



9/30/2025

The Honorable Mike Johnson
Speaker
United States House of Representatives
Washington, D.C. 20515

The Honorable John Thune
Senate Majority Leader
United States Senate
Washington, D.C. 20510

The Honorable Chuck Schumer
Senate Minority Leader
United States Senate
Washington, D.C. 20510

The Honorable Hakeem Jeffries
Minority Leader
United States House of Representatives
Washington, D.C. 20515

Dear Speaker Johnson, Leader Thune, Leader Schumer, and Leader Jeffries,

Addressing unresolved health care policies will be a top priority for the remainder of the year. As Congress debates the future of the enhanced Advanced Premium Tax Credits (APTCs), BPC Action urges Congress not to overlook the importance of long-term extensions for a suite of other important health care policies. The recommended policies build on those that have garnered bipartisan support in recent years by ensuring continuity of care for vulnerable populations and extending incentives for alternative payment models in Medicare.

Telehealth

BPC Action supports the extension of current Medicare telehealth flexibilities and [recommends](#) that Congress direct the Centers for Medicare and Medicaid Services (CMS) to propose a long-term telehealth reimbursement strategy that balances access to services, quality of care, and cost considerations. BPC Action also supports policies that would distinguish between different types of providers and strengthen guardrails against fraud.

Long-Term Care and Community Supports

BPC and BPC Action support reviving many of the long-term care provisions that comprised last year's never-enacted, bipartisan health extenders package. These include:

- The extension of the Acute Hospital Care at Home initiative, coupled with requirements for robust data collection, which mirrors BPC's [proposals](#) to sustain innovation in care delivery while building an evidence base for future policy.
- Adjustments to the coverage of home and community-based services (HCBS) under Medicaid, which embrace BPC's [recommendation](#) to broaden access to community-based alternatives and improve transparency on HCBS waiting lists.
- Removing certain age restrictions for Medicaid buy-in programs for workers with disabilities directly, which reflects BPC's [call](#) to modernize eligibility and extend coverage to older working adults.

- Continuation of funding for outreach and assistance programs such as SHIPs, ADRCs, and AAAs, which reinforces BPC's [emphasis](#) on improving navigation and consumer support, particularly for low-income and vulnerable populations.

Collectively, these provisions represent a balanced approach toward expanding access, modernizing eligibility, and strengthening supports for individuals needing long-term services.

Physician Payment Reforms

While H.R. 1 included a temporary 2.5% increase to Medicare's physician fee schedule, it did not include policies to extend incentive payments for participation in alternative payment models (APM), which is a key component of any broad-based reform to physician payments. BPC [recommends](#) that policymakers continue to support the movement away from fee-for-service toward more value-driven care. A temporary extension of the Advanced APM participation bonus would address misaligned financial incentives between fee-for-service and participation in APMs. Paired with the temporary increase in physician reimbursements, this would ensure that patients retain access to care while Congress develops broader reforms. Meanwhile, investment in quality measurement represents an important step toward a more streamlined, consistent, and BPC-supported approach that will reduce fragmentation and align metrics across different payers and programs. Together, these provisions reflect a recognition that sustaining physician engagement requires both near-term financial stability and long-term reform of the payment system.

Ensuring Fiscal Responsibility

BPC Action believes that Congress must make fiscally responsible investments to improve patient access and quality of care. BPC Action supports the proposals included in last year's, never-enacted, bipartisan health package that advanced pharmacy benefit manager (PBM) reforms and greater transparency in the pharmaceutical supply chain. Additionally, BPC Action supports inclusion of the modest site-neutral payment policy that would have equalized drug payments in Medicare to medical facilities regardless of ownership as proposed in the *Lower Costs, More Transparency Act*. Both efforts are consistent with BPC's broader priorities of promoting transparency, reducing unnecessary costs, and ensuring that patients and payers alike benefit from a more competitive and accountable health care marketplace.

Bipartisan solutions are essential to addressing America's health care challenges. Lasting, pragmatic reforms require collaboration to ensure a stronger, more sustainable system. We recognize that federal dollars are scarce, especially as fiscal responsibility and government efficiency remain priorities amid soaring debt. However, Congress must make critical investments to ensure seniors' continued access to services, prevent and manage chronic diseases, and support the nation's long-term care needs.



Sincerely,

A handwritten signature in black ink, appearing to read "M. Stockwell", written in a cursive style.

Michele Stockwell
President, Bipartisan Policy Center Action

