



# THE BUCKEYE INSTITUTE

## **Telehealth Can Improve Access to Health Care and Lower Costs**

Interested Party Testimony  
House Insurance Committee  
House Bill 679

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June 9, 2020

As Submitted

Chairman Brinkman, Vice Chair Antani, and Ranking Member Boggs, thank you for the opportunity to submit written testimony on House Bill 679.

My name is James Woodward, I am the economic research analyst at **The Buckeye Institute**, an independent research and educational institution—a think tank—whose mission is to advance free-market public policy in the states.

The Buckeye Institute **applauded** the temporary regulatory changes adopted by the Trump and DeWine administrations that increased access to telehealth care, and we support Ohio’s current effort to make such access permanent. Our **testimony** and extensive writings over the years encouraged broader use of telehealth for **general medical** care and **mental health** care, so we commend House Bill 679’s telehealth coverage for psychologists, professional clinical counselors, independent social workers, and independent marriage and family therapists.

**Years** of research **demonstrate** telehealth’s potential to improve access to care, lower costs, and increase flexibility for patients and providers. These benefits took on special significance at the beginning of the Covid-19 crisis, but will be no less important as that crisis wanes. Patients have experienced firsthand the value that telehealth provides and will be reluctant to see telehealth access restricted again. As Seema Verma, director of the Centers for Medicare and Medicaid Services, **said** of telehealth in April, “the genie is out of the bottle.”

Even though much remains to be learned about broadening telehealth services, they already appear to hold significant promise for helping **rural** and **elderly** patients, making it so important to expand telehealth access without hobbling its potential to **improve outcomes, lower costs**, and promote **future innovations**. House Bill 679 takes solid steps in the right direction, but the bill could be improved.

Unfortunately, House Bill 679 generally requires patients to receive an initial in-person visit before receiving telehealth services, and then demands subsequent annual in-person check-ups. Such requirements may undermine an obvious benefit of broad-based telehealth: avoiding the time and expense of in-person consultations, especially in rural areas. Fortunately, the bill allows care providers to waive the initial-visit requirement, but annual check-up decisions also should be left to providers and patients to avoid **unnecessary care and expense**.

Another concern is the bill’s requirement of secure video capabilities to use telehealth even though the Department of Health and Human Service’s **definition** of telehealth includes telephone landlines. Video visits require a readily available internet connection, possibly one with high-speed capabilities that many patients may not yet have. **Experts** agree that access to more traditional and familiar methods of communication—like telephones—are particularly important in rural areas. We **support** the DeWine administration’s plans to expand broadband access in Ohio precisely because access remains limited in some regions, but until that access is sufficiently expanded telephone landlines should be permissible for telehealth services.

House Bill 679 also should include respiratory care professionals, genetic counselors, radiologist assistants, and cosmetic therapists on the list of licensed health care providers that may offer

telehealth to patients. This list should include as many health care professionals as possible, who then should be allowed to consult with their patients about the best course of treatment. A broader list of eligible providers will improve access to care and expand the knowledge necessary for making better telehealth service decisions.

House Bill 679 goes a long way towards expanding health care access in Ohio. With several modifications, the bill can pave the way for a more innovative, adaptable, and advanced health care system that can better meet the needs of patients and providers through technology. Telehealth's day has been a long-time coming and House Bill 679 should take advantage of its full arrival.

The Buckeye Institute appreciates the opportunity to submit written testimony on this critical issue.



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