RE: LCO 3614- An Act Concerning Telehealth

Senator Lesser, Representative Scanlon and esteemed members of the Insurance and Real Estate Committee, thank you for the opportunity to offer testimony on behalf of the Connecticut Counseling Association in support of LCO 3614- AAC Telehealth.

My name is Julie Yale and I am the current President of the Connecticut Counseling Association. CCA is the professional organization that represents Professional Counselors, Professional Counselor Associates, and counseling graduate students here in CT. I am also a Licensed Professional Counselor who works and resides in Niantic.

On behalf of the Connecticut Counseling Association (CCA), I am providing testimony in support of LCO 3614-AAC TELEHEALTH, and specifically the parts of the bill supporting expansion of telehealth providers, allowance for audio only telehealth, and payment parity regardless of where the covered health service took place. It is also our understanding that both Licensed Professional Counselors (LPCs) and Licensed Professional Counselor Associates (LPCAs) are included under the definition of telehealth providers but would request that this is made explicit on Line 58, after counselor, the following be added: “or professional counselor associate licensed under chapter 383c of the general statutes”.

Telehealth has provided an opportunity for our most vulnerable community members to continue to have access to their behavioral health, medical, and specialty care. With the implementation of the Governor’s various Executive Orders, it has also allowed those experiencing increased mental health symptoms related to the pandemic to begin essential treatment through telehealth. Additionally, the move to telehealth under these provisions has made it possible for providers to reach a greater number of people in need of treatment who otherwise may have been unwilling or unable to participate, including those in underserved areas, those with transportation issues, or those in need of specialized care.

Moreover, counselors have indicated that some clients are reporting feeling more comfortable with telehealth, specifically the ability to participate in audio-only treatment. In fact, some providers have found that the transition to telehealth has been embraced by their clients, and it is their hope to continue to offer telehealth as a supplement to their practice, allowing increased flexibility and accessibility for the behavioral health consumer. Thinking of a possible second outbreak in the fall or looking ahead to flu season, having access to telehealth treatment with these provisions could also be considered a proactive preventative measure in the spread of contagious illness. Access to telehealth with the provisions enacted in this proposed bill LCO 3614 allows behavioral health consumers the option to be seen in person or over an online platform, giving them a choice that best fits their needs.
The provisions in the Governor’s recent Executive Orders expanding telehealth to include the use of audio-only sessions was critical in addressing two of the biggest challenges in telehealth treatment—one, clients not having access to a computer or device with a camera and two, the technical difficulties experienced with using any of the various platforms. Therefore, CCA supports the continued allowance for audio only telehealth as proposed in LCO 3614.

For treatment with those clients who do not have access to a computer with a camera, an approved platform can often be used on a cell phone or other mobile device. That would seemingly solve the face to face issue. However, issues with consistent connectivity, freezing frames, and lack of audio still remain and have frequently been reported with both computers and mobile devices, disrupting the flow of sessions. Some providers have reported having such significant issues with logging in or maintaining connection using the telehealth platforms that they have been forced to cancel sessions for the day, resulting in loss of income as well as inconsistent treatment for the client. These technological challenges were further complicated when insurance companies that allow for telehealth were still requiring that only a certain platform be used. If connection with that platform is unreliable for whatever reason, their ability to utilize telehealth for treatment is absent or limited at best. In fact, providers have been resistant to engaging in telehealth in the past because of these restrictions and technological issues, thereby limiting consumer access to quality treatment. The ability to employ the provider’s desired platform and to switch to an audio-only session when these issues arise has been imperative to maintain connection with clients during this time.

In summary, the implementation of the Governor’s Executive Orders related to behavioral health care have been integral to providers’ ability to provide effective treatment for new and existing clients via telehealth. Telehealth as proposed under telehealth legislation LCO 3614 provides consumers with more options and better access to treatment by expanding allowed covered telehealth providers and allowing for audio-only sessions. Behavioral health providers are doing significant work over telehealth, and therefore it is also hoped that legislation can be passed to require payment parity between telehealth and in person sessions as well.

Thank you for providing me with an opportunity to provide support for LCO 3614 TELEHEALTH on behalf of the Connecticut Counseling Association and my fellow counselors.

Respectfully,

Julie Yale, LPC
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