



June 9, 2020

Chairman Tom Brinkman
House Insurance Committee
77 S. High St., 13th Floor
Columbus, Ohio 43215

Dear Chairman Brinkman,

On behalf of the Ohio Association of Health Plans (OAHP), thank you for the opportunity to offer written interested party testimony on House Bill 679, legislation regarding telehealth services and coverage in Ohio's commercial and Medicaid markets.

The Ohio Association of Health Plans (OAHP) is the state's leading trade association representing the health insurance industry. OAHP's member plans provide health benefits to more than 9 million Ohioans through employer-sponsored coverage, the individual insurance market, and public programs such as Medicare, Medicaid and the Federal Insurance Marketplace. Our members offer a broad range of health insurance products to Ohioans in the commercial marketplace and are committed partners in public programs.

Telehealth is an important tool to help bridge access and affordability in healthcare. That is why health plans have been proactively championing and advancing innovative telehealth options for years. In fact, consumers and employers are demanding access to telehealth options as they see the financial, time, accessibility, and other benefits it brings.

COVID-19 has further highlighted the need for affordable, accessible telehealth options. Considering this further need, many plans have implemented proactive plan specific telehealth initiatives to ensure access. Further, many plans have already implemented ODI's telehealth rules concerning coverage, which are effective January 1, 2021¹.

OAHP agrees with the underlying intent of HB 679 - to ensure Ohioans have access to affordable telehealth options. Health plans are innovating in the telehealth space at an unprecedented speed. Therefore, OAHP believes HB 679 would benefit from further refinement to continue to allow for innovation and consider what is already occurring in the market today. For example, OAHP questions the need for the language at lines 102-117. While we understand the intent of the language - to account for small interactions between patients and providers - we do not think at this time that the language is necessary. These interactions are already accounted for in the value based contracting process. Further, if a value-based contract is not in place, the proper billing coding exists to ensure providers have a mechanism for reimbursement. Therefore, the market is already solving and accounting for these interactions.

OAHP appreciates and supports that HB 679 continues two important affordability protections for consumers. Specifically, the bill does not require payment parity for telehealth services and continues to disallow charging a facility fee for a telehealth visit. Telehealth tends to be offered at a lower price than traditional in-person healthcare visits at a bricks and mortar location as building and associated expenses are no longer utilized to the same extent. This results in direct savings for consumers, employers, taxpayers, and ultimate purchasers of healthcare.

¹ https://iop-odi-content.s3.amazonaws.com/static/Legal/Bulletins/Documents/2020-02_COVID-19.pdf

Thank you for the opportunity to comment on HB 679 on behalf of the more than 9 million Ohioans member plans provide health care coverage. Again, OAHP agrees with the intent and goals of HB 679, and we applaud the work and effort that the sponsors and this committee have put into this bill. We stand ready to work with policymakers to develop meaningful solutions that address access and affordability of health care.

Sincerely,

A handwritten signature in black ink, appearing to read "Gretchen Blazer Thompson". The signature is fluid and cursive, with the first name being the most prominent.

Gretchen Blazer Thompson
Director of Government Affairs