

August 14, 2025

The Honorable John Thune
Senate Majority Leader
United States Senate
Washington, DC 20510

The Honorable Mike Johnson
Speaker of the House
United States Capitol
Washington, DC 20515

The Honorable Chuck Schumer
Senate Minority Leader
United States Senate
Washington, DC 20510

The Honorable Hakeem Jeffries
House Minority Leader
United States Capitol
Washington, DC 20515

Dear Senate Majority Leader Thune, Minority Leader Schumer, Speaker Johnson, and House Minority Leader Jeffries:

On behalf of the American Association for Respiratory Care, **we strongly urge you to secure the long-term future of Medicare coverage for Pulmonary Rehabilitation (PR) services, by including a permanent coverage extension in the September government funding package.**

The bipartisan, bicameral legislation Sustainable Cardiopulmonary Rehabilitation Services in the Home Act (HR 783 and S 248) will permanently allow hospital-based programs to deliver virtual cardiopulmonary rehabilitation services to Medicare beneficiaries in their homes.

This offers the stability and certainty needed for hospitals, clinics, and community programs to invest in PR services that improve outcomes for patients with chronic lung diseases such as COPD, interstitial lung disease, and pulmonary hypertension. Now is the time to act to expand access to this proven, cost-effective care model.

PR is a continuation of longstanding, bipartisan policy that has been shown to improve patient outcomes and reduce overall costs. This multidisciplinary program — led by **respiratory therapists**, nurses, exercise specialists, and physicians — is already proven to:

- Reduce hospital admissions and readmissions
- Improve exercise tolerance, lung function, and quality of life
- Enhance patient confidence in managing their disease
- Lower Medicare spending through reduced exacerbations and shorter hospital stays

Patients want to stay active, independent, and engaged in their communities. PR gives them the tools to do so. Making the benefit permanent is not just a policy choice; it is a critical step toward transforming how chronic respiratory care is delivered. A long-term extension sends a clear message to patients, caregivers, and providers that Medicare is committed to supporting therapies that keep people healthier at home and out of the hospital.

The evidence base for PR is clear and compelling:

- **The Centers for Medicare & Medicaid Services** has recognized PR as an essential benefit for patients with chronic respiratory disease.
- **A Cochrane systematic review** found that PR significantly improves exercise capacity, symptoms, and quality of life compared to usual care.
- **An NIH-supported study** showed that participation in PR after hospitalization for a COPD flare-up reduced mortality by nearly 50%.
- **Multiple studies in the *Journal of Cardiopulmonary Rehabilitation and Prevention*** demonstrate PR's ability to reduce healthcare utilization and costs over the long term.

Pulmonary rehabilitation is strongly supported by the evidence, by patients who experience its benefits, and by the clinicians — especially respiratory therapists — who deliver it. A permanent extension of Medicare coverage will provide certainty to programs, encourage investment in staff and facilities, and ensure that all eligible beneficiaries have access to this life-changing service.

We respectfully request that Congress act this September to make PR coverage permanent, so we can build on its success, reach more patients, and reduce the burden of chronic lung disease on our healthcare system.

Warm regards,

A handwritten signature in black ink, appearing to read "Dana Evans", with a stylized flourish at the end.

Dana Evans, MHA, RRT, RRT-NPS, FACHE, FAARC AARC
President, 2025-2026