March 2, 2021

The Honorable Mary Daugherty Adams  
Co-Chair, Connecticut Joint Public Health Committee 
Connecticut Legislative Office Building 
300 Capitol Ave., Room 3000 
Hartford, CT 06106

The Honorable Julie Kushner  
Vice Chair, Connecticut Joint Public Health Committee 
Connecticut Legislative Office Building 
300 Capitol Ave., Room 3800 
Hartford, CT 06106

The Honorable Jonathan Steinberg  
Co-Chair, Connecticut Joint Public Health Committee 
Connecticut Legislative Office Building 
300 Capitol Ave., Room 3004 
Hartford, CT 06106

The Honorable Jillian Gilchrest  
Vice Chair, Connecticut Joint Public Health Committee 
Connecticut Legislative Office Building 
300 Capitol Ave., Room 4000 
Hartford, CT 06106

The Honorable Saud Anwar  
Vice Chair, Connecticut Joint Public Health Committee 
Connecticut Legislative Office Building 300 Capitol Ave., Room 2100 
Hartford, CT 06106

The Honorable Julie Kushner  
Vice Chair, Connecticut Joint Public Health Committee 
Connecticut Legislative Office Building 
300 Capitol Ave., Room 3800 
Hartford, CT 06106

The Honorable Jillian Gilchrest  
Vice Chair, Connecticut Joint Public Health Committee 
Connecticut Legislative Office Building 
300 Capitol Ave., Room 4000 
Hartford, CT 06106

RE: ATA COMMENTS ON HOUSE BILL 6449

Chair Adams, Chair Steinberg, Vice-Chair Anwar, Vice-Chair Kushner, and Vice-Chair Gilchrest:

On behalf of the American Telemedicine Association (ATA) and the over 400 organizations we represent, I am writing to comment on and offer amendments to House Bill 6449 regarding licensure requirements for health care professionals.

The ATA is the only national organization completely focused on advancing telehealth, and we are committed to ensuring that everyone has access to safe, affordable, and high-quality care whenever and wherever they need it. The practice of telehealth empowers the health care system to provide services to millions more patients every year in an efficient and efficacious manner. The ATA represents a broad and inclusive coalition of technology solution providers and payers, as well as partner organizations and alliances, working to advance industry adoption of telehealth, promote responsible policy, advocate for government and market normalization, and provide education and resources to help integrate virtual care into emerging, value-based modalities.

The ATA applauds the legislature’s attempt to create easier pathways for practitioners licensed in other jurisdictions to receive professional licenses from the Connecticut Department of Public Health. In the context of the ongoing pandemic, it is essential that state policymakers are crafting statutory frameworks that allow their constituents to access their much-needed health care services as easily and efficiently as possible. By granting health care professionals who received a license to practice in another state and remain in good standing with that state’s regulatory boards a license to practice in Connecticut, the proposed legislation would make it easier for qualified providers who are newcomers to the state to
deliver health care services to Connecticut patients quickly and effectively without compromising the safety of the recipients of care.

However, the ATA is concerned by some of the language in House Bill 6449. In Section 1, the legislature proposes a residency requirement for health care professionals seeking to obtain a license to practice in Connecticut under the provisions in this bill. Across the country, the practice of telehealth, which allows practitioners to treat their patients remotely, is one of the primary ways in which patients and consumers are finding more affordable and convenient access to health care services. The ATA maintains that arbitrary and clinically unjustified geographic restrictions placed on health care providers, such as the one proposed in House Bill 6449, present barriers to Americans’ access to the high-quality health care they need and deserve. So long as the practitioner is licensed to practice in the state and provides care that meets the standard of care for the condition presented by the patient, state policymakers should not discriminate against certain providers based on their geographic location. We suggest striking the residency requirement from Section 1, lines 5-6 of this bill in order to reflect these recommendations.

We urge the Connecticut legislature to consider our proposed amendment before moving forward with the passage of House Bill 6449. If you have any questions or would like to know more about the telehealth industry’s perspective, please contact me at kzebley@americantelemed.org.

Kind regards,

Kyle Zebley
Public Policy Director
American Telemedicine Association