



Michelle Reynolds, Ph.D.
19 Business Park Drive
Branford, CT 06405

March 14, 2021

Dear Members of the Public Health Committee:

My name is Dr. Michelle Reynolds and I am a licensed clinical psychologist and a constituent of District 3, as I live in Durham and work in Branford. I am writing in support of SB 1022/ HB 5596 An Act Concerning Telehealth.

During the COVID19 health emergency, telehealth became essential for mental health providers to deliver mental and behavioral health services. Telehealth allowed patients continuity of care despite quarantine restrictions. Additionally, telehealth, increased accessibility to services. As many patients struggled with increasing anxiety and depression during the pandemic, I was able to accommodate their needs due to having more flexibility in both my schedule and patients' schedules. Patients were able to attend sessions more easily despite restrictions including access to childcare.

Parity of payment for telehealth is a particularly critical component of this bill. The services delivered are of the same quality and require the same skill set, therefore, should be reimbursed at the same rate. Parity of payment will allow providers to sustainably provide this service delivery option. Without payment parity, providers will be at a financial disadvantage if they offer telehealth, and this may decrease access to mental and behavioral health services.

The limited access to appropriate care is acutely relevant to my practice. I have a specialization in health psychology and work with people who are struggling with an acute or chronic illness. Many of the patients that I have seen via telehealth during the pandemic, would have been putting their health at increased risk by attending face-to-face sessions. Many of the people that I see, have been able to increase attendance to therapy sessions, as it is less burdensome to be in the comfort of their homes when they are not feeling physically well enough to go to the office. Providing ongoing telehealth services in addition to traditional face-to-face services is essential to increasing access to services. Audio-only telehealth services is another critical component of this bill and directly connects with access to our most vulnerable patients. Audio-only has been essential for patients without access to consistent internet services and financial hardship.

Research and training for telehealth services has been shown to be effective and has been utilized in the military for many years. As a member of Connecticut Psychological Association, I was able to receive immediate training on providing telehealth psychological services.

Telehealth service delivery is critical to improving access to care.

I urge your support of SB 1022/ HB 5596 An Act Concerning Telehealth.

Respectfully,

Michelle Reynolds, Ph.D.
90 Royal Oak Drive
Durham, CT 06422
drreynolds@lifecatalystct.com