



Alan Levy, MD

On behalf of the
Ohio Psychiatric Physicians Association
and
Ohio State Medical Association

Before Members of the
House Finance Committee

**In Support of Telemedicine Reimbursement Policy
included in HB 49, Main Operating Budget**

April 26, 2017

Chairman Smith, Vice Chair Ryan and Ranking Member Cera, thank you for the opportunity to testify today in support of the telemedicine reimbursement policy included in the substitute version of HB 49, the FY18-19 budget.

My name is Alan Levy, MD. I am a board-certified psychiatric physician, who specializes in the treatment of patients with mental disorders, which include schizophrenia, bipolar disorder, major depression and many other illnesses of the brain. For the past 33 years, I have had a solo private practice in Columbus.

I am here today speaking on behalf of the OPPA, a statewide medical specialty association whose nearly 1,000 physician members specialize in the diagnosis, treatment and prevention of mental illness including substance use disorders. In addition, I am speaking on behalf of the OSMA, which represents 16,000 physicians, residents and medical students across all specialties also living and practicing in Ohio. More importantly, I am here speaking on behalf of the hundreds, perhaps thousands, of Ohioans who need treatment for a mental illness and/or a substance use disorder.

Telemedicine (including tele-psychiatry) is a powerful tool that can connect people with mental health and addiction treatment services. It is a key innovation in support of health care delivery reform, it is being used in initiatives to improve access to care and care coordination, and it is being utilized to reduce the rate of growth in health care spending. It is especially helpful in connecting a psychiatrist (of

which there are too few of us) with individuals who live in rural, underserved areas, or who find it difficult to be treated in person (due to time, cost or cultural barriers to seeking mental health care). The use of telehealth is rapidly growing. Health care providers treated less than 350,000 patients worldwide using telehealth technology in 2013. By 2018, that number is expected to grow to 7 million.

Several years ago, Ohio's Medicaid program wisely began reimbursing for telemedicine services provided by psychiatrists in Community Mental Health Centers and there has been an increase in utilization each year. Ohio physicians, especially those practicing psychiatry and addiction medicine, have indicated a desire to reach more patients through the use of telemedicine, however, lack of coverage and reimbursement by commercial payors has remained a primary obstacle.

The state of Ohio lags behind 30 other states that have already passed laws which created a structure for reimbursement of telemedicine services. Those states have payment parity between telehealth services and in-office services. The language included in substitute HB 49 aligns Ohio with these other states.

Ensuring that telemedicine services are covered and reimbursed by payors in Ohio will go a long way in expanding access to physicians who can treat mental illness and addiction disorders. Given the opioid crisis we are currently dealing with – as well as the fact that many individuals who suffer from addiction also have a second, co-occurring mental illness which must be treated – now is the time to make this critical change.

The Ohio Psychiatric Physicians Association and the Ohio State Medical Association applauds your efforts to ensure that more Ohioans have access to treatment for mental health and/or addiction disorders, which reimbursement for telemedicine services can provide.