

Policy At A Glance:

Bipartisan Health Care Act (S. 891)

Introduced on March 6, 2025, the Bipartisan Health Care Act (S. 891) aims to extend expiring health provisions and enhance healthcare delivery. This brief provides an overview of the proposed extensions for telehealth flexibilities, the SUPPORT for Patients and Communities Act, and comprehensive care improvements in S. 891.

Introduction

Home to over 330 million individuals, the United States has one of the most intricate healthcare systems globally, built on a complex network of interactions among providers, payers, and patients. As a result, the US healthcare system is continuously growing to meet the changing needs and challenges.¹

In March 2025, the Full-Year Continuing Appropriations and Extensions Act, 2025 (H.R. 1968) was enacted to fund the federal government and avoid a shutdown.² However, it left out several important health-related provisions.³ Introduced on March 6, 2025, the Bipartisan Health Care Act (S. 891) aims to extend expiring health provisions and strengthen America's healthcare infrastructure by expanding access to care and continuing public health programs. It addresses a range of timely health policy issues through targeted reforms and strategic reauthorization, such as modernizing Medicaid, enhancing public health preparedness, and supporting individuals in recovery.⁴

This brief provides an overview of the proposed extensions for telehealth flexibilities, the SUPPORT for Patients and Communities Act, and comprehensive care improvements included in S. 891.

Other Health Initiatives Included in S. 891⁴

Older Americans Act (OAA)

S. 891 extends funding through December 2026 for several programs under the OAA, including State Health Insurance Assistance Programs, Area Agencies on Aging, and Aging and Disability Resource Centers.

Special Diabetes Program

S. 891 reauthorizes the Special Diabetes Program for Type 1 Diabetes and the Special Diabetes Program for Indians through FY 2026.

Acute Hospital Care at Home

S. 891 extends the Acute Hospital Care at Home initiative through December 2029.

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Extending Telehealth Flexibilities

Defined as the remote delivery of healthcare services through technology, telehealth enables patients and providers to connect without being in the same physical location.⁵ It has become a routine, effective, and widely accepted method for delivering healthcare, especially in remote areas. Over the past five years, telehealth use has expanded rapidly due to policy waivers enabling broader service coverage and reimbursement.⁶ Currently, nearly 76% of hospitals nationwide connect patients and doctors remotely via telehealth, compared to 35% a decade ago.⁵

In December 2024, the American Relief Act, 2025 (H.R. 10545) was signed into law, extending many telehealth waivers for three months through March 2025.^{7,8} These extended flexibilities included expanded geographic and originating site eligibility, a broader range of practitioners authorized to provide Medicare-covered telehealth services, increased flexibility for Federally Qualified Health Centers and rural health clinics, a delay in the in-person visit requirement for mental health services delivered via telehealth, and the continued allowance of audio-only telehealth services.^{7,9} Then, in March 2025, the Full Year Continuing Appropriations and Extensions Act, 2025 (H.R. 1968) was signed into law, extending various Medicare telehealth services for an additional six months through September 2025.² For more information on H.R. 1968, please refer to IHPL's May 2025 policy brief titled [*Full-Year Continuing Appropriations and Extensions Act, 2025 \(H.R. 1968\)*](#).

The Bipartisan Health Care Act (S. 891) would extend these telehealth flexibilities, including expanded geographic and originating site eligibility, audio-only services, and broadened range of practitioners that can provide telehealth services through December 2026. Furthermore, S. 891 would delay in-person requirements for mental health services via telehealth to January 1, 2027.⁴

SUPPORT for Patients and Communities Act (H.R. 6)

In 2018, the U.S. experienced a record high of nearly 70,000 drug overdose deaths in a single year.¹⁰ In the same year, the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment (SUPPORT) for Patients and Communities Act (H.R. 6) was signed into law on October 24, 2018. H.R. 6 included dozens of individual bills that direct additional federal resources to help hospitals improve opioid management, increase access to treatment for substance use disorders, and provide alternative options for pain management.^{11,12} In 2023, the number of drug overdose deaths increased to nearly 110,000, highlighting the worsening severity of the nation's overdose crisis.¹⁰ In 2023, lawmakers attempted to reauthorize the SUPPORT for Patients and Communities Act, but it failed to pass in the Senate.^{10,13}



Comprehensive Care Improvements in S. 891

Medicaid and CHIP Enhancements

Over the past decade, Medicaid and Children's Health Insurance Program (CHIP) expansions have been widely adopted, leading to increased access to healthcare, improved coverage, greater affordability, and economic benefits for states and healthcare providers.¹⁴ S. 891 aims to continue to improve access, continuity, and efficiency within the Medicaid program, with an emphasis on children, individuals with disabilities, and vulnerable populations.⁴ A key provision in S. 891 mandates that states create a streamlined process for out-of-state pediatric providers to enroll in Medicaid and CHIP programs without duplicative screenings. This is especially important for children who need access to specialty care that may not be available in their home state.^{4,15}

Removing Restrictions in the Ticket to Work Program

The Ticket to Work (TTW) program is a voluntary Social Security program designed to help individuals aged 18-64 with disabilities who receive Social Security disability benefits, such as Social Security Disability Insurance (SSDI) or Supplemental Security Income (SSI), transition into the workforce. The program offers a range of support services to assist participants in preparing for employment, finding jobs, and maintaining long-term success in the workforce.^{16,17} To further support individuals with disabilities, S. 891 removes the age cap for Medicaid eligibility under the TTW program, enabling more adults to maintain employment without losing healthcare coverage.^{4,15}

SUPPORT for Patients and Communities Reauthorization

Enacted in 2018, the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment (SUPPORT) Act is a federal law that addressed the opioid crisis by improving access to treatment, enhanced oversight of prescription opioids, and expanded coverage for substance use disorder (SUD).¹¹ S. 891 aims to reauthorize the SUPPORT for Patients and Communities Act to ensure continued federal support for programs focused on prevention, treatment, and recovery services.^{4,18} Furthermore, S. 891 aims to sustain funding for local initiatives that provide recovery support and behavioral funding. It also aims to invest in facilities and systems that enhance the delivery of mental health and substance use disorder treatments.^{15,18}

CAREER Act Reauthorization

Introduced as a standalone bill in 2018, the Comprehensive Addiction Recovery through Effective Employment and Reentry (CAREER) Act was later incorporated into the SUPPORT for Patients and Communities Act. The CAREER Act supports individuals transitioning from SUD treatment into independent living and workforce participation.¹⁹ Furthermore, the CAREER Act funds initiatives that connect individuals in recovery with job training, housing assistance, and other essential services that promote long-term stability and reduce the likelihood of relapse.^{20,21} S. 891 aims to reauthorize the CAREER Act to continue these efforts to ensure that these vital services remain available to individuals in recovery.⁴

Conclusion

The Bipartisan Health Care Act of 2025 (S. 891) represents a significant step forward in addressing critical challenges within America's healthcare system. By extending and modernizing key programs like Medicaid, supporting individuals with disabilities, and enhancing substance use disorder recovery initiatives, S. 891 aims to strengthen the healthcare infrastructure and improve access for vulnerable populations.⁴ As this bill is currently still under consideration in Congress, it will need to advance through the legislative process in order to fulfill its potential to support sustainable improvements in care delivery and patient outcomes.

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Did you know?

In 2023, it was reported that over 12.6% of Medicare beneficiaries received healthcare via telehealth.²²



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