HOUSE BILL 423/SENATE BILL 272 WILL ROLL BACK THE CLOCK AND MAKE ALABAMA THE MOST RESTRICTIVE STATE IN THE COUNTRY WHEN IT COMES TO ACCESS TO TELEHEALTH

Under current law, Alabama physicians using telemedicine are already required to direct patients to an in-person visit when required by the standard of care. The proposed new language §34-24-703(f) [page 8, lines 17-21] adds further requirements and provides that "Unless otherwise provided by rule of the Board of Medical Examiners, a physician who provides telehealth medical services to a patient four or more times per year shall have at least one in-person visit with the patient every 12 months."

- This limit on patients and physicians to three telehealth visit per year is arbitrary and has no clinical support.
- No other state has such a statutory requirement or limitation on access to telehealth.
- This is a slippery slope. Allowing the Board of Medical Examiners to institute a "three visit" rule could result in those interim telehealth visits being reduce to two, one or even none.

CASE EXAMPLE: WHAT THIS REQUIREMENT WOULD MEAN IN PRACTICE

Patients seeing Alabama-licensed physicians located far away or outside the state - a cancer specialist **OR** a psychiatrist - would need to stop at 3 visits, find a new provider, or travel to see the physician in person, even if an in-person visit is not clinically required to meet the standard of care.

Currently, Alabama permits physicians to prescribe controlled substances via telemedicine if they are compliant with the many federal/state regulations and consistent with the standard of care. Proposed 34-24-704(b) (page 9, lines 3-8] would roll this back by providing: "A prescription for a controlled substance may only be issued as a result of a telehealth medical service if the physician or another physician in the same practice or group, within the preceding 12 months, has had at least one in-person encounter with the patient."

- The proposed language exceeds stringent federal law and would preclude patients physically located in a clinic/healthcare facilities from seeing off-site specialists who can prescribe controlled substances.
- Patient safety could be achieved through the other guardrails in the bill and the many existing federal and state restrictions. If Alabama wants to restrict specific controlled substances via telehealth (or require an in-person exam), those controlled substances should be listed.

CASE EXAMPLE: WHAT THIS REQUIREMENT WOULD MEAN IN PRACTICE

Alabama licensed-physicians have safely treated patients with opioid use disorder via telemedicine throughout the pandemic and increased access to clinically appropriate medication. The new in-person mandate means some paitents could lose access to treatment and disrupt continuity of care.

PROTECT ALABAMA PATIENTS' ACCESS TO TELEHEALTH SERVICES!

VOTE NO ON HB 423 / SB 272

