



March 7, 2023

The Honorable Julie VanOrden  
Chair, Senate Health & Welfare Committee  
Idaho Legislature  
700 West Jefferson Street; Room WW54  
Boise, Idaho, U.S.

**RE: ATA ACTION SUPPORT FOR HOUSE BILL 162**

Dear Chair VanOrden and members of the Senate Health & Welfare Committee,

On behalf of ATA Action, I am writing you to express our support for House Bill 162 relating to telemedicine.

ATA Action, the American Telemedicine Association's affiliated trade association focused on advocacy, advances policy to ensure all individuals have permanent access to telehealth services across the care continuum. ATA Action supports the enactment of state and federal telehealth policies to secure telehealth access for all Americans, including those in rural and underserved communities. ATA Action recognizes that telehealth and virtual care have the potential to truly transform the health care delivery system – by improving patient outcomes, enhancing safety and effectiveness of care, addressing health disparities, and reducing costs – if only allowed to flourish.

HB 162 serves as a rational expansion of Idaho's state telemedicine policy. The proposed legislation enables providers to establish prescriber-patient relationships via telemedicine for the purpose of prescribing. This bill also revises the State's prescribing rules to include asynchronous telehealth services to include non-static, online questionnaires and consultations outside of an ongoing clinical relationship. Finally, HB 162 is a step forward for cross state telehealth practice in Idaho.

ATA Action appreciates the validation of prescriber-patient relationships established via telehealth. Across the U.S., modern modality-neutral prescribing legislation has expanded patient access to prescription medications in a safe manner. Our organization believes that the choice about a patient's care plan, including the modality utilized to render care, should ultimately be the decision of an empowered patient and their provider, made in accordance with the standard of care. HB 162 is an example of a policy which enables patients to access their much-needed prescriptions efficiently and safely without sacrificing safeguards intended to prevent substance abuse.

Additionally, ATA Action supports the update to Idaho's prescribing rules to include additional asynchronous telehealth services, including the use of non-static, online questionnaires and consultations outside of an existing clinical relationship. Asynchronous telehealth interactions allow patients and providers to communicate and exchange important health information when it's most convenient, without the need for a "real-time" or "synchronous" interaction. These asynchronous interactions are proving vital for serving the needs of both rural and underprivileged communities. Synchronous patient interactions often depend on access to dependable broadband connections with sufficient internet speeds, which can be problematic for rural patients. Additionally, workers with jobs that offer little time off for doctor's visits, or who are the main family caretaker, may still struggle to find the time in their day for a "real-time" virtual patient visit.

**ATA ACTION**

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Furthermore, ATA Actions applauds this legislation's conformance to the Federation of State Medical Boards (FSMB) recently updated model guidance on "The Appropriate Use of Telemedicine Technologies in the Practice of Medicine." These guidelines endorse the use of asynchronous adaptive questionnaires for prescribing so long as the practitioner has the "ability to ask follow-up questions or obtain further history" in order to appropriately treat a patient.<sup>1</sup> HB 162 demonstrates Idaho's commitment to creating legislation that is in line with modern standards healthcare.

Finally, while we are supportive of this legislation's creation of certain exemptions that permit out-of-state providers to engage in cross-state practice for Idaho patients, we believe that cross-state practice should be expanded even further. The ATA believes that patients should be able to receive virtual care from their provider of choice, regardless of that provider's physical location, so long as the practitioners are utilizing the appropriate technology to uphold the established standard of care, are in good standing with their home states' regulatory boards, and can still be held accountable by the appropriate boards and state agencies should any issues arise from treatment. Permitting out-of-state licensed practitioners to deliver telehealth services to Idaho residents will help patients across the state connect with practitioners whenever and wherever their need for care arises, removing arbitrary geographical barriers that would limit Idaho patients' access to the health care services. ATA Action feels that the licensure provisions included in Idaho House Bill 61 would establish an appropriate licensure framework for Idaho patients and providers.

Thank you for your collaboration on this legislation and support for telemedicine. We encourage you and your colleagues to pass House Bill 162 in the interest of expanding Idaho patients' access to affordable, high-quality care. Please let us know if there is anything that we can do to assist you in your efforts to adopt practical telemedicine policy in Idaho. If you have any questions or would like to engage in additional discussion regarding the telemedicine industry's perspective, please contact me at [kzebley@ataaction.org](mailto:kzebley@ataaction.org).

Kind regards,

A handwritten signature in black ink, appearing to read "Kyle Zebley", is written over a light gray circular stamp.

Kyle Zebley  
Executive Director  
ATA Action

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<sup>1</sup> Federation of State Medical Boards, *The Appropriate Use of Telemedicine Technologies in the Practice of Medicine*, April 2022, page 7.