



UNITED STATES SENATE

FOR IMMEDIATE RELEASE

February 2, 2021

CONTACTS

[Ed Patterson](#) (Murphy), 202-228-2081

[Katie Boyd](#) (Blunt), 202-224-1403

[Dan Black](#) (Dingell), 202-225-4071

[Rebecca Angelson](#) (Latta), 202-225-6405

MURPHY, BLUNT RE-INTRODUCE LEGISLATION TO ALLOW HEALTH CARE PROFESSIONALS TO RENDER SERVICES ANYWHERE THROUGHOUT COVID-19 PANDEMIC

The Bipartisan TREAT Act Removes Licensing Barriers to Fully Fight COVID-19

WASHINGTON—**U.S. Senator Chris Murphy (D-Conn.)**, a member of the U.S. Senate Health, Education, Labor and Pensions Committee, and **U.S. Senator Roy Blunt (R-Mo.)**, along with Representative Bob Latta (OH-05) and Representative Debbie Dingell (MI-12) in the U.S. House of Representatives, on Tuesday re-introduced [legislation](#) that allows any health care professional in good standing with a valid practitioners' license to render services—including telehealth—anywhere for the duration of the COVID-19 pandemic. Currently, health care professionals must maintain licenses in each state in which they render services. While most states have expanded licensing rules and reciprocity, their actions have been varied, inconsistent, and time-limited, which has created licensing barriers to a comprehensive COVID-19 response. [The Temporary Reciprocity to Ensure Access to Treatment \(TREAT\) Act](#) would provide temporary licensing reciprocity for all practitioners or professionals, including those who treat both physical and mental health conditions, in all states for all types of services (in-person and telehealth) during the COVID-19 response.

“Right now, America is in the midst of a public health crisis and Congress should be doing everything we can to allow licensed medical practitioners to provide their services from any location. By providing temporary uniform licensing standards, the TREAT Act seeks to remove bureaucratic red tape and make telehealth more accessible to anyone in need. It’s all hands on

deck until we get this pandemic under control, and this legislation helps us get ahead of the virus,” **said Murphy.**

“Allowing health care providers to treat patients wherever they live will help our health care system better adapt to the physical and mental health challenges of this pandemic,” **said Blunt.** “The TREAT Act eliminates bureaucratic hurdles that impede access to care without taking away any of the safeguards patients should expect. The bill is widely supported by the medical community and is one way we can support their critical work through this public health emergency.”

“Throughout the ongoing COVID-19 pandemic, telehealth is making it easier for Americans to receive needed medical attention, all without leaving their homes,” **said Latta.** “If a health care provider is able to care for a patient remotely, they should be able to so without having to jump through regulatory hoops. I’m proud to work with Senators Blunt and Murphy, as well as my friend Congresswoman Dingell, to introduce the TREAT Act – a bipartisan solution working to ensure patients get the care they need without added complications. It’s a win-win for patients and health care providers across the country.”

“Broadening the scope of care accessible to patients as this virus rages in every corner of our country can and will save lives,” **said Dingell.** “Through the TREAT Act, we can utilize new technology to treat patients while keeping them safe. Enacting policies like this one will be critical in our efforts to end this pandemic.”

The TREAT Act would:

- Enable health care professionals licensed in good standing to care for patients (whether in-person or through telehealth visits) from any state during the current national public health emergency without jeopardizing their state licensure or facing potential penalties for unauthorized practice of medicine;
- Require the health care professional to obtain oral or written acknowledgment of services;
- Require health care professionals who use this authority to notify a state or local licensing board within 30 days of first practicing in a state other than where licensed or certified;
- Preclude any service that is otherwise prohibited by a state where a patient is located and require adherence to specified prescribing requirements of the state;
- Allow authority for a state where a health care professional has practiced under this reciprocity measure to pursue investigations and disciplinary actions, including the ability to exclude a clinician from practicing in the state under the Act;

- Not include health care professionals otherwise licensed under a compact agreement or licensed in the state where the patient resides; and
- Apply the licensure reciprocity for the duration of the COVID-19 public health emergency, followed by a 180-day phase out period.

This legislation is currently supported by: ACPA- College Student Educators International, Active Minds, Alliance for Connected Care, American Association of State Colleges and Universities, American Council on Education, American Hospital Association - American Medical Group Association (AMGA) - AMN Healthcare, Anxiety and Depression Association of America, Ascension, Associated Colleges of the Midwest, Associated Medical Schools of New York, Association for Behavioral Health and Wellness, Association for University and College Counseling Center Directors, Association of American Cancer Institutes, 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 of Ohio, Association of Independent Colleges and Universities of Pennsylvania, Association of Independent Colleges and Universities of Rhode Island, Association of Independent Colleges of Art & Design, Association of Independent Kentucky Colleges and Universities, Association of Jesuit Colleges and Universities, Association of Private Colleges and Universities of Puerto Rico, Association of Public and Land-grant Universities, Association of Vermont Independent Colleges, BJC HealthCare, Bon Secours Mercy Health, Boston College, Canisius College, Children's Hospital Los Angeles, Children's Hospital of Philadelphia, ChristianaCare, City of Hope Comprehensive Cancer Center, Cleveland Clinic, College of the Holy Cross, Columbia University Irving Medical Center, Conference of Boston Teaching Hospitals, Connecticut Conference of Independent Colleges, Consortium of Universities of the Washington Metropolitan Area, Consortium Representing Eating Disorders Care, Cornell University, Council for Christian Colleges & Universities, Council for Higher Education Accreditation, Council of Independent Colleges in Virginia, Council of Independent Nebraska Colleges Foundation, Creighton University, Cystic Fibrosis Foundation, Dana-Farber Cancer Institute, Dartmouth College, Dartmouth-Hitchcock Health, Duke Health, Duke University, EDUCAUSE, Emory University, Fairfield University, Federation of American Hospitals, Fontbonne University, Georgetown University, Georgia Institute of Technology, Great Lakes Colleges Association, Harvard University, Healthcare Leadership Council, Higher Education Consultants Association, Independent Colleges and Universities of Missouri, Independent Colleges of Indiana, Independent Colleges of Washington, Indiana University, Jewish Federations of North America, John Carroll University, Johns Hopkins University & Medicine, Kansas City Art Institute, Kansas Independent College Association, Kennedy Krieger Institute, Lehigh Valley Health Network, Louisiana Association of Independent Colleges and Universities, Loyola Marymount University, Loyola University Chicago, Marquette University, Maryland Hospital Association, Maryland Independent College and University Association, Mass General Brigham, Mayo Clinic, MedChi- The Maryland State Medical Society, Medstar Health, Memorial Sloan Kettering Cancer Center, Missouri Western State University,

Moffitt Cancer Center, Mount Sinai Health System, NASPA- Student Affairs Administrators in Higher Education, National Alliance on Mental Illness, National Association for Children's Behavioral Health, National Association for Equal Opportunity in Higher Education, National Association for Rural Mental Health, National Association of Behavioral Health Care, National Association of College and University Business Officers, National Association of Colleges and Employers, National Association of Independent Colleges and Universities, National Organization for Rare Disorders, Network of Jewish Human Service Agencies, New York State Commission on Independent Colleges and Universities, New York University, North Carolina Independent Colleges and Universities, Northwestern Medicine, NYU Langone Health, One Medical, Oregon Alliance of Independent Colleges and Universities, Penn Medicine, Penn State University, Premier Healthcare Alliance, Primary Care Collaborative, Princeton University, Providence St. Joseph Health, Regis University, RI International, Rockhurst University, Rutgers, The State University of New Jersey, Saint Joseph's University, Saint Louis University, Saint Peter's University, Santa Clara University, Seattle Cancer Center Alliance, Seattle University, SMART Recovery, Society of General Internal Medicine, South Carolina Independent Colleges and Universities, Spring Hill College, Stanford Health Care, Stanford University, State Higher Education Executive Officers Association, The ERISA Industry Committee, The Ohio State University, Wexner Medical Center, The University of Scranton, The University of Texas MD Anderson Cancer Center, Third Eye Health, Trinity Health, Tulane University, UMass Memorial Health Care, University of Chicago, University of Chicago Medical Center, University of Iowa, University of Iowa Health Care, University of Maryland, Baltimore, University of Michigan, University of Pittsburgh Medical Center, University of Rochester, University of San Francisco, University of Southern California, University of Texas Southwestern Medical Center, University of Washington Medicine, UW Health, Vanderbilt University Medical Center, Vizient, Inc., Wake Forest Baptist Medical Center, Washington State Hospital Association, Washington University in St. Louis, Wellesley College, Wisconsin Association of Independent Colleges and Universities, and Yale University.

###