



UNIVERSITY OF HAWAII SYSTEM

Legislative Testimony

Testimony Presented Before the
Senate Committee on Commerce and Consumer Protection
Tuesday, February 22, 2022 at 10:00 a.m.

By

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SB 2073 SD1 – RELATING TO TELEHEALTH

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

Thank you for the opportunity to present testimony today. The John A. Burns School of Medicine (JABSOM) **supports SB 2073 SD1** which allows for standard telephone contacts for telehealth purposes.

Since 1999, the use and expansion of telehealth services and technology in Hawai'i has been recognized as a way to increase access and reduce delays to health care, particularly in rural areas of the state. 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. We note that Medicare and Medicaid pay equally for telephonic and telehealth services, recognizing the importance of telephonic services. 42 CFR § 410.78 defining telehealth services provides as follows:

“(3) Interactive telecommunications system means, except as otherwise provided in this paragraph, multimedia communications equipment that includes, at a minimum, audio and video equipment permitting two-way, real-time interactive communication between the patient and distant site physician or practitioner. For services furnished for purposes of diagnosis, evaluation, or treatment of a mental health disorder to a patient in their home, **interactive telecommunications may include two-way, real-time audio-only communication technology if the distant site physician or practitioner is technically capable to use an**

interactive telecommunications system as defined in the previous sentence, but the patient is not capable of, or does not consent to, the use of video technology. A modifier designated by CMS must be appended to the claim for services described in this paragraph to verify that these conditions have been met.” Emphasis added.

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 the opportunity to provide testimony on this bill.