COVID-19 public health emergency showcased the value of increased access to telehealth—especially in a home setting. Congress and federal agencies responded by temporarily waiving key Medicare restrictions:

- **Geographic restrictions**, allowing beneficiaries in all regions—not just rural areas—to receive virtual care.
- **Originating site restrictions**, permitting care from the safety of a patient's home.
- **Hospice F2F encounter flexibility**, enabling providers to conduct this administrative visit via telehealth for recertification of eligibility.

CONNECT for Health Act (H.R. 4206 and S. 1261)

- Permanently extends telehealth flexibilities.
- Eliminates geographic and originating site restrictions for telehealth in Medicare.
- Authorizes HHS to expand eligible telehealth services based on evidence.
- Protects hospice flexibility to conduct F2F recertification encounters via telehealth.

BOTTOM LINE

Congress must act now to protect patients and families by making telehealth flexibilities permanent.

FOR MORE INFORMATION, CONTACT

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