

February 28, 2024

The Honorable Mary Elizabeth Coleman Chair, Committee on Health and Welfare Missouri Senate 201 W. Capitol Ave., SCR 1 Jefferson City, Missouri 65101 <u>maryelizabeth.coleman@senate.mo.gov</u>

RE: ATA ACTION SUPPORT FOR AND COMMENTS ON SB 851

Dear Chair Coleman and members of the Health and Welfare Committee,

On behalf of ATA Action, I am writing to express support for SB 851 relating to telehealth.

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.

Senate Bill 851 contains an important step forward for Missouri's telehealth policy. The proposed legislation makes clear that questionnaires can be an appropriate use of asynchronous technologies in the delivery of telehealth services, including for the issuing of prescriptions. Across the country, providers and health systems are using adaptive and responsive online questionnaires or interviews that incorporate relevant evidenced-based clinical protocols to deliver care to both new and established patients. The proposed legislation specifically requires questionnaires to be sufficient to establish an informed diagnosis as though a medical interview or physical examination has been performed in person in order to qualify as a permitted use. ATA Action believes this is an appropriate patient safety guardrail tied to the standard of care.

ATA Action applauds your efforts to expand Missouri residents' access to affordable, high-quality health care. State policies should rely on the discretion of licensed medical professionals as to which modalities are sufficient to meet the standard of care for the condition presented by the patient. Moreover, asynchronous modalities can often better meet the needs of rural and lower-income patients dealing with time, geographic and financial constraints. By permitting the use of these adaptive and responsive questionnaires in the delivery of telehealth services, the legislature also enhances the ability of Missourians who lack access to reliable, high-speed internet connections to receive the same level of care as those who are able to utilize high-speed internet capabilities.

While this legislation remains a positive step forward, there is other legislation in Missouri this session, House Bill 1532, which would implement the same policy and further make clear that if questionnaires solicit the same information as an in-person visit then the results can be used for the

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901 N. Glebe Road, Ste 850 | Arlington, VA 22203 Info@ataaction.org



prescription of drugs and controlled substances. HB1532 still requires providers to meet the same standard of care as medical interviews that are conducted in person while also helping to expand patient and provider choice and ease in care for prescriptions necessary for patient care. We encourage you to consider adding this language from HB1532 to SB 851 before moving the legislation forward.

Thank you for the opportunity to comment. We urge you to support SB 851 in the interest of expanding Missouri patients' access to high-quality, affordable health care and drive better care coordination throughout the state. If you have any questions or would like to discuss the telehealth industry's perspective further, please contact me at kzebley@ataaction.org.

Kind regards,

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Kyle Zebley Executive Director ATA Action