

**Written Testimony of the Connecticut Orthopaedic Society  
LCO 3614- An Act Concerning Telehealth  
Insurance and Real Estate Committee – Tuesday, July 21, 2020**

Senator Lesser, Representative Scanlon and distinguished Members of the Insurance and Real Estate Committee, on behalf of the more than 200 orthopaedic surgeons of the Connecticut Orthopaedic Society, thank you for the opportunity to provide testimony on **LCO 3614, An Act Concerning Telehealth.**

Thanks to Connecticut's leadership and responsible citizens, our State is one of a handful that has successfully reached key metrics, including declining hospitalization rates and deaths due to COVID-19. This bill seeks to ensure the continued coverage and reimbursement for telehealth.

One of the many responses to minimize the public's risk was the swift implementation of telemedicine. Commercial insurers, Medicare and Medicaid responded quickly and appropriately to cover telehealth visits with parity reimbursement. The physician community also quickly transitioned to telemedicine in order to provide access to quality care for the thousands of patients that had their office appointments cancelled during the "stay at home" critical times of the pandemic. Both were instrumental in allowing patients access to medical diagnosis and care in the safety of their homes.

We must remain vigilant. While in person office visits remain the preferred venue for care in many situations, we have thousands of patients that have comorbidities, limited mobility and/or are elderly that place them in a high-risk category for in office care. Many healthy patients also prefer the efficiency of telemedicine visits as they involve less travel time and time away from work, they can do other things at home or at work while waiting for the physician including and family members can sit in on this visit or in the case of young children watched at home without potentially being exposed or exposing physician office staff to COVID-19. As we all navigate the uncertainty of the pandemic with an unpredictable trajectory and possibility of another wave occurring at anytime, the ongoing use of telehealth with parity reimbursement is imperative to the safety of our patients, staff and our own family members.

The orthopaedic community appreciates the Committee's proactive legislation to ensure telehealth access through June 2021, and urges the Committee to eliminate all criteria restrictions for audio only telehealth. Many of our colleagues have found that our elderly patients do not have the capability to conduct video telemedicine and the audio only will assist in allowing us to continue to provide access to care for this "at risk" population. Indigent patients may have limited computer and smartphone access. Furthermore, the time spent by the physician including reviewing patient records, documenting the visit, and talking with the patient in a telephone visit is often comparable to a telemedicine visit. The adage one picture is worth a thousand words often applies here with respect to getting patients to accurately describe their physical exam findings over the phone and physicians explaining to patients their diagnosis and treatment options.

Furthermore, the requirement that a physician who is providing telehealth care must determine if the patient's health coverage provides for telehealth services encumbers and burdens physician practice at a time that we can ill afford to do so. We continue to ensure safety protocols are met for in office patients and staff, which has increased practice expense, diverted staff time from their other responsibilities, and prolonged the length of patient visits. In light of the pandemic and the extensive use of telemedicine, we respectfully request that the Committee delete this language and substitute the requirement that every commercial insurer licensed to do business in Connecticut continue to fully cover all insureds for telehealth visits until at least June 2021. While the reimbursement parity component for telemedicine will need to be addressed, the current language requiring physicians to accept Medicare reimbursement level for telehealth services if a patient is uninsured or not fully insured is unreasonable. Placing the onerous on the physician community to determine if the patient is insured, the level they are insured and if that insurance covers telehealth visits (audio only and/or video component) will place another layer of administrative burden on our practice and negatively impact our reimbursement levels at a time when most orthopaedic practices are still trying to adapt to decreased patient volume and increased costs.

We respectfully request that edits and amendments to this bill be made to accurately reflect public safety, patient need, practice administrative restrictions and the significant financial resources of the health care insurers. We all must do our part, please assist us as we do ours.

Thank you for your consideration.

Respectfully submitted,  
Michael Aronow, MD  
Hartford, CT  
President, CT Orthopaedic Society