



Date: March 21, 2022
To: Public Health Committee
From: Ben Shaiken, Director of Government Relations, The Alliance
Re: S.B. 375 An Act Concerning Telehealth

Good morning, Senator Abrams, Representative Steinberg, Senator Somers, Senator Hwang, Representative Petit and members of the Public Health Committee:

My name is Ben Shaiken, Director of Government Relations at the CT Community Nonprofit Alliance (The Alliance). The Alliance is the statewide association of community nonprofits. Community nonprofits provide essential services in every city and town in Connecticut, serving hundreds of thousands of people in need - and employing 115,000 people. They are an important part of what makes Connecticut a great place to live and work and an important piece of our economy.

Thank you for the opportunity to provide testimony in **on S.B. 375 An Act Concerning Telehealth**.

While we appreciate the intent of the bill to extend the sunset of last year's telehealth legislation, [Public Act 21-9](#), by one year, we encourage the legislature to instead eliminate the sunset entirely and keep the protections for providers passed by the legislature forever.

Public Act 21-9:

1. **Pays for telehealth at the same rate as in-person visits and allows services to be delivered from any setting:** Payment should be based on the treatment provided, not the location of from where the service is provided. Telehealth has added costs to providers who are maintaining physical offices as well as paying costs for telehealth.
2. **Allows telephonic/audio only sessions:** This is important to ensuring access to care for people who do not have access to technology needed for video conferencing
3. **Allows the use any HIPAA compliant platform:** This allows providers to meet clients where they are, on platforms they are comfortable with and knowledgeable using.

Community nonprofits have been on the front lines of the coronavirus pandemic, ensuring the continuity of community services to children, families and communities. Because the authorization to provide telehealth services in Connecticut's Medicaid program came out the day before the state largely closed two years ago, most providers did not have telehealth infrastructure in place prior to the pandemic. They had to design a system overnight, including the purchasing of laptops, online security and privacy systems, virtual meeting platform licenses, issuance of smartphones to regular patients. These investments have been made at enormous expense, much of it unplanned, with promising results that suggest continuing to use these systems will lead to increased service delivery, efficiency and effectiveness.

While services are now available in person again, telehealth continues to be an option for many people who want to receive behavioral health treatment. For nonprofit providers, it has helped them connect with more families, especially those who have childcare or transportation barriers that make it hard to receive treatment in person.

The provisions of Public Act 21-9 enable all providers to be able to continue to provide telehealth and allow people to access those services even if they do not have access to technology. These provisions should remain in statute so people can continue to receive behavioral health treatment in the manner in which they prefer.

Thank you for your time and consideration.