



Senate Energy and Public Utilities Committee
HB 13

Testimony of

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Chairman Wilson, Vice Chairman McColley, and Ranking Member Williams, my name is Emily Murphy and I am the Director of Health Affairs and Project ECHO™ at Northeast Ohio Medical University (NEOMED). I want to thank you for the opportunity to provide written testimony for House Bill 13 on behalf of my organization and Project ECHO™ as a whole.

NEOMED was founded in 1973 in rural Rootstown, Ohio and has been committed to training the next generation of physicians, pharmacists, and health researchers through education, research, and service, to improve the health, economy and quality of life of the diverse communities of Northeast Ohio. One way we do this is through Project ECHO™.

I want you to imagine for a moment that you are a primary care doctor in a remote community in Southern Ohio. You have a very medically complex patient and you are struggling to identify a care plan. You have tried everything you can think of and yet your patient's health continues to decline. Making matters worse, you are professionally isolated, the closest hospital is 40 miles away, and your patient does not have any transportation to seek care elsewhere.

At NEOMED we are using a telementoring and guided practice model called Project ECHO™ to help providers just like the one I described. Project ECHO™ improves access to care, improves health care outcomes, decreases health care costs, and reduces professional isolation. At NEOMED we have eight centers of excellence that use broadband internet to build a practical professional support system with complex interdisciplinary collaboration through even the most remote and underserved areas in Ohio. Our ECHO program just this year has had more than 3,200 health care providers in attendance at ECHO sessions we have presented. When we began this programming, we were reaching a small number of counties in our region. Currently, we have welcomed participants from all but 22 Ohio counties, as well as from 14 states and six countries. The potential reach of this global initiative and influence is tremendous if only we let it.

As you already know, Substitute House Bill 13 both streamlines and restructures the Residential Broadband Expansion Program. Rather than requiring local governments to initiate and manage the application process, the sub bill allows broadband providers to make a direct application to the Department of Commerce for funding to overcome cost barriers. The grant application and approval timeline has also been shortened. This is exciting because it allows the broadband to be deployed faster and it will allow more health care providers to access programs like ECHO, and sooner. Perhaps more importantly, it creates two categories of eligible areas: underserved and Tier One Areas. These underserved areas described by the bill are the exact reason why NEOMED adopted Project ECHO™. As stated previously, our goal is to improve the health, economy, and quality of life of the diverse and underserved communities in Ohio and beyond. Passing this bill is critical to that goal.

On behalf of NEOMED, a state institution of higher education, strongly urge the passing of this bill to improve access to care and to improve care outcomes in rural and underserved areas in Ohio.

Chairman Wilson, Vice Chairman McColley, and Ranking Member Williams, thank you for your consideration of my testimony and our request for inclusion to testify for HB 13.