



April 26, 2021

Chair Patterson, Vice-Chair Knopp, and Members of the Senate Committee on Health Care:

On behalf of NARAL Pro-Choice Oregon, we respectfully request the committee's support for HB 2508A. This bill will support and advance access to essential health care services through the use of telemedicine. We are thankful for our partner health providers who have worked tirelessly through this pandemic to provide essential care, and we are thankful for Oregon's elected leadership, who value and support the innovative strategies and methods our health care partners have developed to meet the needs of patients throughout the public, and who have been instrumental in the development of this important legislation.

NARAL Pro-Choice Oregon is dedicated to building and sustaining a movement that uses the political process to guarantee every individual the right to make personal decisions regarding the full range of reproductive choices, including preventing unintended pregnancy, raising healthy families, and choosing legal abortion.

We believe that access to high quality, equitable, and culturally-informed health care is a human right, and should not be limited by geography, transportation, or time that in-person care can often require, and that can prove as a barrier for busy working families. HB 2508A codifies many of the advancements achieved in telemedicine policy during the COVID-19 pandemic, and ensures that we continue to think about ways to provide care in ways that ease the burden on individuals most impacted by health disparities. HB 2508A provides Oregon with the opportunity to make those telemedicine expansions permanent and to ensure that patients, providers, and carriers can utilize telemedicine to its fullest potential.

Over the course of the pandemic, we've seen access to critical health services be expanded in new ways, while our safety-net providers work to provide essential health services to the Oregonians who are most likely to experience gaps in care, including rural communities, patients without access to reliable transportation, houseless patients, and those working to manage comorbid conditions, including mental and behavioral health issues.

Due to systemic racism and a long history of discriminatory public policy, low-income and patients experiencing homelessness are disproportionately BIPOC, making parity for telephone appointments a critical factor of racial equity. African Americans make up just 2% of the population in Oregon, but 6% of the houseless population; Native Americans make up 1.1% of the total population and 4.2% of the houseless population. In Multnomah County, for example, 48% of people who are unsheltered are BIPOC while making up only 30% of the population, and nearly three out of four people experiencing homelessness are people with disabilities. To allow safety-net health clinics to continue to serve all patients, it is critical that telehealth visits, including telephonic, be reimbursed at the same rate as in-person visits. Furthermore, limiting reimbursement parity to video-only will only exacerbate the digital divide's impact on who can or cannot choose to utilize telemedicine.

NARAL Pro-Choice Oregon urges your support for this important bill.

Sincerely,

Christel Allen  
Executive Director  
NARAL Pro-Choice Oregon