January 21, 2022

The Honorable Colleen Burton  
Chair, Florida House Health & Human Services Committee  
Florida House of Representatives  
402 South Monroe Street, Room 422  
Tallahassee, FL 32399

The Honorable Michael Grant  
Vice Chair, Florida House Health & Human Services Committee  
Florida House of Representatives  
402 South Monroe Street, Room 322  
Tallahassee, FL 32399

RE: ATA SUPPORT FOR HOUSE BILL 17

On behalf of the American Telemedicine Association (ATA) and the over 400 organizations we represent, I am writing to express our support for House Bill 17.

The ATA is the only national organization completely focused on advancing telehealth. We are committed to ensuring that everyone has access to safe, affordable, and high-quality health care whenever and wherever they need it. The expansion of telehealth infrastructure enables the health care system to provide services to millions more patients every 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 17 serves as an important expansion of Florida’s state telehealth policy. The bill would revise the restriction on prescribing controlled substances through use of telehealth to include only Schedule II drugs.

The ATA applauds the legislature’s efforts to expand Florida residents’ access to affordable, high-quality health care. Across the United States, patients and consumers are seeking more cost-effective and efficient ways to access the health care they need, and prescriptions are an essential part of that health care experience. Our organization believes that the choice about a patient’s care plan, including the modality of care utilized to render care, should ultimately be the decision of an empowered patient and his or her provider, one that is made in accordance with the standard of care.
With that said, the ATA recognizes that some controlled substances, including those belonging to Schedules I and II, pose a risk of dependency and illegal use. As such, we believe that permanent policy should focus on ensuring that patients can use telehealth technologies to receive prescriptions for substances that fall under the Schedule III and IV categories, as well as Schedule II substances (stimulants only) under certain circumstances and certain medications utilized to treat patients with substance use and opioid use disorders (e.g., suboxone, naloxone, buprenorphine). House Bill 17 serves as an excellent example of a policy which enables patients to access their much-needed prescriptions efficiently and safely without sacrificing safeguards intended to prevent substance abuse.

Again, we thank you for your support of telehealth in Florida. We urge you and your colleagues to pass House Bill 17 in the interest of expanding access to affordable, high-quality health care across the state. Please do not hesitate to let us know how we can be helpful in your efforts to advance common-sense telehealth policy in Florida. If you have any questions or would like to discuss the telehealth industry’s perspective further, please contact me at kzebley@americantelemed.org.

Kind regards,

Kyle Zebley
Vice President of Public Policy
American Telemedicine Association