



January 28, 2021

The Honorable Jack Ladyman
Chairman, Arkansas House Public Health, Welfare and Labor Committee
Arkansas House of Representatives
500 Woodlane St.
Little Rock, AR 72201

The Honorable Deborah Ferguson
Vice-Chairwoman, Arkansas House Public Health, Welfare and Labor Committee
Arkansas House of Representatives
500 Woodlane St.
Little Rock, AR 72201

RE: ATA Support and Recommendations for Amendments to 1063/1068

Dear Chairman Ladyman and Vice-Chairwoman Ferguson,

The American Telehealth Association (ATA) applauds you for your efforts to advance telehealth legislation. On behalf of the ATA and the over 400 organizations we represent, I am writing you to suggest amendments to HB 1063.

As the only national organization completely dedicated to advancing telehealth, the ATA is committed to ensuring that patients across the country have access to safe, high-quality, and affordable care when and where they need it, enabling the system to provide care more efficiently and effectively. The ATA represents an inclusive and expanding network of technology solution providers, delivery systems, and payers, as well as partner organizations and alliances, working to advance the adoption of telehealth, advocate for responsible policy, promote government and market normalization, and offer education and other resources to assist in the integration of virtual care into emerging value-based delivery models.

We strongly support that HB 1063 expands the breadth of the Arkansas Telehealth Act and, consistent with the Governor's Executive Order, empowers health care professionals to interact with patients using any telemedicine technology (including audio-only and asynchronous technologies) deemed appropriate by the health care professional. We also support that HB 1063 mandates coverage for patients treated over the phone and that HB 1068 amends the originating site definition to ensure patients are treated entirely from the comfort of their residences.



While the ATA generally supports the policy direction demonstrated in HB 1063, we recommend a few amendments to promote more fully the adoption of telehealth practices in the state.

First, we suggest removing language in Sections 1 and 3 of HB 1063 which requires a provider to have “access to a patient’s personal health record that is maintained by a physician.” Such language could serve as a clinically unnecessary barrier for patients seeking virtual care in the event that he or she does not have their medical records on hand and care is needed. We recommend replacing this requirement throughout the bill with language that simply states that providers have access to the patient’s relevant health information before providing patient care.

Second, we recommend removing the reference to “patient-generated medical history” in establishing a professional relationship found Section 2 of HB 1063. This restriction is arbitrary and discriminatory as it establishes a higher standard for virtual remote care than for in-person care. Today, Arkansans provide patient-generated medical histories at in-person urgent care centers that are used in the establishment of a valid professional relationship. There is no clinical basis to restrict this same practice for virtual remote care.

Third, the ATA suggests that the legislature adds language in House Bill 1063 which sets limits on the Arkansas Medical Board’s discretion in adopting telemedicine-related rules. Any rules implemented by the Medical Board should not be more restrictive than those outlined in this bill, as the Board should not be able to establish a separate standard of care for services provided via telemedicine.

Finally, we want to emphasize our commitment to promoting technology-neutral language in policies regarding telehealth. As patients and consumers seek more convenient and affordable ways to access healthcare, regulatory frameworks should not mandate that providers always use certain types of technology or modalities to deliver virtual care. The expanded use of telehealth to respond to the COVID-19 pandemic has provided additional evidence to demonstrate that, when used appropriately, telehealth and the use of safe and efficient technologies to deliver virtual care to patients improves health care quality and outcomes while reducing the cost of that care. We encourage you and your colleagues to adopt policies that empower providers to utilize an assortment of technologies and allow for flexibility regarding future technological innovations.



Again, we thank you for your strong interest in and support for telehealth. We urge the Arkansas legislature to pass both HB 1063 and HB 1068 with our recommended amendments. In the context of the ongoing pandemic, it is critical that we codify policies that will make it easier for Arkansans to access affordable, quality care from the safety of their homes.

Please do not hesitate to let us know how we can be helpful to your efforts to advance common sense telehealth policy in Arkansas. If you have any questions or would like to further discuss the telehealth industry's perspective, please contact kzebley@americantelemed.org.

Kind regards,

A handwritten signature in black ink, appearing to read "Kyle Zebley".

Kyle Zebley

Public Policy Director

American Telemedicine Association