



April 6, 2021

The Honorable Chris Sneed
Chair, Oklahoma House Insurance Committee
Oklahoma House of Representatives
2300 N. Lincoln Blvd., Room 346
Oklahoma City, OK 73105

The Honorable Dean Davis
Vice Chair, Oklahoma House Insurance Committee
Oklahoma House of Representatives
2300 N. Lincoln Blvd., Room 500
Oklahoma City, OK 73105

RE: ATA SUPPORT FOR SENATE BILL 674

Dear Chair Sneed and Vice Chair Davis:

On behalf of the American Telemedicine Association (ATA) and the over 400 organizations we represent, I am writing to voice our strong support for Senate Bill 674. The ATA is the only national organization whose mission revolves solely around the advancement of telemedicine in the United States. Our utmost priority is ensuring that Americans can access affordable, high-quality health care at any place and any time. The expansion of telemedicine 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 telemedicine across the country, endorse responsible telemedicine 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 674 serves as an important addition to Oklahoma's state telemedicine policy. The proposed legislation would explicitly codify a technology-neutral definition of telemedicine in the state, amending it to include synchronous and asynchronous modalities, remote patient monitoring devices, mHealth, and other electronic means that support clinicians in providing care for their patients.

These changes empower providers to use their clinical judgment to determine the appropriate telemedicine modality, whether real-time or non-real time, necessary to uphold the standard of care and serve in the best interest of Oklahoma patients. Across the country, providers are relying increasingly on asynchronous (or store-and-forward) telemedicine technologies to establish patient relationships, perform patient evaluations, and appropriately prescribe medication in many fields. In addition, providers are utilizing remote patient monitoring technologies to push care out of the hospital, clinic or doctor's office and into the home, where providers can continually monitor, collect and analyze a patient's physiologic data to create care management plans for patients which are especially useful for those with chronic conditions.



Additionally, the use of asynchronous technologies, which can be utilized even with low bandwidth connections, allows patients who lack access to reliable internet connections to communicate effectively with their providers from the comfort of their homes. Across Oklahoma, 635,000 individuals do not have consistent access to high-speed internet connections. By enabling Oklahoma residents to receive telemedicine services through the use of asynchronous modalities, the legislature ensures that unserved and underserved Oklahomans receive the same level of access to quality health care as those who have the ability to utilize more reliable broadband connections.

As patients and consumers seek more convenient and affordable ways to access health care, state policies should not mandate which types of technologies are more appropriate than others in the delivery of health care services. If the health care professional providing telemedicine services determines, based on professional judgment, that the standard of care can be met, then the professional should be able to use an assortment of appropriate technologies to provide care to their patients.

The expanded use of telemedicine to respond to the COVID-19 pandemic has evidenced the usefulness of an assortment of technologies in the practice of telemedicine, allowing practitioners to triage patients with symptoms of the disease and maintain continuous care for those without COVID-19. The permissive definition offered by Oklahoma's legislature will allow practitioners and patients to enjoy the full benefits of these innovative telemedicine technologies and will put your state in an ideal position to adapt to any future technological advances in the field of telemedicine.

The ATA also applauds the legislature's efforts to expand Oklahomans' access to affordable, high-quality care by mandating that insurance plans provide equal coverage for services provided via the appropriate telemedicine technologies. This provision would make it easier for Oklahoma residents to access quality health care whenever and wherever they need it without having to worry about the potential financial burdens associated with receiving that care.

As far as the rate of reimbursement for telemedicine services is concerned, the ATA maintains that state policymakers should set rational guidelines that are both fair to the provider of such services and reflect the cost savings offered to the health care system by the effective use of telemedicine technologies.

We urge you and your colleagues to pass Senate Bill 674 for the advancement of telemedicine in your state. In the context of the ongoing pandemic, it is critical that we codify policies that will make it easier for Oklahomans 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 telemedicine policy in Oklahoma. If you have any questions or would like to discuss further the telemedicine industry's perspective, please contact me at kzebley@americantelemed.org.

Kind regards,

A handwritten signature in black ink, appearing to read "Kyle Zebley", written in a cursive style.

Kyle Zebley
Public Policy Director
American Telemedicine Association