

February 13, 2020

The Honorable Paul Pinksy Chair, Education, Health, and Environmental Affairs Committee Maryland General Assembly Miller Senate Office Building, 2 West Annapolis, Maryland 21401

The Honorable Shane Pendergrass Chair, Health and Government Operations Committee Maryland General Assembly House Office Building, Room 241 Annapolis, Maryland 21401

RE: Support for SB 402 and HB 448 Telehealth Provisions

Dear Chairs Pinksy and Pendergrass:

On behalf of Teladoc Health, I urge you to support SB 402 and HB 448. As Vice President of Government Affairs at Teladoc Health, I have responsibility for all 50 states and all federal work relating to telehealth. I have the privilege of working with state legislators to develop good public policy and seeing firsthand what works and what does not. It is important to note that while Teladoc Health supports this bill, we are here at the request of our clients and members who want the same access to telehealth that they have in the four states that surround Maryland and the District of Columbia; the only exception to that is Delaware, where legislators have indicated they intend to address this with legislation parallel to SB 402/HB 448 this year.

As the world's largest telehealth company, Teladoc Health serves our clients in all 50 states, the District of Columbia and over 130 countries. As background, in Maryland, Teladoc Health performed the first virtual visit in 2005. Currently, there are over 785,000 lives covered by Teladoc in the state. We have 146 Maryland board certified and licensed physicians. We performed over 26,000 virtual visits in Maryland in 2019. Over 3,100 employers in Maryland offer the Teladoc Health benefit. In 2019 we saved Marylanders and its citizens over \$12.6 million dollars.

We supported the original telehealth legislation that placed Maryland as a leader in the country. When the Board of Physicians filed the rule that took good policy and amended it to restrict access to Marylanders, we submitted a comment letter in opposition with sound reasons why. I've talked to the Executive Director to try and ascertain why the Board felt the need to take this action. I'm still not sure of the motivation, but I have heard that Board members wanted to change the Rule because of concern that "asynchronous" could lead to bad actors in the state and pill mills.

Where is the clinical data that supports this action? There is none. There is no empirical evidence to support that an audio-visual interaction is superior to an interactive audio consults with access to the patient's medical history. Further, 46 other states have adopted what is referred to as a "technology neutral approach". Everything in telehealth rests upon the standard of care; the standard of care is the same for telehealth encounters as it is for in-person visits. If in the health care practitioner's professional discretion, she can treat the patient using audio, the visit proceeds; if the practitioner needs the video component, then it only proceeds with video. If the practitioner believes that telehealth is not appropriate, she advised the patient to seek in-person care.



SB 402/HB 448 will do one thing; it will remove the requirement for a video first virtual exam as long as the health care practitioner has access to and reviews the patient's medical history. It will allow for PATIENT CHOICE and physician discretion. It will place Maryland back where it was in access to care before the Board of Physicians took this unnecessary action. I urge you to allow Maryland to have CHOICE in their health care by using a tool that will increase access and decrease costs. I urge you to vote YES on SB 402 HB 448.

Please consider TDOC a resource should you have any questions regarding telehealth. Thank you again for your dedication and resolve to pass good telehealth policy in the state.

Bests regards,

Claudia Tucker

Vice President of Government Affairs

Teladoc Health, Inc.