



Ohio Association of Community Health Centers  
Julie DiRossi-King, COO  
Ohio Senate Health Committee  
Proponent – House Bill 122  
September 29, 2021

Good morning, Chairman Huffman, Ranking Member Antonio, and members of the Senate Health Committee, on behalf of the Ohio Association of Community Health Centers (OACHC), thank you for the opportunity to submit written proponent testimony regarding House Bill 122, telehealth legislation.

The OACHC supports all of Ohio's 57 Federally Qualified Health Centers and FQHC Look-Alikes (more commonly referred to as Community Health Centers), providing care to more than 854,000 Ohioans across 431 sites throughout 75 of the 88 counties. Community Health Centers are non-profit health care providers with patient-majority boards that meet the specific needs of the community they serve. For more than 55 years, Community Health Centers have provided integrated whole person care, often providing medical, dental, behavioral health, pharmacy, vision, and other needed supplemental services under one roof, regardless of one's insurance status.

Community Health Centers are required to offer comprehensive services in areas of high need and have been pioneering telehealth to address geographic, economic, transportation, and linguistic barriers to health care access. Health care leaders all across the country, Community Health Centers also continue to incorporate and grow the use of various telehealth modalities as equity tools to overcome health disparities for underserved populations. Telehealth is providing access and the ability to deliver needed health care to patients who are unable to have an in-person visit with a provider, or plainly prefer the virtual experience and the convenience it brings.

As Ohio Community Health Centers continue to respond to the opioid epidemic, COVID-19 pandemic, and the recent Delta surge, they have greatly expanded their use of telehealth. In addition to supporting increased access to timely care for our underserved populations, Health Centers are also using these tools to overcome persistent clinical workforce shortages, decrease of "no-show" rates, maintaining provider-patient relationships and easing of language barriers.

OACHC supports House Bill 122, legislation allowing the use telemedicine beyond a pandemic. We hear from our member Health Centers that audio only visits with counselors and providers are extremely productive and should be allowed to continue or augment treatment. In some substance use disorder cases, telehealth services literally save lives. Ensuring that patients have adequate access to care virtually, as well as in-person, remains essential for improving population health and achieving health equity.

OACHC supports HB 122 and its efforts to streamline regulations by the various regulating Boards. In addition to consistency among regulating entities, OACHC asks for the committee's favorable consideration of a clarifying amendment:

- In line 492 of the bill, under eligible providers it lists FQHC. OACHC respectfully asks for the language to include the full definition of FQHC in the bill by referencing the code in order that it also includes FQHC Look-Alikes: A federally qualified health center or federally qualified health center look-alike, as defined in section 3701.047 of the Revised Code;

OACHC strongly supports HB 122 and the ability to use telehealth to serve Ohio's communities and most vulnerable populations. As providers of integrated care, Community Health Centers both welcome and need consistent and standardized regulations for telehealth moving forward. We appreciate the opportunity to share our feedback on behalf of Ohio's Community Health Centers and look forward to working with the General Assembly on HB 122. If you have any questions or would like to further discuss, please contact Julie DiRossi-King, Chief Operating Officer at (614) 884-3101 or [jdirossi@ohiochc.org](mailto:jdirossi@ohiochc.org).