

I strongly support bills HP 5596 and SB 1022.  
I offer my perspective as a practicing psychotherapist.

Initially we turn to telehealth out of necessity it was a very constructive response to COVID for the state of Connecticut to mandate coverage of telehealth services for mental health. Face-to-face delivery was considered too risky.

We shifted to remote sessions to help with our new patients and ones who were continuing in our practice.

My own experience and discussions with both colleagues and patients has revealed very positive results as all of us adapted to the new delivery systems.

Dentists and massage therapists cannot work remotely. But we therapists can do it and have done it now for a year!

I don't think it's safe to return fully to face to face sessions. Extending the states mandate of support for telehealth coverage will allow for orderly return to face to face.

We therapists CAN provide effective mental health treatment remotely. That is one of the very important takeaways from our Covid Experience.

As the threat of coving winds down this is a great opportunity to deliver better mental health care by mandating support for an EXTENSION of telehealth coverage. Populations that for a number of reasons find it difficult to get in to offices for face-to-face will be able to access mental health treatment in ways that were up till now impossible. Providing services for the populations that were underserved is good policy.

By extending the reach of mental health treatment we are preventing more serious and debilitating mental illness.

Insurance carriers have in the past set a reduced fee schedule for telehealth compared to face-to-face sessions. As a practitioner I do need full parity in order to continue providing services to my more disadvantaged clients. If the already reduced fee schedule for third-party payment is reduced fewer practitioners will be able to see those clients who need us most.

When I ask my clients about how they are experiencing remote half impactful and productive as face-to-face sessions have been. Some tell me that having to get into the office has required cancellation of sessions that would not need to be canceled if telehealth was an option.

I will be continuing to ask my clients about what have been the best adaptations to remote that I have provided them and in this way I will be one of the clinicians to become as more and more effective using telehealth.

Should you wish to hear more from me I will be glad to provide more details.

Philip B Rosenthal PhD  
Licensed clinical psychologist  
Ct Lic 571