April 22, 2021

The Honorable Deb Patterson
Chairwoman, Oregon Senate Committee on Health Care
Oregon State Senate
900 Court St. NE, S-215
Salem, Oregon 97301

The Honorable Tim Knopp
Vice-Chairman, Oregon Senate Committee on Health Care
Oregon State Senate
900 Court St. NE, S-425
Salem, Oregon 97301

RE: ATA SUPPORT FOR HOUSE BILL 2508

Dear Chairwoman Patterson and Vice-Chairman Knopp:

On behalf of the American Telemedicine Association (ATA) and the over 400 organizations we represent, I am writing to express support for and comment on House Bill 2508 as amended, which requires public and private payers to reimburse health care services provided via telemedicine and revises Oregon’s definition of telemedicine as it relates to insurance.

The ATA is the only national organization completely focused on advancing telemedicine. We are committed to ensuring that everyone has access to safe, affordable, and high-quality care whenever and wherever they need it. This empowers the health care system to provide services to millions more patients each year in an 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.

House Bill 2508 serves as an important advancement in Oregon’s state telemedicine policy. The proposed legislation mandates that public and private insurers reimburse providers for health care services delivered to patients via synchronous and asynchronous technologies alike. Alongside this advancement, the bill creates a more permissive, technology-neutral insurance-related definition of telemedicine, declaring that health services delivered by way of electronic information and telecommunications technologies qualify as telemedicine services to be covered by insurers and enabling the expansion of telemedicine services pursuant to a declared state of emergency.

The ATA applauds the legislature’s efforts to expand Oregonians’ access to affordable, quality health care. In mandating that public and private health plans reimburse providers for health care services delivered via telemedicine, the bill makes it easier for Oregon residents to access high-quality health care
at any place and any time 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. The ATA suggests that the provisions in this legislation regarding reimbursement parity be amended to reflect those guidelines.

Additionally, the ATA commends the legislature for seeking to adopt a technology-neutral definition of telemedicine. Across the United States, patients and consumers are seeking more affordable and efficient ways to access the health care they need. Using innovative telehealth technologies, practitioners and patients are able to interact with each other from the comfort and safety of their private residences. In addition to two-way audio and video communication technologies, asynchronous modalities, such as emails and text messages, enable providers and patients to communicate on their own time, expediting the diagnostic and treatment processes. These technologies, which can function in unserved and underserved areas, enable Oregon residents to receive quality health care services that meet the standard of care even if they are among the 300,000 Oregonians who do not have access to high-speed internet capabilities. In addition, providers relying increasingly on remote patient monitoring technologies to move the locus of care out of the hospital or doctor’s office and into the home, where providers can continually monitor, collect, and analyze a patient’s physiologic data on a real-time basis to create a patient-specific care management plan. We encourage the committee to also conform this telemedicine definition with the occupations and professions code (Title 52).

Most pertinently, the expanded use of telehealth to respond to the COVID-19 pandemic has proven the usefulness and effectiveness of a variety of technological modalities in the delivery of virtual care, allowing practitioners to triage patients with symptoms of the disease and maintain continuous contact with those not afflicted with COVID-19.

With that said, the ATA has questions about the legislature’s proposed definition of “audio only” in Section 2, lines 7-14. While the ATA agrees that facsimile machines, electronic mail, and text messages cannot be classified as audio only technologies, our organization is confused as to why the legislature defined the term “audio only” in part by excluding modalities that do not involve auditory communication. The ATA seeks clarity regarding this definition and continues to urge the legislature to adopt policies that clearly permit providers to use a variety of technologies in the delivery of telemedicine services so long as these modalities enable practitioners to meet the standard of care for the condition as presented by the patient.

We thank you for your efforts to create more navigable pathways for Oregonians to receive quality health care at a reasonable cost through the appropriate use of technology. We urge you and your colleagues to pass House Bill 2508 in the interest of enhancing Oregon’s telemedicine infrastructure in the midst of a health crisis. Please do not hesitate to let us know how we can be helpful in your efforts to advance common-sense telemedicine policy in your state. 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,

Kyle Zebley
Public Policy Director
American Telemedicine Association