



August 7, 2020

The Honorable Ronald Mariano
24 Beacon Street
Room 343
Boston, MA 02133

The Honorable Cindy Friedman
24 Beacon Street,
Room 208
Boston, MA 02133

The Honorable Daniel Cullinane
24 Beacon Street
Room 236
Boston, MA 02133

The Honorable Julian Cyr
24 Beacon Street
Room 309
Boston, MA 02133

The Honorable Randy Hunt
24 Beacon Street
Room 136
Boston, MA 02133

The Honorable Dean Tran
24 Beacon Street
Room 504
Boston, MA 02133

Re: Telehealth Industry Support for Amending Language in House Bill 4916

Dear Leaders of the General Court of the Commonwealth of Massachusetts:

On behalf of the telehealth industry, and the over 400 organizations we as the American Telemedicine Association represent, I am writing to express our concerns with House Bill 4916. Across the country, telehealth providers use telehealth to perform patient evaluations and prescribe medication for new and established patients in fields including primary care, dermatology, radiology, psychology, and ophthalmology. In its current form, House Bill 4916 will create unprecedented barriers to adoption of telehealth in Massachusetts. Currently, the bill would limit telehealth to existing patients previously diagnosed during an in-person visit or a one-time prescription for an "acute" condition. By doing so, the bill arbitrarily discriminates against telehealth. This is a reversal of existing Massachusetts policy and would turn Massachusetts into the only state in the country to have this in-person requirement in statute or regulation.

The ATA is committed to ensuring that everyone has access to safe, affordable and appropriate care when and where they need it, enabling the system to do more good for more people. The ATA represents a broad and inclusive network of technology solution providers, delivery systems and payers, as well as partner organizations and alliances, working together to advance adoption of telehealth, promote responsible policy, advocate

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for government and market normalization, and provide education and resources to help integrate virtual care into emerging value-based delivery models.

Specifically, the industry supports eliminating the requirement for an initial in-person diagnosis before a provider can prescribe for treatment through a telehealth encounter. This unnecessary and arbitrary barrier to care comes at a time when federal and state leaders are encouraging patients to leverage telehealth to promote social distancing and maximize health care resources.

The expanded use of telehealth to combat COVID-19 has brought additional evidence that, when used appropriately, telehealth and the use of safe and effective technologies to deliver remote health care improves health care quality and outcomes at reduced costs. The new realities of health care delivery in a post-COVID-19 world will necessitate the continued use of telehealth to not only support social distancing but also maximize health care resources. We encourage you and your colleagues to support policies that empower providers with the ability to use both synchronous and asynchronous technologies to advance patient access to health care and offer flexibility for future technology developments.

Telehealth provides a pathway to improve access to health care for Massachusetts residents including individuals:

- In rural areas: Individuals may not have the regular transportation or work schedules to allow them to travel long distances for quality health care, particularly specialists.
- With challenging work or family schedules: Individuals may not be able to seek care because of challenging work schedules or commitments to care for children or aging relatives.
- Who are homebound or have limited mobility: Individuals may have difficulty seeking care because of disabilities or health problems.
- Who are embarrassed or anxious in seeking care: Individuals may be intimidated or anxious in seeking in-person care. This may be particularly true for sensitive services including family planning, behavioral health, and particular men's health services.

We believe House Bill 4916, as the language now stands, would have severe unintended consequences, including a disproportionately negative effect on underserved communities who benefit from telehealth as mentioned above. We believe the passage of



this legislation would increase health disparities by creating additional hurdles to access to care by decreasing the availability of telehealth.

We believe House Bill 4916 in its current form would be a big step backward for patients and goes against the Commonwealth's longstanding commitment to fostering innovation, addressing health disparities, and expanding access to quality health care. Please do not hesitate to let us know how we can be helpful to your efforts to advance common sense telehealth in Massachusetts. If you have any questions or would like to further discuss the telehealth industry's perspective, please contact kzebley@americantelemed.org.

Respectfully,

A handwritten signature in black ink that reads "Kyle Zebley".

Kyle Zebley
Director, Public Policy
The American Telemedicine Association