



April 15, 2015

Testimony in support of HF 1246 before the House Health and Human Services Finance Committee

Dear Chairman Dean, Representative Mack and Committee Members:

Thank you for the opportunity to address HF 1246. The Minnesota Rural Health Association (MRHA) represents dozens of Critical Access Hospitals and other rural hospitals, clinics, nursing homes, providers, medical educators and others among its members. MRHA is a non-profit membership organization and Minnesota's designated State Rural Health Association. We work in close collaboration with the Minnesota Department of Health, Office of Rural Health and Primary Care. Our mission is to strengthen health and healthcare in Greater Minnesota through education, collaboration and advocacy.

The MRHA applauds and supports HF1246 which provides reimbursement parity for health care services delivered via telemedicine. In many rural areas of Minnesota, telemedicine is the only or best option for timely access to high quality, cost-effective health care. Without reimbursement parity it becomes difficult for providers to deliver telemedicine services which are particularly helpful in addressing gaps in rural healthcare access. Specifically, this bill:

- Requires that private insurance and Medical Assistance (MA) cover telemedicine services in the same way they would cover in-person services for a patient.
- Prohibits insurance carriers and MA from excluding coverage for services just because they are delivered via telemedicine
- Requires reimbursement to the provider at the site that originated the telemedicine, in addition to the provider who provided the care via telemedicine.

We understand the concerns of some that reimbursement parity for telemedicine will increase health care costs. On the contrary, by extending access to healthcare in a timely and cost-effective manner, telemedicine (particularly in rural areas) helps address medical needs before they become more intensive and costly, while preventing the added expense of long distance transportation. Telemedicine does not replace the need for on-site medical care, but in many rural areas of our state, this bill will help make sure patients have timely access to cost-effective healthcare.

The MRHA appreciates Representative Mack's leadership and the opportunity to testify on HF1246. We hope you recognize the importance and urgency of implementing telemedicine parity. Thank you.

Respectfully submitted,

Steve Gottwalt
Executive Director
Minnesota Rural Health Association