



Honorable Prusak and members of the House Committee on Health Care,

On behalf of the Multnomah County Community Health Center, we write to voice our **strong support of House Bill 2508** that will increase coverage and reimbursement by Oregon Medicaid and commercial payers of health services delivered using telemedicine.

Multnomah County's Community Health Center is the largest Federally Qualified Health Center in Oregon, providing high-quality, patient-centered health care and related services to communities across Multnomah County. Together, our eight primary care clinics, seven dental clinics, nine student health centers, seven pharmacies, and laboratory services serve more than 60,000 patients per year, with a focus on people who otherwise have limited access to health care. Sixty percent of our patients identify as people of color, and more than 40 percent are best served in a language other than English; we serve clients speaking more than 100 different languages. Nearly 20 percent of our patients have no insurance, 95 percent of our clients live below 200 percent of the Federal Poverty Guideline and nearly 2,000 of our patients report experiencing houselessness.

Community health centers, including Multnomah County's, are providers within the CCO networks, providing care to Oregon's underserved populations, including one in four Oregon Health Plan members.

COVID-19 significantly disrupted our ability to provide in-person services; while services remained available throughout the pandemic, at one point less than 15% of all primary care visits were in person. ^[1] Our teams invested more resources in patient outreach, care support, and developed innovative ways to reach patients to assure that they could continue to work with their care teams and seek services in multiple ways. The ability to offer telehealth services has helped thousands of families – a primary care provider recently shared the impact and value of this work:

“I recently saw an adolescent client for a visit which also required lab work. My team was able to schedule a follow-up telemedicine appointment to review lab results – because the parent worked swing shift hours, traditional in-person office visits and hours are not a good option for their family. During the call, the parent also shared how much stress she had been experiencing and challenges for the whole house. A separate visit created for the parent in the moment so we could immediately address her health needs and stress; she was experiencing significant mental health challenges and ultimately shared that she was experiencing domestic violence at home. If we were not able to offer her the help in that moment and that way, we would have missed the opportunity to provide time-sensitive health care and safety help for her.”

This was only possible because of the transformative, patient-centered approach to telehealth policy. Without the existing telehealth parity measures, this family, and more than 20,000 patients would have lost access to care this year.^[2]

Investments in telehealth outreach and access have also provided us the opportunity for real-time patient feedback and analysis of the impact on patient care satisfaction. From a patient survey during the height of the pandemic last summer, our community shared how telehealth was transformational for their access to their doctor or dentist.^[3] 25% of respondents stated that they preferred to access care virtually with an additional 22% stating that they viewed both in-person and virtual care options as valuable. When asked about satisfaction with care, patients who tried telehealth and patients who continued to use in-person service both responded that they were very satisfied with their treatment, including across all races and ethnicities.

We have the unique opportunity to keep providing these options to patients. Telehealth is not right for every patient – but it does allow patients more doors to care. Offering virtual services also means that more in-person care options can be tailored for specific engagement and care management. We find that the more ways for patients to safely and confidently engage in care results in stronger relationships, higher levels of trust, and overall better health outcomes for all patients. For safety-net clinics and organizations, telehealth payment parity makes this a reality that does not rely on rationing care or exclusions of uninsured patients.

Thank you for the opportunity to submit testimony in support of HB 2508. We believe that expanding telehealth to all Oregonians is the next step in transforming health care in Oregon, and we respectfully urge you to vote yes on this critical legislation because all Oregonians deserve equal access to telehealth.

[1] Proportion of in person primary care office visits available due to COVID19 in March 2020 at all community health center locations.

[2] Relative number of patients who received telehealth appointments between March 22, 2020 and December 30, 2020 for all services in the community health center.

[3] Community Health Center Patient Survey of Rockwood and North Portland Community Health Center Patients, August 2020.