



February 8, 2021

The Honorable J. Walter Michel
Chairman, Mississippi Senate Insurance Committee
Mississippi State Senate
400 High St, Room 212-C
Jackson, MS 39201

The Honorable Michael McLendon
Vice-Chairman, Mississippi Senate Insurance Committee
Mississippi State Senate
400 High St, Room 308
Jackson, MS 39201

RE: ATA OPPOSITION TO SENATE BILL 2631

Dear Chairman Michel and Vice-Chairman McLendon

On behalf of the American Telemedicine Association (ATA) and the over 400 organizations we represent, I am writing you to express our concerns about Senate Bill 2631, which amends the definition of telemedicine in Mississippi as it relates to health insurance reimbursement.

The ATA is the only national organization whose mission revolves solely around the advancement of telehealth in the United States. Our utmost priority is ensuring that Americans have the ability to receive affordable, first-rate health care when and where they need it. The expansion of telehealth infrastructure around the country eases strain on the overburdened health care system, enabling it to provide care for millions more patients every year in an efficient and effective manner. The ATA represents a diverse and expansive coalition of technology solution providers and payers, as well as partner organizations and alliances, working together to promote the implementation of telehealth across the country, endorse responsible telehealth policy, encourage government and market normalization, and deliver education and resources designed to further the integration of virtual care through the use of various innovative technologies.

Senate Bill 2631 revises Mississippi's definition of telemedicine as it relates to insurance, stating that care delivered via "HIPAA-compliant telecommunications systems, including information, electronic, and communication technologies, remote monitoring technologies and store-and-forward technologies" is covered by all health insurance and employee benefit plans in the state to the same extent as health care provided in person. However, the proposed legislation also outlines that non-store-and-forward and remote patient monitoring telemedicine must be done using "real-time" audiovisual technology and that audio-only interactions are only covered when audio-video interactions are technologically unavailable and audio-only interactions are considered medically appropriate for the health care service being provided.



The revised insurance title definition of telemedicine in SB 2631 represents a step backward in the development of Mississippi's state telemedicine policy. As patients search for more convenient and affordable ways to access quality health care, state policies should not give preference to certain modalities used to deliver care over others. If the health care professional providing health care services is of the opinion that the standard of care is being met, the professional should be able to use an assortment of innovative technologies to provide care to their patients. Restricting available technology to "real-time" audiovisual modalities would eliminate effective technologies in use today to treat Mississippi patients through telehealth. Further, the use of audio-only technologies should not be confined to certain circumstances so long as the standard of care is upheld throughout the audio-only telemedicine encounter. We urge you and your colleagues to consider the potential consequences of the discriminatory language proposed in Senate Bill 2631, including the construction of arbitrary and clinically unnecessary barriers to Mississippians' access to the health care they need and deserve. The ATA supports the simple revision of the definition of telemedicine in SB 2631 but opposes the subsequent language that carves out certain technologies in certain instances without clear clinical justification.

In the context of the ongoing COVID-19 pandemic, it is essential to make it easier for Mississippi residents to access affordable, quality care through telemedicine. We believe that Senate Bill 2631 would make it substantially more difficult for Mississippians to receive this care. Furthermore, we encourage you and your colleagues to implement telemedicine-related policies that empower providers to utilize an assortment of technologies and allow for flexibility regarding future technological developments. Please let us know if there is anything that we can do to assist you in your efforts to adopt practical telehealth policy in your state. If you have any questions or would like to engage in additional discussion regarding the telehealth industry's perspective, please contact me at kzebley@americantelemed.org.

Kind regards,

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

Kyle Zebley
Public Policy Director
American Telemedicine Association