



January 10, 2022

The Honorable Henry Zuber III
Chairman, Mississippi House Insurance Committee
Mississippi State Capitol
400 High St., Room: 402-C
Jackson, MS 39215

The Honorable Kevin Ford
Vice-Chairman, Mississippi House Insurance Committee
Mississippi State Capitol
400 High St., P.O. Box 1018
Jackson, MS 39215

RE: ATA COMMENTS ON HOUSE BILL 452

Dear Chairman Zuber and Vice-Chairman Ford,

On behalf of the American Telemedicine Association (ATA) and the over 400 organizations we represent, I am writing to comment on House Bill 452.

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 health care whenever and wherever they need it. The proliferation of telemedicine enables the health care system to provide more services to more patients efficiently and effectively. 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 telemedicine, 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 proposed legislation amends the definition of telemedicine in the Insurance Title, removing restrictions on the use of asynchronous modalities to diagnose and treat patients online and enabling providers to deliver health care with HIPAA-compliant telecommunications systems, including information, electronic and communication technologies, remote patient monitoring services, and store-and-forward telemedicine services. The ATA recognizes that this language is more permissive than current statute and supports the Legislature's attempt to expand the range of permissible telemedicine technologies in the state.

However, the ATA notes that the proposed definition of telemedicine in House Bill 452 is not entirely technology-neutral. Were this bill to be passed as currently written, providers who utilize telemedicine



technologies outside of remote patient monitoring services and store-and-forward technologies would be required to use real-time audiovisual modalities, effectively prohibiting them from using real-time audio-only technologies while rendering care.

In many instances, providers utilize real-time audio-only telemedicine technologies in conjunction with other delivery modalities. For instance, dermatologists often view high-resolution photographs of their patient's skin while simultaneously speaking with their patients over the phone. Our organization maintains that a provider should be able to utilize any technologies which, in his or her professional opinion, meet the standard of care for the condition presented by the patient. Precluding real-time audio-only technologies from the list of permissible telemedicine technologies acts as a clinically unsubstantiated barrier to patient care, one which would affect most pertinently individuals in unserved and underserved areas who lack access to the broadband capabilities necessary to operate real-time audiovisual technologies.

While we acknowledge that the bill enables the Commissioner of Insurance to adopt rules and regulations addressing when real-time audio-only interactions are allowable, we believe that the rationale behind such a carve-out is curious. If it is determined that audio-only technologies are appropriate for use in delivering a certain health care service to patients in one part of the state, then it follows that these same technologies are appropriate for use in rendering care to patients with similar conditions in any other place in Mississippi. While the patients and their locations may be different, the exact same standard of care applies. If the intent of the Legislature is to restrict in some manner reimbursement for some health care services provided to Mississippi patients through remote technologies, then it makes more sense to exclude certain services for reimbursement based on a standard of medical necessity rather than to discriminate against certain technologies in the definition of telemedicine.

We thank you for your interest in telemedicine and encourage the Insurance Committee to consider implementing a more technology-neutral definition of telemedicine. In the context of the ongoing pandemic, it is critical that Mississippi residents have easy access to quality health care services at any place and any time. Please let us know if there is anything else that we can do to help you promote practical telemedicine policy in Mississippi. If you have any questions or would like to discuss the telemedicine industry's perspective further, 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
Vice President of Public Policy
American Telemedicine Association