

**Testimony of Paul A. Taheri, MD, MBA
Deputy Dean for Clinical Affairs and
CEO, Yale Medical Group**

**Submitted to the Public Health Committee Concerning
SB 246, An Act Defining And Establishing Standards For The Practice Of Telemedicine
SB 467, An Act Concerning Facilitation of Telemedicine
HB 6487, An Act Concerning Standards For Telemedicine Services**

Dear Senator Gerratana, Representative Ritter, and Members of the Public Health Committee,

I appreciate the opportunity to provide testimony in support of the Committee's effort to draft a bill to establish minimum standards of practice and health insurance coverage for telemedicine.

As a large physician group practice that is committed to the care of Connecticut residents, we see telemedicine as an innovation in healthcare delivery with a proven ability to improve access to and reduce the cost of care while maintaining, and even, improving quality of care. As such, we are strong supporters of telemedicine and have adopted it in a number of clinical areas in our practice as a means of supporting patients, as well as, physicians in hospitals where access to specialists may be limited. In addition, there is patient/consumer demand for telemedicine which is evidenced by the growing number of private companies, insurers, academic medical centers (in other states), and technologies that have entered the market to provide telemedicine services.

According to a recent survey amongst physicians of Yale University, the single biggest obstacle to adoption of this promising innovation is lack of reimbursement. There are currently 15 states that have telemedicine parity laws for private insurance, and policies that authorize state-wide coverage, without any provider or technology restrictions. We hope, that the proposed bill will allow Connecticut to join the 47 states where Medicaid programs have some type of coverage for telemedicine. In fact, the Public Health Committee and the Connecticut's Legislators can advance healthcare in Connecticut by introducing telemedicine parity laws and mandating coverage for telemedicine by all state-run health insurance programs, including Medicaid, CHIP and state employee plans.

We acknowledge that certain standards will need to be met to obtain reimbursement. We would hope, however, that the Committee does not impose standards that are in excess of what is currently required for an in-person service/visit. We ask you to consider telemedicine another mode for delivering care and a strictly medical decision. We are concerned that making reimbursement conditional on such non-medical factors as:

- A prior in-person visit,
- Written informed consent,
- Distance and population restrictions, as well as,
- Provider/patient setting requirements,

would defeat the purpose of telemedicine and ultimately hinder its adoption in ways that could improve patient care and help to promote efficiencies in the use of healthcare resources.

Thank you for your consideration of this testimony.