



Advancing telehealth knowledge, practice and policy in Oregon

June 22, 2020

The Joint Interim Committee on the First Special Session of 2020

RE: The Rural Telecommunications Investment Act

Chair Courtney and Members of the Committee

The Telehealth Alliance of Oregon (TAO) would like to urge your consideration for the Rural Telecommunications Investment Act of 2020.

Much attention is being paid to healthcare at this time and rightly so. Telehealth has taken center stage as the tool for delivering services to patients during this time of the Pandemic. TAO is very supportive of the temporary regulations governing telehealth and hope that some of these temporary regulations will be permanently codified when the Pandemic is over.

Currently, many telehealth services are being delivered to patients where they live. Many of our citizens' homes are located in areas that are poorly served or not served at all by broadband communications. These unserved/underserved areas are located all over the state, but most often, they occur in rural areas. In order for healthcare services to be delivered to patients in these areas in a safe, timely and effective manner there needs to be broadband infrastructure located in homes and clinics. The relaxed rules have allowed us to use non-HIPAA compliant technologies that do not require broadband to deliver healthcare services in these areas in order to meet their immediate needs. This is only a band-aid and not a very effective one. If we are to continue to deliver services to our most vulnerable and underserved populations when these non-HIPAA compliant technologies can no longer be used, we need to have broadband located where patients need it, not where it is convenient or more profitable to build.

In Oregon we need funding to help grow the infrastructure not just for healthcare, but for education and business as well. Without financial support at the state level many who are attempting to build out our broadband infrastructure will not succeed, as they will not have access to the k

knowledge and matching funds needed to secure the large grant offerings from the Federal government.

Broadband is an issue of equality. It divides rich from poor, seniors from younger groups, and urban from rural. Those who are financially able to afford broadband and live in easily served areas are those who will receive healthcare via telehealth. Those who do not, don't always receive healthcare when they need it or not at all. Those who go without effective healthcare until their condition is acute can end up costing payers, be they Medicaid, Medicare or private, more to manage than if they had received the needed care.

My Mom died in 1995. She lived on a ranch in eastern Oregon. Broadband efforts were just beginning and most certainly weren't available in her area. She went without access to care for 5 years because she was bedridden and could only be transported by ambulance to see a specialty provider in Spokane. Even in those times, transport by ambulance or plane cost a fortune and because Medicare did not pay for this service, my family would have been bankrupted by the transportation costs. There was no viable solution in 1995 to extend and/or improve the quality of her life. Today there should be no excuse. Patients with similar conditions need to have access to the care they need when they need it.

So, no more excuses. Let's enact the new provisions for the State USF surcharge outlined in LC39. We can then begin to build the kind of infrastructure that will provide real healthcare equality for our most vulnerable populations.

Thank you for your consideration.

Respectfully submitted,
Catherine Britain, Executive Director
Telehealth Alliance of Oregon