

Medicare Telehealth Impact Statements

PATIENT

I am a patient with multiple chronic medical conditions, including a primary immunodeficiency and a rare genetic disease.

I rely on telehealth to reduce my risk of contracting illnesses while sitting in waiting rooms and also to see providers who are hours away from me, because they are the only doctor in the state who has experience with my rare genetic condition.

The uncertainty and discontinuity of telehealth flexibilities has made it very difficult to plan my care with my specialists.

CAREGIVER

My husband has PSP, a Parkinson's like disorder that makes it difficult, and eventually impossible, to walk.

Telehealth is important because it can be a challenge for him to get out to see his doctor, especially when it would be unnecessary for him to be seen in person for medication management.

This isn't just a convenience; this can be **vital** for people who are suffering from diseases that render them with impaired mobility.

PATIENT

I am an individual who is immunocompromised and have sarcoidosis (a rare disease) and rheumatoid arthritis, and gastroparesis.

I had a medical procedure done out of town because no one in town is trained to do it. Consequently because Telehealth was not available to people in cities I had to return to in person for the follow up.

I missed my appointment with my immunologist because of the lapse in Telehealth which puts me without the order for immunology treatment.

The lapse in Medicare telehealth reimbursement had a significant and immediate impact on the patients we serve, many of whom rely on virtual care as their primary or only access point to the healthcare system.

Overall, lapses in Medicare telehealth reimbursement directly lead to canceled or foregone visits, delayed diagnoses, increased emergency department use, and higher risk of preventable harm. For many of the patients we serve, telehealth reimbursement determines whether they receive care at all.

Rocket Doctor

PREVENTATIVE MEDICINE RESEARCH INSTITUTE

Because Medicare reimbursement is our primary source of revenue, we almost had to lay off several people because of this disruption in revenue. Had this continued much longer, we might have had to close down our clinic.

ROCKET DOCTOR

Several patients reported that without telehealth, they would have had no viable alternative for medical care due to geographic isolation, clinic closures, and lack of available primary care providers.

One patient explicitly stated that Rocket Doctor was their only option and that, without it, they "would not have got the care anywhere."

IMAGO REHAB

During the shut down in the fall, we had to put 50% of our business on hold while we waited to find out if Medicare would continue to cover telehealth-based services.

This continual process of approving and lapsing coverage is truly a disservice to the hundreds of thousands of disabled Medicare recipients who rely on telehealth for care accessibility.

I care for a Medicare patient with advanced cancer who lives near the Oregon border, several hours from my clinic in the Bay Area. Recently he was in significant pain. When our team called during a period when telehealth flexibility was temporarily restricted and told him we had to convert his follow-up to an in-person visit, his response was immediate:

I'd rather deal with the pain than make that trip.

Telehealth is not just convenient; for patients like him it is transformative. No one fighting cancer should have to choose between controlling their pain and preserving their time.

CA-based provider

MULTI-STATE HEALTH SYSTEM

An elderly patient developed a small ulcer on his right lower leg. Due to the ulcer's location, driving was difficult, as pressing the gas or brake exacerbated his discomfort. Through a virtual visit, I was able to assess the wound and initiate **timely interventions**.

Over several weeks, I conducted virtual follow-ups every 7-10 days, while home health provided dressing changes every other day. This coordinated approach allowed us to deliver **comprehensive care in the comfort of his home**, avoiding delays in treatment, and preventing further complications.

DUKE HEALTH PROVIDER

In sleep medicine and neurology, we have many patients who should not be driving due to excessive sleepiness (leading to accidents) or other neurological conditions. **These visits via telehealth are critical for their wellbeing and safety.**

The last thing I ever want is for one of my patients to be hurt (or anyone else on the road) because they cannot safely access medical care.

Statutory flexibilities that allow a majority of Medicare telehealth reimbursement lapsed from October 1, 2025 - November 13, 2025.

We are now at another pivotal moment.

These policies impact real health care companies, providers, and patients.