

Testimony of Sara LeMaster, MPAP
Manager of Government Relations and Public Policy
Community Health Center Association of Connecticut
HB 5596 and SB 1022—Support
March 15, 2021

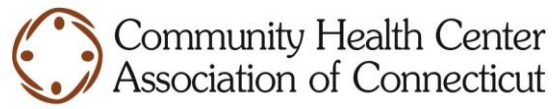
Distinguished membership of the Public Health and Insurance and Real Estate Committees: My name is Sara LeMaster and I am the manager of government relations and public policy for the Community Health Center Association of Connecticut. I'm offering our strong support for HB 5596 and SB 1022. Telehealth has enhanced health centers' ability to deliver quality health care to communities that experience health disparities and I commend the committee for drafting this bill and taking an important step in crafting policy that will improve health equity in Connecticut.

Connecticut's health centers serve 400,000 patients every year, many of whom receive HUSKY benefits and live at or below 200% of the Federal Poverty Level. Many of these patients experience health disparities that put them at increased risk for developing chronic health conditions like diabetes and hypertension. In order to serve populations that experience health disparities, Connecticut's health centers specialize in making health care accessible and convenient to everyone. Because their focus is largely on supporting public health, they have a model that serves to make care as easy to access as possible. Health centers offer same-day medical, dental, and behavioral health appointments because they recognize that offering services in this manner increases patient accessibility.

Prior to the COVID-19 public health emergency, most health center patients did not have access to telehealth services. Many of these patients work in service industry jobs where finding time off can be challenging, and often lack access to childcare and reliable transportation. Attending a single doctor's appointment can take hours of scheduling and orchestration, and if one piece is missing—if a childcare provider needs to cancel, or their car breaks down, or they need to cover for someone at work, patients have cancelled or rescheduled appointments.

By reducing many of the physical barriers to care, video- and audio- telehealth have been powerful tools in improving access to services for many of our patients. This bill would continue this access beyond the likely scope of the public health emergency and will enhance health centers' abilities to provide care. Providing these services has allowed health centers to break new ground in many aspects of how they deliver medicine. Continuing coverage of audio-only telehealth will lead to greater gains in patient access and improve the quality of care that health centers can deliver to underserved communities.

CHCACT partnered with UConn health to conduct a study of the impact of telehealth on health center providers and patients. In our preliminary data, a majority of providers reported that telehealth reduced missed appointments as compared with pre-pandemic numbers, made their practice of medicine better, that there was an overall improvement in patient experience, and telehealth enhanced the continuity of care. Providers surveyed indicated that in most cases, patients were able to use and access technology necessary for receiving services via telehealth.



I have included as part of our testimony responses to questions that we asked providers at our health centers. These stories from providers articulate how audio-only telehealth has expanded their capacity to serve their patients.

From a Family Nurse Practitioner at Norwalk Community Health Center:

How has audio-only telehealth allowed your patients to access their care providers?

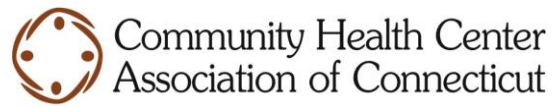
As a Family Nurse Practitioner and Clinical Lead of the Adult Medicine Department with 9 years of FQHC experience and the previous 8 years at Norwalk Community Health Center telehealth audio-only has completely transformed our health care delivery model. Social determinants of health for our underserved patient population more often than not impact patient's ability to access in person services. With telehealth audio-only patients are able to receive services directly to their home; where we are able to bring their medical home to their physical home. For a patient who identifies that they need to cancel the appointment because of transportation, inability to take off from work due to loss of income, or child care issues we offer the patient a TELEVISIT audio-only appointment, as clinically appropriate, to provide excellent quality care to our patients. Our no-show rates as a department are at an all-time low which largely has to do with our split schedules of in person appointments and Telemedicine visits. Providers are also more willing to accommodate additional Telemedicine visits in their schedule with the understanding that the patient be available during a timed window; this is similar to an Open Access model to improve access to care.

What kinds of positive improvements have you seen in the quality of care since offering telehealth services?

- Improved no-show/no-fill rates within the Adult Medicine Department month over month
- Ability for providers with new patients establishing care via Telehealth audio-only to obtain comprehensive health history, medication review, UDS screening measures, review of the previous chart, order appropriate imaging and lab orders prior to an in-person visit which allows for an extremely thorough and comprehensive in-person assessment reducing the need for face to face encounter time in the middle of a pandemic.
- Improved integrated Behavioral Health care model and soft handoffs where therapists are able to conduct Tele visit-audio on the same day as medical Tele visit. The impact on a patient who is severely depressed and may not be motivated to get out of bed now has access to services from the comfort of their own home. This has reduced no-show rates across the board for the Behavioral Health Department.
- Targeted focused Tele visits for blood work results and imaging results where the patient is able to receive education from the comfort of their own home versus having to come to the physical health center.
- Ability to take care of patients with active COVID19 infection without risking the health of front-line staff workers.
- Reduction of Provider burnout with split schedules of in person and TELEVISITS. Also allowing providers to work remotely with inclement weather where previously the visits required re-scheduling.

Why is it important that you be able to reach your patients and care for them via audio-only telehealth?

For the reasons listed above it would be devastating for patients to lose the access to care that Telehealth-audio only has provided. It is my hope and for the future of medicine that we are able to maintain Telehealth as part of our health care delivery model.



How has providing these services allowed you to keep your doors open during the pandemic?

As an organization we continued to provide services for both sick visits, chronic care management, and preventative health throughout the entirety of the pandemic and continue to do so. We streamlined sick visits to Tele visits and as medically appropriate brought patients into the health center for in-person assessment utilizing a dedicated team with appropriate PPE. I firmly believe Telehealth has allowed us to maintain the health of our staff and employees where we have not had a single patient-related contact exposure that caused an outbreak in our facility; March will be a year that we changed our model. In addition, we have had less staff out sick during the current flu season than we have had in previous years likely related to our ability to conduct sick visits through Telehealth-audio only versus in person.

Additionally, with social distancing requirements Telehealth-audio only allowed all providers and staff to appropriately distance themselves from each other. Providers moved from offices into exam rooms to conduct visits. We would have lost a massive amount of patient access and appointments if providers had to alternate use of the offices in order to see patients in person alone.

Why is it important that the state provide this as a continued benefit?

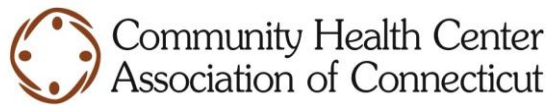
The World Health Organization recently came out with a statement that the COVID19 pandemic is not the first global pandemic and it will not be the last. The virus has already mutated and the efficacy of the vaccine against the variant strains is currently under investigation. Therefore, to maintain the health of the frontline essential workers in healthcare and to provide access to all health services it is imperative that the state provide Telehealth-audio only reimbursement for services rendered.

How has increasing access to providers via telehealth positively impacted health outcomes for your patients?

At the outset of the pandemic patients were initially afraid to enter the building and would have been otherwise lost to follow up if we were unable to provide Telehealth-audio only services.

We physically would not have been able to provide care to the volume of our patient population requesting COVID19 testing post-exposure, actively symptomatic patients with COVID19 while continuing to provide primary care services without the use of Telehealth-audio only. We were able to provide rapid access to services and education on quarantine and exposure protocols to help reduce the spread of the pandemic in Norwalk, CT.

Additionally, our patients do not have the technology available to complete an audio and video telemedicine appointment whether it be that it is a geriatric patient or a patient that is unable to afford a cellphone and only has a landline.



Konstantia E. Papapateras, M.A., RDN, CD-N
First Choice Health Centers

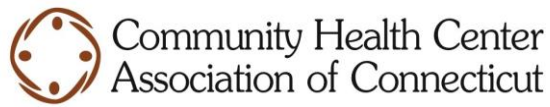
I am working as a RDN for First Choice Health Centers. Since the pandemic began last year, I have been working with patients providing telehealth services, mainly by telephone. This invaluable service has allowed me to ensure I have reached as many patients as possible who suffer with chronic conditions, often debilitating, such as obesity, diabetes, hypertension, heart disease and others. Many of these patients reported back to me that they found the telehealth service truly invaluable, especially ones that found it hard to travel to the clinic, either due to transportation issues, physical ailments making travel challenging, financial issues, or the pandemic which of course meant they experienced heightened fear and anxiety. They reported that their conditions were improving, and also their mental health as well just knowing that they had this option of telehealth and a provider to continue caring for them with ease. As a clinician, I have noticed that my productivity has gone up and that I have been able to reach many more patients in this way. Of course, this does not mean that face to face appointments are not important, but having this telehealth service as well, ensured less no show appointments, increase in productivity, flexibility for the patient, saved costs, and I personally saw improvement in health outcomes for patients I worked with and good continuity of care.

For myself, I have used this invaluable service prior to the pandemic while working abroad, and was always able to reach more patients, the positive feedback from patients was always forthcoming.

I believe that telehealth offers a truly invaluable service to patients and providers and I cannot recommend it enough.

Sincerely,

Konstantia



Provider Testimony: Robert Ballough PA-C Family Medicine

First Choice Health Centers (FQHC)

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Bill: HB 6472 AAC Telehealth

- Audio only Telemedicine has been invaluable for my patients, especially those with limited means and chronic health conditions. The video portion is not necessary when refilling medications for chronic disease like Diabetes, Hypertension and Cholesterol. I can also readily order labs without any issues.
- The true mission for FQHC's is to expand access of care for the underserved population. The use and acceptance of the audio only telephone call essentially breaks down all barriers to providing high quality care. Transportation issues, physical disabilities, and the fact that they need others to accompany them to appointments, often burden my patients. These are just some of the hurdles that they face when trying to make it to a physical appointment. Telephone visits eliminate all of those barriers.
- The benefits of the services goes beyond eliminating barriers. I am able to reconcile all of their medications. I can simply ask them to grab all of their meds, and go over each one with them. They no longer need to bring their meds with them. This is highly valuable when they are on multiple medications and do not know all of the meds they are taking. I can educate them about each medication, and the reason they need to stay on the medication.
- For the working poor, they no longer need to take time off from work. They can now simply go to a quiet break room, or step out to their car for their appointments.
- The patient no longer needs to try to schedule their appointment and make time for it. They can simply pick up the phone and speak directly to their provider.
- I have noticed a drastic decrease in no shows. Up to a 30 percent of my patient's each day would previously no show, typically due to the barriers that I had mentioned before. The number of no shows has significantly decreased.
- Finally, the cost savings is obvious. There is no need for Veyo transportation. Also as mentioned before, the patients no longer need to take time off from work.
- I have seen the real life benefits from offering telehealth services to our patients, and it is an absolute necessity that these services continue going forward.

Thank you for your time and consideration in regards to my testimony. I have been practicing as a Family Medicine Physician Assistant for the past 6 years in the town of East Hartford. I typically serve around 3800 patients per year. I would highly encourage the continuation of telehealth visits going forward.

Sincerely,

Bob Ballough PA-C

A provider at Optimus Health Center in Bridgeport provided the following anecdotes from their patients:

- Patient is very concerned about Pandemic and doesn't want to go to the office. He only goes to the doctor's office when he is sick. **He is interested in getting the vaccine and I told him I would put him on a wait list.**
- Minimal conversation, but stated that he would like to continue with Telehealth after the pandemic.
- The patient has had significant health issues recently and had 8 Telehealth visits over the last six months. A number of referrals were made, including a CT scan, pulmonology, and orthopedics, and she feels her medical condition is finally under control. She commended the clinicians and telehealth services for making this process much more convenient, as well as limiting her exposure and risk. She noted that being able to review test results and prescriptions via telehealth was easy and efficient. She would definitely continue using Telehealth for her medical care.
- The patient is wheelchair bound, and finds Telehealth services convenient, especially in the winter with snow. **She said that her wheelchair is "raggedy" and wants to replace it and wanted to know if we could help with that.**