

HB 2508 - Family Physicians Support Telehealth Reimbursement Parity

On behalf of the Oregon Academy of Family Physicians, Oregon's largest specialty society, I wish to convey our support for HB 2508. Not only has telemedicine been a financial life-line for primary care clinics during the pandemic, it has also proven to be a safe and tenable means of delivering care when an in-person visit is not easily accessible, and a convenient and desirable option for patients. Oregonians deserve the option to see provider virtually for any number of reasons, and health care providers deserve to be reimbursed for the care they provide.

The following comments seek to address some of the concerns laid out by health insurers in opposition to this bill:

1. Value Based Payment

While we agree with health insurers that we ought to move toward value-based payment, and that telemedicine should be a part of that, the 2020 Primary Care Spend Report tells us that only 5.8% of primary care reimbursement from Oregon's commercial health insurers are non-fee-for-service. If providers were already receiving adequate per-member-per-month payments to serve patients, this bill would be unnecessary, but that is not the case. Section 7 of this bill ensures adequate reimbursement for telemedicine services whether in the form of fee-for-service or alternative payment methodologies.

2. Providers Should Decide When In-Person Care is Necessary

Physical evaluations are necessary for certain conditions, for clear lack of improvement, and at times when patients may have limitations speaking for themselves. **This bill importantly maintains autonomy for providers as experts to determine when in person evaluation is critical to patient safety.** We expect that as telehealth technology continues to evolve, what is considered safe and reasonable will need to evolve with that, and providers are best equipped to make evidence-based decisions.

3. <u>Telemedicine Will Undoubtedly Improve Health Equity</u>

Because this bill includes telephonic and interpreter services, it has tremendous potential to help people who have historically lacked access to care, including people in rural communities, low income and vulnerable populations, people of color, immigrants, hourly wage workers, people with chronic conditions and people with disabilities. The hidden costs of poverty such as lost wages, lost time, or difficulty with transportation make in-person visits difficult for many Oregonians. **Oregon can address patients'**

common access barriers by financing telehealth services that are available in the most convenient format for patient (e.g. audio only) and in patients' primary language.

4. *Increased Access Saves Money*

By increasing patients' ability to rapid forms of medical advice, we negate a portion of in-clinic services that were unnecessary, and you prevent delays in diagnosis that result in emergency visits. Additionally, increased flexibility for how providers can manage their patients, allowing providers to better manage a patients' chronic diseases.

Thank you for your consideration of HB 2508 and we urge you to join us in supporting this legislation.

Respectfully, Sam Barber