



Testimony presented by David Boisoneau, M.D.

**In Public Health Committee
On
March 2, 2016**

SB 291 An Act Concerning Telehealth Providers' Access to Patient Records

Good Afternoon Senator Gerrantana, Representative Ritter and other distinguished members of the Public Health Committee. I am David Boisoneau MD, a board certified otolaryngologist practicing in Waterford, CT. I am here to represent the over 1000 physicians in the medical specialties of Otolaryngology, Dermatology, Ophthalmology and Urology. On behalf of this group of dedicated physicians, we thank this committee for the opportunity to comment on the proposed amendment to SB 291: An Act Concerning Telehealth Providers' Access to Patient Records.

As you all know, SB291 was raised last year in this committee and subsequently has become state law, effective in January of this year. Testimony presented last year by our physician groups highlighted several concerns we had with the original bill, specifically with the need to establish clear guidelines moving forward with telemedicine in the State of Connecticut. The second concern we have is in regard to, the standard of care for "telemedicine" and that it is what it is and **NOT** the same level or value of care as an "in person" encounter. If this were to occur it would cause considerable chaos and anxiety in the medical community and would ultimately dissuade physicians from performing these telemedicine encounters because of the heightened exposure to medical liability. We do not believe this is the intent of this legislation but our defense medical liability legal team warns us that this could be a serious unintended consequence and needs to be dealt with early in the process through guidelines and specific language delineating the two levels of encounters. Third we must be mindful of the serious deficit plaguing the state and how CT cannot afford to lose revenue from outsourcing medical services through telemedicine which could also easily be a byproduct if safeguards are not put into place.

Finally and with greatest importance SB291 should not undermine the thoughtful criteria, specifically mandating real-time, interactive, two-way communication as well as access to, or knowledge of, the patient's medical history, as provided by the patient, **AND** the patient's health record. Keeping this simple word, **"and"**, helps ensure that the remote provider is evaluating the patient in the most comprehensive manner possible, within the limits of the remote technology and should remain in the bill.

We are concerned that changing this condition to "or" may allow the remote providers to ignore the health record, and make the telehealth provider vulnerable by having to get all the information (or not) from the patient.

We hope this committee will oppose the language change proposed in SB 291, which will help preserve the strong doctor-patient relationship and continue to work with the medical community as this technology continues to be integrated into our healthcare delivery system.

Thank you