

Testimony from UNITE HERE Local 34 on Telehealth legislation

Date: 3/15/2020

RE: H.B. No. 5596 (RAISED) An Act Concerning Telehealth

S.B. No. 1022 (RAISED) An Act Concerning Telehealth

Good day, everyone. I thank Senator Daugherty Abrams, Representative Steinberg, Senator Lesser, and Representative Wood for the opportunity to speak, and I thank the honorable members of the Public Health and Insurance and Real Estate Committees for their attention. I am Adam Marchand, and I work on health policy for UNITE HERE Local 34, the union of Clerical and Technical employees at Yale University. I am here to give input on the study of telehealth mandated by H.B. 5596 and to encourage this body to limit the duration of the provisions of S.B. 1022 to one year.

We have lived a full year with the COVID pandemic. Although the distribution of vaccines has brought hope that we may soon return to a more normal life, it is not yet safe to let down our guard. As a society we must continue to make various adjustments to how we go about our business, including in health care.

In this time when medical offices and clinics have had to change how they operate, telehealth has provided a way to give patients access to health services while allowing for social distancing. The General Assembly acted responsibly last year in enacting legislation to define, authorize, and support the provision of telehealth services in Connecticut during these times. It is appropriate to do so again this year, and to make further refinements, as this legislation does.

However, telehealth continues to raise questions regarding access, quality, and cost, and to date those questions have not been adequately answered. In “An Evaluation of Telemedicine Opportunities” a report delivered last December to the State of Connecticut Office of Health Strategy, experts from UConn Health noted that:

While recognizing the value of telehealth in contributing to high quality care, providers were not convinced that the care they provide via telehealth is on par with in office visits. Approximately half of respondents disagreed that telemedicine allows them to provide the same or better quality of care as office visits.

The authors also noted “a general consensus among providers, regardless of practice size”, that several barriers stood in the way of proper access to telehealth services. “Providers overwhelmingly identified patient access to reliable internet and devices as the most common” problem “with more than 70% reporting this barrier.”

Before enacting permanent legislation to authorize and regulate telehealth, this body needs a better understanding of the costs and benefits of this relatively new model of care delivery. Our union supports H.B. 5596, which requires the Department of Public Health to “study the benefits and implications of expanding the provision telehealth services in the state” and to report back to the appropriate legislative committee no later than January 1, 2022. Clearly, such a study is needed and should be reviewed before the General Assembly creates lasting rules governing telehealth services.

As a state we should want the expansion of telehealth to serve the triple aim of health reform: improving the patient experience of care, improving the health of populations, and reducing the per capita cost of health care. Therefore, this study should include a comparison of the cost to providers of telehealth visits versus office visits and an analysis of outcomes of these visits for patients. Most urgently, this study should examine the impact of the expansion of telehealth on the disparate access to health services for underserved populations.

To gain a fuller understanding of these issues, this study should include the voices of patients. The UConn Health study issued last December involved a survey of providers but apparently no feedback from other stakeholders. We should also hear from the other staff who support the clinical enterprise—such as nurses, medical assistants, receptionists, and technicians. Omitting these voices leaves a crucial gap in our knowledge of how telehealth serves our communities.

In the meantime, the General Assembly should extend for one more year and refine the legislation it passed in 2020. I thank you all for your focus on this important issue and for your attention to this testimony.