



February 3, 2021

The Honorable Rachel Prusak  
Chairwoman, Oregon House Committee on Health Care  
Oregon House of Representatives  
900 Court St. NE, H-489  
Salem, Oregon 97301

The Honorable Cedric Hayden  
Vice-Chairman, Oregon House Committee on Health Care  
Oregon House of Representatives  
900 Court St. NE, H-383  
Salem, Oregon 97301

The Honorable Andrea Salinas  
Vice-Chairwoman, Oregon House Committee on Health Care  
Oregon House of Representatives  
900 Court St. NE, H-282  
Salem, Oregon 97301

**RE: ATA SUPPORT FOR HOUSE BILL 2508**

Dear Chairwoman Prusak and Vice-Chairs Hayden and Salinas,

On behalf of the American Telemedicine Association (ATA) and the over 400 organizations we represent, I am writing to express our support for House Bill 2508, which requires public and private payers to reimburse health care services provided via telemedicine and revises Oregon's definition of telemedicine as it relates to insurance.

The ATA is the only national organization completely focused on advancing telemedicine. We are committed to ensuring that everyone has access to safe, affordable, and high-quality care whenever and wherever they need it. This empowers the health care system to provide services to millions more patients each year in an efficacious manner. The ATA represents a broad and inclusive coalition of technology solution providers and payers, as well as partner organizations and alliances, working to advance industry adoption of



telehealth, promote responsible policy, advocate for government and market normalization, and provide education and resources to help integrate virtual care into emerging, value-based modalities.

House Bill 2508 serves as an important advancement in Oregon's state telemedicine policy. The proposed legislation mandates that public and private insurers reimburse providers for health care services delivered to patients via synchronous and asynchronous technologies alike. Alongside this advancement, the bill creates a more permissive, technology-neutral insurance-related definition of telemedicine, declaring that health services delivered by way of electronic information and telecommunications technologies qualify as telemedicine services to be covered by insurers and enabling the expansion of telemedicine services pursuant to a declared state of emergency.

The ATA applauds the legislature's efforts to expand Oregonians' access to affordable, quality health care. In mandating that public and private health plans reimburse providers for health care services delivered via telemedicine, the bill makes it easier for Oregon residents to access high-quality health care at any place and any time without having to worry about the potential financial burdens associated with receiving that care. As far as the rate of reimbursement for telemedicine services is concerned, the ATA maintains that state policymakers should set rational guidelines that are both fair to the provider of such services and reflect the cost savings offered to the health care system by the effective use of telemedicine technologies. The ATA suggests that the provisions in this legislation regarding reimbursement parity be amended to reflect those guidelines.

Additionally, the ATA commends the legislature for seeking to adopt a technology-neutral insurance definition of telemedicine. Across the United States, patients and consumers are seeking more affordable and efficient ways to access the health care they need. Using innovative telehealth technologies, practitioners and patients are able to interact with each other from the comfort and safety of their private residences. In addition to two-way audio and video communication technologies, asynchronous modalities, such as emails and text messages, allow providers and patients to



communicate on their own time, expediting the diagnostic and treatment processes. Moreover, asynchronous technologies, which can function in unserved and underserved areas, enable Oregon residents to receive quality health care services even if they are among the 300,000 Oregonians who do not have access to high-speed internet capabilities. In addition, providers are increasingly relying on remote patient monitoring technologies to push care out of the hospital or doctor's office and into the home, where providers can continually monitor, collect and analyze a patient's physiologic data on a real-time basis to create a care management plan. We encourage the committee to also adopt this telehealth definition in the occupations and professions code (Title 52) to build consistency.

Most pertinently, the expanded use of telehealth to respond to the COVID-19 pandemic has evidenced the usefulness of a variety of technological modalities in the delivery of virtual care, allowing practitioners to triage patients with symptoms of the disease and maintain continuous contact with those not afflicted with COVID-19.

The ATA thanks you for your efforts to create more navigable pathways for Oregonians to receive quality health care at a reasonable cost through the appropriate use of technology. We urge you and your colleagues to pass House Bill 2508 in the interest of enhancing Oregon's telemedicine infrastructure in the midst of a health crisis. Please do not hesitate to let us know how we can be helpful in your efforts to advance common-sense telemedicine policy in your state. If you have any questions or would like to discuss further the telemedicine industry's perspective, please contact me at [kzebley@americantelemed.org](mailto:kzebley@americantelemed.org).

Kind regards,

A handwritten signature in black ink, appearing to read "Kyle Zebley".

Kyle Zebley  
Public Policy Director  
American Telemedicine Association