PRINT-American Telemedicine Association leader calls for permanent telehealth fix

A leading national advocate for telehealth is calling on Congress to move beyond temporary fixes and make digital health policy permanent after millions of Medicare patients lost access to virtual care in early October.

Speaking to health care leaders, providers, and medical students at Jump Trading Simulation & Education Center in Peoria, Illinois, Kyle Zebley, senior vice president of public policy for the **American Telemedicine Association (ATA)** and executive director of **ATA Action**, said the lapse wasn't caused by technology or lack of provider readiness but by government dysfunction.

"On October 1st, patients across the country woke up to discover they had lost access to their doctors overnight," Zebley said. "Not because of a technological failure or malpractice, but because of politics. That morning of October 1st, Medicare telehealth flexibilities, the lifeline that millions of Americans had come to rely on simply expired."

The lapse affected Medicare fee-for-service beneficiaries and hospitals, including OSF HealthCare Saint Francis Medical Center in Peoria, participating in the federal Acute Hospital Care at Home program, after Congress failed to extend pandemic-era telehealth flexibilities. Although most private and Medicaid plans continued covering virtual visits, the sudden loss of federal authorization created confusion for providers and patients alike.

During the OSF OnCall Digital Health Symposium keynote speech, Zebley called the situation "a product of dysfunction, delay, and short-term thinking," despite years of bipartisan support for telehealth across both the Trump and Biden administrations.

He stressed telehealth became collateral damage in a larger breakdown of governance.

On the 41st day of a record-long government shutdown, the U.S. Senate voted 60 to 40 to approve a continuing resolution to reopen the government. The measure would fund much of the government through January 30 and provide funding for some agencies through the end of next September. It also includes an extension of a waiver that allows for telehealth services for Medicare recipients.

Need a permanent fix

Zebley has been urging lawmakers to transform temporary extensions into permanent, digital-native health policy that provides stability for hospitals, clinicians, and patients. He argued that bipartisan goodwill alone is not enough. But Zebley is not convinced the rollercoaster ride is over.

"In the short term, it's going to continue to threaten at least to be the rollercoaster that it has been in 2025. We have two political parties at total loggerheads – putting aside their agreement on the efficacy of telehealth and virtual care services – they disagree about almost everything it would seem."

Zebley pointed out OSF HealthCare has been a leader in using digital technology and virtual care to transform health care.

"OSF has continued, through OnCall (its digital health arm), to really push the boundaries of their workforce and push the boundaries of increasing their capacity to do more good for more patients wherever those patients might be. He added, "They really are the gold standard in the use and deployment of technology."

However, he argued health systems such as OSF can't build business models around continuing resolutions. Clinicians can't plan care around congressional calendars. Patients shouldn't have to wonder whether their next therapy session or prescription refill depends on the latest vote count in Washington.

The future of telehealth

His vision for the future – a "digital-native, AI-enabled" health care system, where policy keeps pace with innovation and where care is continuous, data-driven, and equitable. The telehealth leader emphasized technology has advanced rapidly – from remote monitoring and hospital-at-home programs to AI-assisted diagnostics, but policy and regulation have lagged behind. Zebley stressed a permanent fix is needed.

"So that our fellow citizens, yourselves included, can lead healthier, better lives with more individualized care treatment that really is able to take advantage of the massive reams of data that our health care system can and does produce and come up with bespoke health care plans for them that meets them where they are."

The lack of a permanent policy, he argued, doesn't just slow innovation, it denies care.

The ATA and ATA Action are coordinating national coalitions to push for long-term reform, including the ATA Action Advocacy Council, the Virtual Foodcare Coalition, and the Advancing Digital Health Coalition, all aimed at ensuring that digital health access remains stable and bipartisan.

The ATA, through its Center of Digital Excellence is also continuing to collect data to provide additional evidence that telehealth is safe and that it is expanding access to care despite a shrinking workforce.

Despite the current lapse, Zebley is optimistic Congress will eventually make telehealth coverage permanent because he says it is one of the rare success stories of American health policy. He reminded those in the room in Peoria that data has already shown that telehealth is not only popular, but it is efficient, cost-effective and patient-centered.