



UNIVERSITY OF HAWAII SYSTEM

Legislative Testimony

Testimony Presented Before the
Senate Committee on Commerce and Consumer Protection
Wednesday, February 24, 2021 at 9:30 a.m.

By

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SB 1258 SD1 – RELATING TO TELEHEALTH

Chair Baker, Vice Chair Chang, and members of the Committee:

Thank you for this opportunity to testify in **strong support** of SB 1258 SD1, which allows for standard telephone contacts for telehealth purposes.

This bill amends language in HRS §346-59.1, §431:10A-116.3, §432:1-601.5, and §432D-23.5 to allow standard telephone contacts for telehealth services. During the onset of the Coronavirus Pandemic, it was found that this language needed to be clarified in order to align with other CMS telehealth exemptions that allowed for the use of telephone (i.e., audio only) for telehealth visits.

The COVID-19 pandemic has resulted in an increased use of telehealth services and further demonstrated the digital divide – problems with devices, internet, sufficient bandwidth or digital literacy. Telephonic only (audio only telehealth visits) have proven absolutely critical for maintaining connection and care for the elderly and many others who do not have access to smart phones, iPads or computers with webcams. The proposed amendments expand access to health care services especially for patients and families who live in rural areas and/or are otherwise unable to receive the care they need.

Many of the highest-risk patients reside in Medically Underserved Areas, are part of Medically Underserved Populations, or reside in federally-designated health professional shortage areas. Elderly, as well as medically- and socially-complex patients often face transportation barriers. These determinants of health, as well as social- or cultural-isolation can often impede seeking care or follow-up after a doctor's appointment or hospitalization.

Even as pandemic-related restrictions are reduced, telehealth is here to stay. This measure greatly improves the continuation of patient care for this most vulnerable population. Thank you for this opportunity to testify in strong support of this measure.