



October 13, 2025

The Honorable John Thune
Senate Majority Leader
U.S. Senate
Washington, DC 20510

The Honorable Mike Johnson
Speaker of the House
U.S. House of Representatives
Washington, DC 20515

The Honorable Chuck Schumer
Senate Minority Leader
U.S. Senate
Washington, DC 20510

The Honorable Hakeem Jeffries
Minority Leader
U.S. House of Representatives
Washington, DC 20515

Dear Senate Majority Leader Thune, Senate Minority Leader Schumer, Speaker Johnson, and House Minority Leader Jeffries:

On behalf of over 1,500 member organizations across 10,000 offices and locations delivering high-quality, person-centered home health and hospice care to individuals wherever they call home, we urge Congress to take swift, bipartisan action to reinstate and extend critical telehealth authorities for home health and hospice providers that have recently expired. The sudden loss of these authorities is creating significant barriers to care and threatening the ability of providers to serve millions of patients across the country, especially in rural and underserved communities.

During the COVID-19 public health emergency (PHE), Congress took decisive action to authorize the use of telehealth for key face-to-face encounters required for both home health and hospice eligibility. The benefits of continued telehealth authority following the end of the PHE has been well recognized, resulting in improved access to care, reduced unnecessary burdens on providers and patients, and allowed clinicians to spend more time delivering direct patient care, especially in regions with severe workforce shortages. With the expiration of these authorities, home health agencies and hospice are again bound by outdated statutory restrictions that limit telehealth use for face-to-face encounters. As a result, many of these encounters must now be conducted in person, even though telehealth remains a clinically appropriate, efficient, and patient-preferred modality.

Home health agencies do not control when or how these encounters are conducted, as they are typically performed by unaffiliated physicians or practitioners. Without renewed authority, agencies are being forced to delay or deny admissions and may have no choice but to discharge patients early, jeopardizing access to needed skilled care and increasing the risk of avoidable hospitalizations and emergency department use. Similarly, hospices must perform face-to-face encounters prior to a patient's third benefit period and each subsequent period thereafter to confirm continued eligibility for hospice. These encounters are administrative in nature and not



billable to Medicare, yet they are necessary for patients to remain on hospice. The loss of telehealth for these encounters is already forcing providers to divert already limited clinical staff away from direct patient care and, in some cases, is preventing them from admitting or continuing to serve patients—again, particularly in rural areas where clinicians are already stretched thin. If a home health or a hospice provider makes the decision to still provide care for a patient where a face-to-face encounter occurred via telehealth during a lapse in authority, the providers risk not being paid (i.e., approximately \$2,000 per month per patient for home health care, and \$10,000 per 60-day benefit period per patient for hospice care).

The expiration of these telehealth authorities threatens care access for patients who depend on home-based services. Providers are left scrambling to adapt, with no meaningful transition period or practical alternatives. This is not just a logistical challenge, it is a direct threat to patient care and health system efficiency. Congress has the power to restore these authorities, as it has done multiple times in the past. We strongly urge you to: (1) act without delay to reinstate the telehealth authorities and make them permanent or provide a multi-year extension to ensure stability and certainty for providers and patients alike; (2) ensure that home health and hospice providers are held harmless by explicitly reinstating the telehealth authority retrospectively.

We cannot afford to move backward. These policies have proven effective, safe, and popular with both providers and the patients they serve. Thank you for your leadership and commitment to protecting access to care in the home. The Alliance and our members stand ready to work with you to advance this urgent legislative priority.

Sincerely,

A handwritten signature in black ink, appearing to read "S. Landers", with a stylized flourish at the end.

Steven Landers, MD, MPH
Chief Executive Officer
National Alliance for Care at Home