



**HB 33 Interested Party Testimony  
Jordan See, Teladoc Health  
Senate Finance Committee  
Chairman Mark Romanchuk  
May 11, 2023**

Chairman Romanchuk, Vice Chairman Wilson, Ranking Member Ingram, and members of the Senate Medicaid Committee thank you very much for the opportunity to provide interested party testimony on HB 33. My name is Jordan See; I am the Director of Government Affairs at Teladoc Health.

For those of you unfamiliar with Teladoc Health, we are the world's oldest and largest telehealth company. Today in Ohio, over 1.7 million Ohio Medicaid beneficiaries are eligible for one of Teladoc Health's services, with 169 Ohio-licensed physicians in our Medicaid managed care network supporting Molina, CareSource, and Aetna. It is important to note that all Teladoc Health providers are licensed by their respective professional

licensing boards in Ohio. **In short, our providers are your providers.**

We are seeking an amendment to HB 33 that would ensure Ohio Medicaid provider enrollment protocols keep up with innovation in digital health care. Today, some Ohio-licensed providers have trouble enrolling as an in-state Medicaid provider because the system does not acknowledge an out-of-state address as eligible to enroll. This issue has been problematic due to Ohio Administrative Code 5160-1-42.1, which precludes the opportunity for Teladoc Health and many other virtual care companies to utilize delegated credentialing simply because we are a virtual healthcare provider platform without a bricks-and-mortar location in Ohio or contiguous states. If an Ohio-licensed provider is using a technology platform to treat patients in Ohio and the platform is technically headquartered out of state, then the current policy requires the Ohio-licensed provider to hold a valid license in that other state to enroll as a Medicaid provider in this state. This makes no sense. **When telehealth is used, it is**

**considered to be rendered at the physical location of the patient – not the provider’s location and certainly not the headquarters of the software the provider uses to conduct a virtual visit.**

Additionally, ORC Section 5165.95(C)(1)(a) states that a "physician licensed under Chapter 4731 of the Revised Code to practice medicine... is "eligible to provide telehealth services covered pursuant to this section." Whereas ORC 5165.95(C)(2)(b) also allows "a professional medical group" to "submit claims for Medicaid payments for providing telehealth services."

Nothing in the existing statute is at odds with the changes in the requested amendment. The statute does not say that, when providing telehealth services, Ohio-licensed practitioners who are physically out of state should be treated differently than those physicians who are physically in-state. Nor does the statute say that professional medical groups need an in-state

address to provide telehealth services to Ohio Medicaid patients.

The consequences of this outdated policy ultimately fall on the patients: they experience longer wait times for telehealth visits or must forego virtual care altogether because the existing pool of Ohio-licensed Medicaid providers may have no availability to see them. They potentially lose access to specialty care and the convenience that telehealth can provide.

The amendment being offered in House Bill 33 makes a simple change to existing law. It clarifies and ensures that all Ohio-licensed telehealth providers who do not treat Ohio patients in a bricks-and-mortar office can still enroll as in-state Medicaid providers, regardless of the physical address of their organization. **Doing so places provider enrollment for Medicaid on par with current commercial health plan enrollment policy.** And with this revision, Ohio will expand access to healthcare and boost its pool of eligible in-state Medicaid providers.

I also want to make it abundantly clear that this amendment impacts the entire telehealth industry, not just Teladoc Health, here in Ohio. And this amendment only resolves this specific Medicaid enrollment issue for Ohio-licensed providers. Some who have expressed concern for this amendment have alleged that it will lead to less accountability, lower quality health care, and potential patient abuse. **Nothing could be further from the truth. These licensed providers have met all the qualifications and high standards for licensure in Ohio. They are held accountable by the very same Ohio licensing boards that oversee providers who only offer services in person.** They should not be treated any differently simply on the basis that they live in another state, or they use a telehealth platform to treat patients.

This amendment has been introduced, passed, and signed into law during the 2023 Legislative Session in Virginia, Tennessee, Kentucky, and is awaiting the Governor's signature in Indiana.

We urge you to support the amendment to House Bill 33 as a commonsense measure that will save money, improve health outcomes, and mitigate provider shortages.

Chairman Romanchuk and members of the Senate Medicaid committee, thank you for allowing me to testify today and allowing me to share Teladoc Health's perspective on amending HB 33. I will be glad to answer any questions the Committee may have.