

Congress of the United States

Washington, DC 20510

December 12, 2022

The Honorable Nancy Pelosi
Speaker of the House
U.S. House of Representatives
Washington, DC

The Honorable Kevin McCarthy
Republican Minority Leader
U.S. House of Representatives
Washington, DC

Dear Madame Speaker and Leader McCarthy:

We write to you regarding the importance of passing legislation that expands access to health care for millions of Americans. Specifically, we request that you include the bipartisan provisions of the Primary and Virtual Care Affordability Act (H.R. 5541) and the Telehealth Expansion Act (H.R. 5981) in the end of year package currently under consideration.

In 2020, when the COVID-19 public health emergency highlighted the strains placed on our public health system, Congress stepped up to pass long needed reforms that expanded access to high-quality virtual care across the country as part of the bipartisan Coronavirus Aid, Relief, and Economic Security (CARES) Act. Prior to the CARES Act, Americans with high-deductible health plans coupled with Health Savings Accounts (HDHP-HSAs) had to meet the minimum deductible as stipulated by statute before their health plan could cover telehealth services. Section 3701 of the CARES Act waived this requirement through December 31, 2021, enabling health plans to offer telehealth pre-deductible. The provision was subsequently extended through the Consolidated Appropriations Act, 2022 (CAA), but faces yet another cliff on December 31, 2022.

Because of congressional action, more than 80% of health insurance providers began covering telehealth services in HDHPs with no deductible, expanding access to a range of affordable virtual care services for millions of U.S. workers. Currently, more than 20 percent of the U.S. workforce and over 32 million Americans are enrolled in an HSA-qualified HDHP and the telehealth safe harbor is a lifeline for many of them. Families without access to a car, or who live far from medical facilities, or who are at high-risk because of the ongoing pandemic can utilize telehealth as their best option for receiving immediate non-emergency care.

Access to telehealth has also provided a significant portion of the U.S. workforce relief at a time when household costs are rising. Telehealth has allowed families to avoid taking time off from work to travel to and from appointments, and timely care has helped prevent costly visits to urgent care or the emergency room. Unfortunately, those with a high deductible may decide to skip critical preventative services – including primary care and behavioral health services – if the deductible is not waived, often leading to poor health outcomes and more costly care down the line. We also saw confusion and disconnected patient care with the lapse of coverage from

January – March 2022. This was especially noticeable with behavioral and mental health services.

With the HDHP/HSA telehealth safe harbor set to expire on December 31st of this year, we ask that you take immediate action to ensure that American families maintain access to critical health care services on a pre-deductible basis. H.R. 5981 would make the successful telehealth flexibility initially provided under Section 3701 of the CARES Act permanent. H.R. 5541 would extend the telehealth safe harbor and would also allow HDHP first-dollar coverage for in-person primary care services, which ultimately lowers the cost of health care by avoiding unnecessary hospital and emergency room visits, preventing disease progression, and properly managing chronic conditions.

These policies are popular among patients and plan sponsors in the commercial market. For example, a [2021 AHIP survey](#) of health plans found that the top services most likely to improve patient satisfaction if covered pre-deductible for individuals with an HDHP-HSA were primary care visits (81 percent) and the permanent ability to offer telehealth services (64 percent). Giving plans the flexibility to cover both telehealth and in-person primary care services pre-deductible empowers the patient and their treating clinician to determine the most appropriate modality of care. This helps to avoid duplication or unnecessary utilization of care, improves health outcomes, and can ultimately lead to lower health care costs. For these reasons, the extension of this authority through the inclusion of H.R. 5541 and H.R. 5981 in end of year legislation is critical.

We appreciate your consideration of these important, bipartisan pieces of legislation and your continued commitment to managing the ongoing pandemic and increasing health care access for all Americans.

Sincerely,



Bradley Scott Schneider
Member of Congress



Michelle Steel
Member of Congress



Susie Lee
Member of Congress



Terri A. Sewell
Member of Congress



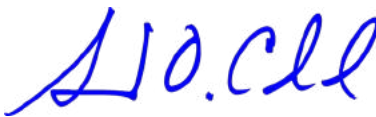
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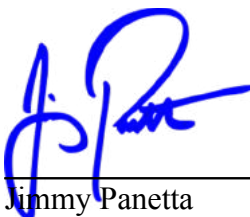
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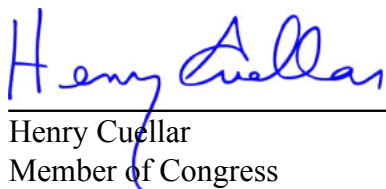
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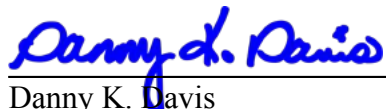
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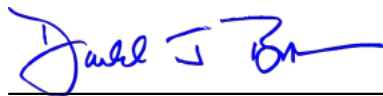
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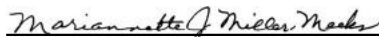
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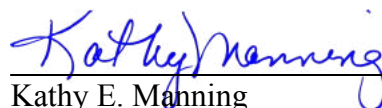
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