

April 17, 2023

The Honorable Jim Perry Senator, District 2 North Carolina General Assembly 300 N. Salisbury Street, Rm. 311 Raleigh, NC 27603 The Honorable Michael Lazzara Senator, District 6 North Carolina General Assembly 300 N. Salisbury Street, Rm. 300-C Raleigh, NC 27603

RE: ATA ACTION CONCERNS WITH SENATE BILL 624

Dear Senators Perry, Lazzara and other sponsors of North Carolina Senate Bill 624,

On behalf of ATA Action, I am writing you to raise concerns regarding Senate Bill 624 and encourage you to consider changes to take telehealth care into account.

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.

ATA Action supports your efforts to ensure transparency and clarity for patients by requiring practitioners to clearly display their identification and credentials, both on their person and in their office. ATA Action acknowledges that informed patient consent is a crucial step in the delivery of care, and practitioners should be able to readily and easily provide proof of identification and licensure to patients being treated. While there is no doubt that Senate Bill 624 is well intentioned, our organization is concerned that there could be unintended consequences that limit telehealth care.

The requirement of providers to wear a visible and apparent identification badge could be difficult to meet via telehealth modalities for a variety of reasons. Practically, a badge worn by the practitioner using synchronous audio-visual modalities could be difficult to read through the telehealth platform and would be rendered entirely ineffective in instances of audio-only care because the patient cannot see the provider. Similar issues could arise for the in-office license, certification, or registration display requirements. Practitioners would have to locate their credentials very carefully to fit in the background of a video call, and this requirement would be similarly ineffective for audio-only care. Telehealth providers may also practice from multiple locations, making it impractical to display several copies of their licensure or travel with copies to display. We encourage you to consider a telehealth carveout for these requirements or establish clear guidelines allowing telehealth providers to meet the requirements in another manner. One potential option for your consideration would be requiring telehealth providers to share pictures or scanned copies of their licenses and identification with the patient in lieu of the display requirements established for in-person care.

Thank you for your support for telehealth. We encourage you and your colleagues to consider changes to Senate Bill 624 to take telehealth providers into account and solve any confusion for practitioners and

ATA ACTION

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patients prior to passage of this legislation. Please let us know if there is anything that we can do to assist you in your efforts to adopt practical telehealth positions in North Carolina. If you have any questions or would like to engage in additional discussion regarding the telehealth industry's perspective, please contact me at <u>kzebley@ataaction.org</u>.

Kind regards,

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Kyle Zebley Executive Director ATA Action