

March 8, 2021

Re: Support for HF 1412

Dear Chair Liebling and members of the House Health Finance and Policy Committee:

The undersigned organizations represent thousands of individuals facing serious, acute and chronic health conditions in Minnesota. Our organizations have a unique perspective on what patients need to prevent disease, cure illness and manage chronic health conditions.

Our organizations support HF 1412, legislation to expand access to telehealth in Minnesota. Telehealth has long been an important care delivery method for improving access in underserved communities – particularly rural areas, areas with physician shortages, areas with limited access to primary care services, and areas with transportation barriers. Telehealth – including telemedicine and telemental health – helps reduce gaps in access to services and care, including access to primary care and specialized providers when in-person visits are not a safe or feasible option.

The COVID-19 pandemic has highlighted the role of telehealth in helping every patient receive timely and safe health care services and treatments from their providers. Our organizations believe telehealth can and should be used to increase patient access to care to ensure that all patients can continue to safely access appropriate telehealth services during and after the COVID-19 public health emergency.

We believe that affordable, accessible, and adequate health insurance is key to improving the health and wellbeing of all people living in Minnesota. The legislation before you helps to accomplish this goal by addressing the following:

- Improving Access through Easing Technology Barriers: Telehealth services should be equitably available through easily useable technologies that are accessible to people with disabilities, with limited English proficiency, and limited technology. The option of audio-only communication is especially important for rural and low-income populations, as many of these patients lack internet access.
- Preserving and Promoting Patient Choice: A patient should have the opportunity and flexibility to
 choose whether they will access care in-person or via telehealth technologies. We support liming
 patients' out-of-pocket costs for telehealth services to be no more than their in-person equivalent.
 When telehealth is an appropriate option, payers should not incentivize patients to seek out one setting

over another for their health care; it should be left to patients and their providers and be made on a case-by-case basis.

- **Removing Geographic Restrictions:** Geographic restrictions place a burden on and can limit both patients and providers when evaluating treatment options for optimal care. We appreciate the changes with originating site.
- **Network Adequacy:** Telehealth should supplement, not supplant, provider networks.
- Utilization Management: Utilization management tools should not be used by health plan payers to push providers or patients towards a particular care setting or to determine or limit visit frequency for telehealth appointments.

As telehealth becomes more common, data must be collected and more research must be conducted on the usage and outcome of telehealth, with special attention to promoting health equity in order to determine how telehealth technologies should be designed and implemented so that all populations have equal access to their potential benefits.

On behalf of our organizations, we ask you to support HF 1412. For more information, please contact Emily Myatt, Minnesota Government Relations Director for the American Cancer Society Cancer Action Network, at <u>Emily.myatt@cancer.org</u>.

Sincerely,

The ALS Association The Alzheimer's Association, Minnesota-North Dakota Chapter American Cancer Society Cancer Action Network American Diabetes Association American Heart Association Arthritis Foundation Be The Match/National Marrow Donor Program Epilepsy Foundation of Minnesota JustUs Health The Leukemia & Lymphoma Society Minnesota Association of Community Health Centers Minnesota Association of Community Mental Health Programs | MACMHP Minnesota Breast Cancer Coalition National Multiple Sclerosis Society NAMI Minnesota