

December 3, 2025

U.S. House of Representatives
Ways and Means Health Subcommittee
1139 Longworth HOB
Washington, D.C. 20515

Dear Chair Smith, Ranking Member Neal, and Members of the Committee:

On behalf of the undersigned patient, healthcare professional, and industry organizations, we appreciate this opportunity to express our strong support for the Supplemental Oxygen Access Reform (SOAR) Act. This bipartisan, patient-centered legislation - introduced by Representatives David Valadao (R-CA), Gabe Evans (R-CO), Adrian Smith (R-NE) and Julia Brownley (D-CA) - would improve access to supplemental oxygen for more than 1.5 million Americans living with chronic lung and heart conditions. Addressing this issue is critical to our nation's efforts to reduce the burden of chronic diseases.

Supplemental oxygen is a crucial lifeline for many people living with COPD, heart disease, pulmonary hypertension, pulmonary fibrosis and other advanced chronic respiratory diseases and for people awaiting lung transplants. When patients have access to the correct form of supplemental oxygen, it enables them to manage their chronic conditions more effectively and maintain healthy, independent and full lives.

However, since 2011, supplemental oxygen has been part of Medicare's DMEPOS Competitive Bidding Program, which has resulted in significant decreases in payments for oxygen equipment and supplies. Unfortunately, this has created significant barriers for Medicare patients in accessing the correct type and amount of supplemental oxygen they need, as prescribed by their physician. These access challenges undermine effective chronic disease management and contribute to avoidable health crises.

Supplemental oxygen can be delivered in several forms. Portable oxygen concentrators (POCs), which do not provide high flow rates, are inadequate for people with the most significant oxygen needs. Instead, these people must rely on large, heavy tanks of compressed, gaseous oxygen that may provide only a couple of hours of oxygen at a time. Liquid oxygen, which offers a continuous, high-liter flow of oxygen, is a portable, viable alternative. However, due to the inadequate reimbursement rates, suppliers have been unable to continue providing liquid oxygen widely. Without access to appropriate supplemental oxygen, patients are at higher risk for worsening health, avoidable emergency room visits, hospitalizations and the devastating prospect of being homebound.

The SOAR Act would address current barriers patients face in three key ways:

1. **Permanently remove supplemental oxygen from Medicare's competitive bidding process** and establish a separate payment pathway for liquid oxygen and other oxygen therapies. This would ensure that all patients prescribed supplemental oxygen can safely manage their chronic disease and maintain independence.

2. **Strengthen patient protections** by ensuring that people who need respiratory therapy services can access them, establishing an oxygen user's bill of rights, and establishing streamlined national standardized documentation requirements that better combat fraud and abuse and ensure timely patient care.
3. **Improve patient outcomes and stabilize the Medicare market.** The SOAR Act would deliver major health and quality-of-life improvements for people who rely on supplemental oxygen, including decreased mortality, reduced shortness of breath and increased exercise capacity. It would also enable individuals to receive treatment in the home and avoid facility-based care.

No one should struggle to access the oxygen modality that works best for their medical needs and lifestyle, and no one should suffer the pain and fear of struggling to breathe. The SOAR Act prioritizes patient safety and protects the system from fraud, waste and abuse. We urge the Committee to advance the SOAR Act to ensure patients with chronic conditions receive the care they need.

Thank you for your consideration,

Academy of Cardiovascular & Pulmonary Physical Therapy
Alpha-1 Foundation
American Academy of Sleep Medicine
American Association for Homecare
American Association for Respiratory Care
American Association of Cardiovascular and Pulmonary Rehabilitation
American College of Chest Physicians
American Physical Therapy Association
American Lung Association
American Thoracic Society
Children's Interstitial and Diffuse Lung Disease (chILD) Foundation
COPD Foundation
Council for Quality Respiratory Care
Cystic Fibrosis Research Institute
Dorney-Koppel Foundation
National Scleroderma Foundation
NTM Info & Research
Patients Rising
Pulmonary Fibrosis Foundation
Pulmonary Fibrosis Warriors
Pulmonary Hypertension Association
Respiratory Health Association
Running on Air
TSC Alliance
Wescoe Foundation for Pulmonary Fibrosis