



August 7, 2020

The Honorable Roy Blunt  
United States Senate  
260 Russell Senate Office Building  
Washington, D.C. 20510

The Honorable Chris Murphy  
United States Senate  
136 Hart Senate Office Building  
Washington, D.C. 20510

Dear Senators Blunt and Murphy

On behalf of the Healthcare Leadership Council (HLC), I am writing to express our strong support for the “Temporary Reciprocity to Ensure Access to Treatment (TREAT) Act.” Thank you for introducing this important legislation that would allow any healthcare practitioner or professional in good standing with a valid practitioners’ license to render services, including telehealth, anywhere for the duration of the COVID-19 pandemic.

HLC is a coalition of chief executives from all disciplines within American healthcare. It is the exclusive forum for the nation’s healthcare leaders to jointly develop policies, plans, and programs to achieve their vision of a 21st century healthcare system that makes affordable high-quality care accessible to all Americans. Members of HLC – hospitals, academic health centers, health plans, pharmaceutical companies, medical device manufacturers, laboratories, biotech firms, health product distributors, post-acute care providers, home care providers, and information technology companies – advocate for measures to increase the quality and efficiency of healthcare through a patient centered approach.

The COVID-19 outbreak will likely remain a significant public health challenge in our nation for some time to come. In addition, the COVID-19 pandemic has created unique challenges for healthcare systems, such as reaching patients who are advised to avoid clinics and hospitals or enabling students to continue care when they are away from campuses.

HLC’s members have been working to provide appropriate staff on short notice in areas most in need. It has been difficult for them to remain fluid and flexible given the administrative burden of meeting licensing requirements for all levels of health care professionals. HLC continues to encourage states to temporarily waive in-state medical licensing and scope of practice requirements for the duration of the COVID-19 pandemic, including to allow nurses to work in a centralized location to provide services, including remote patient monitoring across state lines. Increased access to remote patient monitoring or telehealth services has become a health priority during the COVID-19 pandemic. As local providers have had to suspend in-person visits, many patients have struggled to receive necessary care or treatment. In particular, rural communities and underserved areas suffer from a shortage of providers and often have to travel

significant distances to receive care. While increased telehealth access has helped to alleviate this burden, existing state licensure requirements prevent providers from offering telehealth services to patients in states where they are not currently licensed to practice, despite being able to provide identical services in other states. Creating greater licensure flexibility for providers will help to further close the provider gap in rural communities and ensure that patients in rural communities and underserved areas receive the care they need. We believe this legislation is a great first step to address these challenges, particularly around improving access to care and addressing workforce issues and barriers related to the use of telehealth services.

Thank you again for your work on the TREAT Act and your efforts to improve access to healthcare services amid the COVID-19 pandemic. HLC looks forward to continuing to collaborate with you on this important issue. If you have any questions, please do not hesitate to contact Debbie Witchey at (202) 449-3435 or [dwitchey@hlc.org](mailto:dwitchey@hlc.org).

Sincerely,

A handwritten signature in black ink, appearing to read "Mary R. Grealy". The signature is written in a cursive, flowing style.

Mary R. Grealy  
President