



January 12, 2021

The Honorable Joshua Miller
Chair, Senate Committee on Health and Human Services
Rhode Island Senate
85 Smith Street
Providence, RI 02903

RE: Comments on SB 4

Dear Senator Miller,

The American Telemedicine Association (ATA) respectfully submits this letter of comment on Senate Bill 4 regarding telemedicine and insurance reimbursement. The ATA, which is the only national organization completely focused on advancing telehealth, is committed to ensuring that everyone has access to safe, affordable, and appropriate care when and where they need it. This enables the healthcare system to do more good for more people in more places.

The ATA has a longstanding position that state policies related to tech-enabled healthcare delivery should be modality neutral and enable a healthcare professional to practice as efficiently and effectively as possible. In short, government should not pick winners and losers in technology innovation; rather, it should set in place good public policy to encourage such innovation. Where government does act to limit the application of technology in healthcare, it should do so based on sound clinical justification. We believe this legislation is a step in the right direction by including audio-only telephone communications in the definition of “telemedicine” and to include those services for reimbursement. However, we urge the Committee to consider a truly technology-neutral approach to defining “telemedicine,” including the removal of the “real-time, two-way electronic audiovisual communications” language currently codified. This allows a practitioner to use their expertise, discretion, experience, and the standard of care to determine which delivery method will be the most effective for each unique patient. Moreover, it reflects current practice across the country and certainly in Rhode Island during the current pandemic.

The ATA further encourages the Committee to consider revising the bill to make clear that providers can use asynchronous technologies where appropriate. Across the country, providers are increasingly relying on asynchronous (or “store and forward”) telehealth technologies – including email, text messaging, and internet telecommunications – to establish patient relationships, perform patient evaluations, and appropriately prescribe medication in many fields.



Rather than discriminating between technologies, the ATA believes there should be no restrictions on which technology can be used to deliver care as long as the technology is adequate to meet the standard of care.

The ATA also supports the language that a carrier shall not impose any unique conditions for coverage delivered via telehealth and opposes any geographic or distance-based restrictions, originating site restrictions, or restrictions on the type of telehealth technology a provider may use to deliver services. The ATA strongly supports the bill's requirement that the definition of "originating site" shall include a patient's home and that a carrier cannot contractually require an alternative originating site. The ATA also supports the language that the use of telehealth technologies should not require prior authorization from a private carrier or Medicaid and that reimbursement cannot be turned down if a service is delivered via telehealth technologies rather than in-person.

Regarding the reimbursement rate for healthcare services rendered through telehealth technologies, the ATA believes that state policy makers should set rational guidelines that are both fair to the provider of such services and reflect the cost savings the effective use of telehealth technologies offers to the healthcare system.

ATA is confident that the recommended changes will increase access to care, increase the efficiency of Rhode Island's health care industry, and will allow more patients to get the care they want, need, and deserve. The changes are essential for the continued growth and use of telehealth technologies and will benefit patients and practitioners alike.

Again, we thank you for your support of telehealth. We encourage the Senate Health and Human Services Committee to amend and pass Senate Bill 4. Particularly during a global pandemic, it is critical that Rhode Island residents can access as many avenues to care as possible within the appropriate standard of care. Please do not hesitate to let us know how we can be helpful to your efforts to advance common sense telehealth policy in Rhode Island. 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 that reads "Kyle Zebley".

Kyle Zebley



Public Policy Director
American Telemedicine Association