



## Telemedicine Services Are Critical for Maintaining Health Care Accessibility in Rhode Island

“The telemedicine budget article is all about increasing access to preventive and primary care for our most disenfranchised patients.” - [Dr. Mathew Malek, Medical Director, Thundermist Health Center](#)

“We all know that even before the pandemic we could not meet all of the behavioral health needs of Rhode Islanders, and that need is increasing. We need to do what we can to meet that need. Access to telemedicine services is a relatively easy way for us to do that.” - [Peter M. Oppenheimer, President, Rhode Island Psychological Association](#)

“In some instances, telemedicine has the opportunity to help a patient AND save the health care system time and money. In other instances, telemedicine can cost the system money while providing less effective patient care.” - [Elizabeth Catucci, President, Northern Rhode Island Chamber of Commerce](#)

As the COVID-19 pandemic continues—and the opioid overdose and suicide epidemics persist—the provision of safe and accessible health care services has been increasingly challenging in Rhode Island. Although in-person health care visits are occurring with protective safety measures in place, getting to those visits remains very difficult for many people. This is especially true for those with chronic health conditions, in need of transportation, and/or lacking adequate child care assistance. Rhode Island’s health insurers and health care providers must be congratulated and thanked for their rapid adaptation of policies and procedures to expedite the use of telemedicine services. Throughout the nation, telemedicine—whether through traditional secure platforms that providers’ offices have put into place, through more commonly used audio-visual tools (such as Facetime or Skype), or through audio-only telephone calls—has become a critically important tool in the effort to slow the spread of COVID-19 and to increase access to needed health care services.

The Governor’s Telemedicine Executive Order has been in place since March to permit the current COVID-19 emergency requirements, which otherwise would not be possible under the Office of the Health Insurance Commissioner’s (OHIC) authority. These actions taken during the COVID-19 pandemic have ensured that all health care services typically covered under an enrollee’s plan that are deemed clinically appropriate to be provided remotely are covered. Telemedicine has served as an effective tool in both reducing infection risk at health care facilities, and in enabling health care providers to care for their patients during this unprecedented time.

Data has shown that certain populations and neighborhoods have been hit particularly hard by COVID-19. Addressing health inequity is critical, and recent Medicare data shows equal access to care being delivered via telemedicine.

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“Increasing and maintaining access to telemedicine during the pandemic and beyond can serve as a vehicle to increase access to vital health care services for all children and families, but especially for children and caregivers in already vulnerable populations.” - [Kaitlyn Orona, Rhode Island Kids Count](#)

“AHIP is concerned that it is not sound policy to codify RI’s emergency telehealth measures...especially without examining their effects on the health care system.” - [America’s Health Insurance Plans](#)

“We believe it is critically important as an access issue, as a health equity issue, and as a social justice issue, that we enact this telemedicine provision so that we can better utilize telemedicine throughout the pandemic and beyond.” - [Karen Malcom, Protect Our Healthcare Coalition](#)

*All quotes were taken from verbal and written testimony from the RI House Finance Committee telemedicine hearing on 7/15/2020*

There are also compelling reports that individuals facing behavioral health concerns—as well as children who lost in-person special services as a result of the pandemic— are dependent on this expanded telemedicine as a life-line to the assistance they need to be well and to progress, in the safety of their homes.

Rhode Island has made significant advances in containing the spread of COVID-19 through collaboration that will need to continue if we are to maintain the policies that have helped keep Rhode Islanders safe. Encouraging innovative health care policy is at the core of OHIC's work, and the Office will continue to work within its legal authority towards policies that protect Rhode Islanders and improve our health care system. It is in the interest of the state that we maintain telemedicine coverage requirements that ensure patients' access to health care services while helping to prevent the spread of COVID-19.

Legislative action will be required to extend the current level of telemedicine access for a longer period of time than is covered by Governor's Executive Orders and to allow patients and providers to schedule and best accommodate telemedicine visits through the middle of next year. Governor Raimondo recently submitted proposed changes to the state's Telemedicine Act to the General Assembly for their consideration as an addition to the FY2021 state budget. Current state law limits the use of telemedicine in our state, primarily by excluding telephone-only care, limiting the sites of care where telemedicine can be conducted, and by not addressing the important issue of reimbursement for health care providers. Fifteen other states have already enacted laws that require telemedicine reimbursement to providers be at the same rate as if the visit had occurred in-person.

The Governor's "New Telemedicine Budget Article" proposes to make changes to our state law to allow many of the current COVID-19-related policies to stay in place until June 30, 2021. The proposed Article also calls for a comprehensive review of telemedicine data and best practices to be reported with recommendations to the Legislature by December 31, 2020. Only the General Assembly can change existing or enact new state law. The Office's role in informing the Legislature about this important budget article and in participating in the proposed comprehensive review of data and best practices to be reported back to the Legislature with recommendations, is clearly within OHIC's legal authority. OHIC's role reflects an obligation to provide legislators with the information they seek to make policy decisions based on facts and consumer needs surrounding telemedicine, during and after this pandemic.

## Notice on Small Business Self-Funded Health Care

In response to concerns raised by some local businesses, OHIC would like to make small businesses aware of some of the potential risks associated with self-funded health plans that may not be fully disclosed at the time of purchase. To view the notification go on our website or [click here](#).

## Join us on August 18 for our next Health Insurance Advisory Council meeting

In an effort to keep the public and its members safe, the Health Insurance Advisory council (HIAC) has transitioned to virtual meetings in lieu of in-person meetings. Despite the difficult circumstances brought on by COVID-19, council members have been able to carry on with necessary and important discussions, with participation from the public and OHIC employees. The next HIAC meeting will take place via Zoom on [Tuesday, August 18th at 4:30pm](#). To attend the meeting, click on this link on August 18: <https://zoom.us/j/92538802372>



Rhode Island Parent Information Network (RIPIN) offers health insurance help to any Rhode Islander with any kind of health insurance. If you have a question, call RIPIN at 401-270-0101



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