

HB 324 testimony

Chair Schmidt, Vice Chair Deeter, Ranking Member Somani, and members the House Health Committee, my name is Dr. Ashley Brant, DO, MPH. I am a board-certified obstetrician-gynecologist, a board-certified family planning subspecialist, and a fellow of the American College of Obstetrician Gynecologists (ACOG). Additionally, I conduct research on the use of telemedicine in obstetrics and gynecology. **I write to express my opposition to House Bill 324.**

Telemedicine is proven to be a safe and effective mode of delivery for a wide range of healthcare services, including in obstetrics and gynecology. Numerous studies have demonstrated that patients can safely receive evaluation, counseling, and prescriptions remotely through telemedicine. More than one-third of adults use telemedicine to access healthcare annually. In my practice, approximately 15% of healthcare encounters are virtual in nature. Arbitrary restrictions will impair the ability of people to access care in a timely manner and will disproportionately harm women and individuals in rural and underserved geographic areas. As a physician, I want all patients to have access to care when they need it. **HB 324 creates medically unnecessary barriers to health care access.**

Physicians and other healthcare professionals are skilled in determining the specific care plan for each individual patient. We are adept at recognizing when in-person care is necessary due to the need for a physical exam or other in-person assessment tools. This bill also oversteps by mandating, without exception, practices that physicians already employ when clinically indicated, such as counseling patients on the risks and benefits of treatment options and recommending follow-up appointments. **HB 324 infringes on the practice of medicine and usurps health care professionals from determining the mode of care (telemedicine vs. in-person), determining the specifics of patient counseling, and determining the follow-up plan.**

In summary, there is no evidence that HB 324 will improve safety or protect patients. In contrast, it limits access to evidence-based health care and infringes on the practice of medicine. **I implore the House Health committee to reject this bill.**

Thank you for considering my testimony.

Sincerely,

Dr. Ashley Brant, DO, MPH, FACOG