

April 6, 2021

The Honorable Tina Liebling Chairwoman, Minnesota House Health Finance and Policy Committee Minnesota State Office Building 100 Rev. Dr. Martin Luther King Jr. Boulevard, Room 477 St. Paul, MN 55155

The Honorable Rep. John Huot Vice Chairman, Minnesota House Health Finance and Policy Committee Minnesota State Office Building 100 Rev. Dr. Martin Luther King Jr. Boulevard, Room 583 St. Paul, MN 55155

RE: ATA COMMENTS ON HOUSE FILE 2128

Dear Chair Liebling and Vice Chair Huot:

On behalf of the American Telemedicine Association (ATA) and the over 400 organizations we represent, I am writing to comment on House File 2128.

The ATA is the only national organization whose mission revolves solely around the advancement of telehealth in the United States. Our utmost priority is ensuring that Americans can access affordable, high-quality health care at any place and any time. The expansion of telehealth infrastructure around the country eases strain on the overburdened health care system, enabling it to provide care for millions more patients every year in an efficient and effective manner. The ATA represents a diverse and expansive coalition of technology solution providers and payers, as well as partner organizations and alliances, working together to promote the implementation of telehealth across the country, endorse responsible telehealth policy, encourage government and market normalization, and deliver education and resources designed to further the integration of virtual care through the use of various innovative technologies.

House File 2128 seeks to expand Minnesota's telehealth policy. The bill would propose a definition of telehealth which would include secure video conferencing, store-and-forward transfers, synchronous interactions, and audio-only communications under certain circumstances. Additionally, House File 2128 would mandate that health plans in Minnesota cover benefits delivered through telehealth in the same manner as any other benefits covered under the health plan.

Across the country, providers are relying increasingly on asynchronous (or store-and-forward) telehealth technologies to deliver health care services to patients efficiently and effectively. In addition, providers are utilizing remote patient monitoring technologies to leverage care out of the hospital, clinic or doctor's office and into the home, where providers can continually monitor, collect and analyze a patient's physiologic data to create care management plans for patients, especially those with chronic conditions. While the proposed definition of telehealth allows for the use of a wide range of innovative telehealth modalities in the delivery of health care, the ATA suggests adopting a definition of telehealth that is more explicit in its technology-neutral stance. As patients and consumers seek more convenient and affordable



ways to access health care, state policies should not mandate which types of technologies are more appropriate than others or under which circumstances certain technological modalities may be used in the delivery of health care services. If the health care professional providing telehealth services determines, based on professional judgment, that the standard of care can be met, then the professional should be able to use an assortment of appropriate technologies to provide care to their patients.

The ATA believes that the proposed statute would benefit from a clearer definition of telehealth and suggests consideration of the following:

"Telehealth" means a mode of delivering healthcare services through the use of telecommunications technologies, including but not limited to asynchronous and synchronous technology, and remote patient monitoring technology, by healthcare practitioner to a patient or practitioner at a different physical location than the health care practitioner.

The ATA also applauds the legislature's efforts to expand Minnesotans' access to affordable, high-quality care by mandating that insurance plans cover benefits delivered through telehealth in the same manner as any other benefits covered under the health plan. This provision would make it easier for Minnesota residents to access quality health care whenever and wherever they need it without having to worry about the potential financial burdens associated with receiving that care.

As far as the rate of reimbursement for telehealth services is concerned, the ATA maintains that state policymakers should set rational guidelines that are both fair to the provider of such services and reflect the cost savings offered to the health care system by the effective use of telemedicine technologies.

The ATA thanks you for your interest in telehealth. In the context of the ongoing pandemic, it is critical that we codify policies that will make it easier for Minnesotans to access affordable, quality care from the safety of their homes.

Please do not hesitate to let us know how we can be helpful to your efforts to advance common-sense telehealth policy in Minnesota and consider our organization as a resource. If you have any questions or would like to discuss further the telehealth industry's perspective, please contact me at kzebley@americantelemed.org.

Kind regards,

Kyle Zebley

Public Policy Director

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American Telemedicine Association