



March 8, 2021

The Honorable Frank Pallone
Chairman
Committee on Energy and Commerce
U.S. House of Representatives
2125 Rayburn House Office Building
Washington, D.C. 20515

The Honorable Cathy McMorris Rodgers
Ranking Member
Committee on Energy and Commerce
U.S. House of Representatives
2322 Rayburn House Office Building
Washington, D.C. 20515

The Honorable Anna G. Eshoo
Chairwoman
Subcommittee on Health
Committee on Energy and Commerce
U.S. House of Representatives
2125 Rayburn House Office Building
Washington, D.C. 20515

The Honorable Brett Guthrie
Ranking Member
Subcommittee on Health
Committee on Energy and Commerce
U.S. House of Representatives
2322 Rayburn House Office Building
Washington, D.C. 20515

Re: Hearing on telehealth and urgent need to enact telehealth-focused TREAT Act

Dear Chairman Pallone, Ranking Member McMorris Rodgers, Chairwoman Eshoo, and Ranking Member Guthrie:

On behalf of the higher education associations listed below, which collectively represent approximately 4,300 two- and four-year public and private non-profit colleges and universities, I am writing to follow up the recent hearing of the Subcommittee on Health titled “The Future of Telehealth: How COVID-19 is Changing the Delivery of Virtual Care.”

As the hearing made abundantly clear, even as the use of telehealth and tele-mental health has risen dramatically during the COVID-19 crisis, state licensure rules and complexity remain an impediment to providing much-needed health and behavioral care via telehealth technology to patients, including colleges students, across state lines. In response, Congress should enact the “Temporary Reciprocity to Ensure Access to Treatment Act” (TREAT Act) (H.R. 708/S. 168) as soon as possible to address this urgent problem now while the best path to longer term licensure reform is explored. Three of the five witnesses at the hearing endorsed this bipartisan, bicameral bill.

The COVID-19 pandemic has strained the health care delivery system in unprecedented ways, including because inter-state licensing created significant barriers to remote care. The need for a short-term, uniform fix to address the licensing barriers to interstate care became clear early in the crisis. In response, some governors and most state legislatures issued executive orders and emergency declarations temporarily allowing to varying degrees

limited license reciprocity with other states.¹ As a result, telehealth, virtual health care via video or phone, quickly became a lifeline for college and university students during the pandemic as they returned to their homes, often far from their campus-based physical and behavioral health care providers. But the pandemic has unquestionably taken a toll on college students, with a growing body of evidence showing increased anxiety and depression among young people as they struggle to navigate a college experience very different from the one they envisioned.² A recent report, titled “Constant Stress Has Become the New Normal: Stress and Anxiety Inequalities Among U.S. College Students in the Time of COVID-19,” found that one-third of college students reported emotional distress brought on by the coronavirus pandemic.³ In ACE’s recent Pulse Point Survey, more than 70 percent of college presidents surveyed identified student mental health as among their most pressing issues. Eighty-six percent of all presidents indicated that they are most frequently hearing about students with anxiety, followed by depression (80 percent).⁴

Unfortunately, as several witnesses explained during the hearing, the patchwork of state and local licensing laws that restrict the provision of care across state lines remains a significant barrier to timely access to vital physical and behavioral health care. The result is confusion and delay. As the American Medical Association (AMA) rightly noted in its statement for the telehealth hearing, “[t]he success of telehealth technology adoption during the COVID-19 public health emergency has made it abundantly clear that geographic and origination restrictions on accessing telehealth services are outdated and arbitrary given today’s technology that allows for access to digital tools from anywhere.”⁵ Even in states that have emergency provisions, there is variability in the types of out-of-state providers who may practice and the associated fees or administrative requirements, among other issues.

The AMA referenced the Interstate Medical Licensure Compact (IMLC) in its statement to address the challenges providing telehealth across state lines. For the reasons discussed by Harvard Medical School Professor Mehrotra during the hearing, the IMLC is one potential model as we look for a long-term solution to those challenges. Congress should pass the TREAT Act now to address licensure barriers to telehealth during the Covid-19 public health emergency.

The TREAT Act would create **temporary** license reciprocity for all practitioners or professionals (those who treat both physical and behavioral health conditions) in all states for in-person or telehealth visits during the COVID-19 crisis. Health care professionals would continue to practice within the scope of practice authorized by state and local authorities in the jurisdiction in which the provider holds a valid license. The TREAT Act would merely permit health care providers who hold a valid license in **good standing** in at least one state to practice in all other states for the duration of the emergency declaration. The TREAT Act is intended to apply **only** during the COVID-19 pandemic. At the end of the COVID-19 declared public health emergency, all state licensing practices will revert to normal, following a limited transition period. The bill respects state authority for licensure while providing a carefully tailored solution to meet this unprecedented crisis.

¹ https://energycommerce.house.gov/sites/democrats.energycommerce.house.gov/files/documents/Briefing%20Memo_HE%20Hearing_2021.03.02.pdf

² <https://www.pbs.org/newshour/show/how-the-pandemic-is-impacting-college-students-mental-health>

³ <https://diverseeducation.com/article/200999/>

⁴ <https://www.acenet.edu/Research-Insights/Pages/Senior-Leaders/College-and-University-Presidents-Respond-to-COVID-19-2021-Spring-Term.aspx>

⁵ [Statement of the American Medical Association for telehealth hearing, p. 5](#)

We thank you for your attention to this critical issue and are grateful for your leadership during these troubling times. We look forward to working with you to ensure that the TREAT Act is enacted as soon as possible.

Sincerely,



Ted Mitchell
President

cc: Members of the Energy and Commerce Committee

On behalf of:

ACPA - College Student Educators International
American Association of Community Colleges
American Association of State Colleges and Universities
American Association of University Professors
American College Health Association
American Council on Education
American Dental Education Association
Asociación de Colegios y Universidades Privadas de Puerto Rico (ACUP) [Association of Private Colleges and Universities of Puerto Rico]
Association for University and College Counseling Center Directors
Association of American Colleges and Universities
Association of American Medical Colleges
Association of American Universities
Association of Catholic Colleges and Universities
Association of Governing Boards of Universities and Colleges
Association of Independent California Colleges and Universities
Association of Independent Colleges and Universities in Massachusetts
Association of Independent Colleges and Universities in New Jersey
Association of Independent Colleges and Universities in Pennsylvania
Association of Independent Colleges and Universities of Ohio
Association of Independent Colleges and Universities of Rhode Island
Association of Independent Kentucky Colleges and Universities
Association of Jesuit Colleges and Universities
Association of Public and Land-grant Universities
Association of Vermont Independent Colleges
CINC Foundation
College and University Professional Association for Human Resources
Commission on Independent Colleges and Universities
Commission on Independent Colleges and Universities in New York
Connecticut Conference of Independent Colleges
Consortium of Universities of the Washington Metropolitan Area
Council for Christian Colleges & Universities

Council for Higher Education Accreditation
EDUCAUSE
Georgia Independent College Association
Higher Education Consultants Association
Hispanic Association of Colleges and Universities
Independent Colleges and Universities of Texas
Independent Colleges of Indiana
Independent Colleges of Washington
Kansas Independent College Association
Louisiana Association of Independent Colleges and Universities
Maryland Independent College and University Association
Minnesota Private College Council
NASPA - Student Affairs Administrators in Higher Education
National Association of College and University Business Officers
National Association of Colleges and Employers
National Association of Independent Colleges and Universities
North Carolina Independent Colleges and Universities
Oregon Alliance of Independent Colleges and Universities
South Carolina Independent Colleges & Universities
State Higher Education Executive Officers Association