

Matthew Eyles
President and CEO

August 28, 2019

Federal Communications Commission
445 12th Street, S.W.
Washington, D.C. 20554

Submitted electronically via FCC.gov.

RE: Promoting Telehealth for Low-Income Consumers (WC Docket No. 18-213)

Dear Secretary Dortch:

Everyone should be able to get the care they need, when they need it. Telehealth is an important way we deliver on this commitment, offering patients and consumers the convenience they deserve to improve and expand their access to care. With this commitment in mind, America's Health Insurance Plans (AHIP¹) thanks you for the opportunity to offer comments in response to the Federal Communications Commission (FCC) proposed creation of the Connected Care Pilot, published in the *Federal Register* on July 30, 2019.

AHIP supports the FCC's decision to launch the Connected Care Pilot and hopes that experience with the Pilot will support policymaking that will allow telehealth to continue its growth trajectory.

We applaud the Commission for investing in affordable broadband Internet access to improve access, particularly for low-income Americans and veterans. Leveraging broadband to connect underserved Americans with health care services can help not only improve access, but also affordability of care. America could save more than \$6 billion annually in health care costs if patients routinely engaged in remote consults for appropriate medical situations instead of visiting emergency rooms, urgent care centers, and physician offices.² In addition, telehealth can save consumers time and money by decreasing travel to and from doctors' appointments and time away from work; increasing access to high-quality, high-value doctors; and improving access to specialists, regardless of location.

Health Insurance Providers Leverage Telehealth to Benefit Patients and Providers

Understanding the value and potential of telehealth, health insurance providers have embraced it in their strategies to improve affordability, access, and value for patients and consumers. Telehealth has become essential in serving low-income, rural, and underserved communities. Today, telehealth is helping to connect patients and consumers to a wide range of services, including primary care, substance use disorder treatment, dermatology, medication management, radiology, and behavioral health care, and other specialties.

¹ AHIP is the national association whose members provide coverage for health care and related services to millions of Americans every day. Through these offerings, we improve and protect the health and financial security of consumers, families, businesses, communities and the nation. We are committed to market-based solutions and public-private partnerships that improve affordability, value, access, and well-being for consumers.

² See Willis Towers Watson. "Current Telemedicine Technology Could Mean Big Savings." August 11, 2014. <http://www.towerswatson.com/en/Press/2014/08/current-telemedicine-technology-could-mean-big-savings>

Insurance providers are also leveraging telehealth to remotely monitor patient health, helping them to manage chronic conditions like diabetes, high blood pressure, and cardiovascular disease. Insurance providers also encourage consumers to use mobile technology, such as apps, to further empower them to manage their own health.

The benefits of telehealth expand to doctors and hospitals as well. Health insurance providers support the use of Project ECHO (Extension for Community Health Outcomes) programs, which use hub-and-spoke models to enable specialists at academic medical centers to collaborate with primary care clinicians in local communities. Together, they care for patients locally using a team approach that combines specialized clinical expertise and primary care providers who best know the patient. Provider education is also increasingly being offered via telehealth programs.

It is clear that telehealth is a cost-effective approach to improving affordability and access with potential cost savings for consumers, doctors, hospitals, and taxpayers. But none of this is possible without access to broadband.

Expanding Broadband is an Essential Step

By expanding broadband and connected care services to underserved areas, the FCC is investing in the health of individuals and populations who may be most in need of care. Residents of the vast rural areas of the country, for example, suffer from more chronic disease than those in urban areas, yet have more limited access to care. Telehealth and other telecommunications-enhanced access strategies enabled by broadband can alleviate many of the challenges faced by people living in such communities—gaining easier access to routine and specialized care despite remote geography will benefit patients.

In addition to expanding access to broadband, we encourage you to consider the following recommendations to expand access for more Americans:

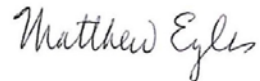
- **Work collaboratively with Congress and the Centers for Medicare & Medicaid Services (CMS) to expand access to telehealth in Medicare.** We commend CMS for expanding telehealth services available through Medicare over the last several years—including telehealth services to treat substance use disorder, end-stage renal disease, stroke, and services under Medicare Advantage. But there are still barriers to universal access to telehealth under Medicare. These restrictions should be lifted to allow telehealth to flourish under the program. As rural communities tend to be older than the general population, it is vital that all seniors have access to high quality care via telehealth.
- **Collaborate with leaders in states receiving FCC grants to support the expansion of broadband for telehealth use across state lines.** States grant medical licenses to providers, which determines in which states they can practice. To be eligible to practice in multiple states, a provider must have a license in each state, either through a reciprocal agreement with another state licensing body or by independently being licensed in other states. Health insurance providers encourage multi-state licensure, which can enable a “national” network of virtual providers and can further address access challenges.
- **Collaborate with leaders in states receiving FCC grants to modernize state rules to support virtual care.** Many states and state Medicaid programs have outdated rules and regulations regarding delivery of virtual services. This includes requirements that remote patient visits start

from a facility, and limitations on the types of providers that can deliver care via telehealth. Health insurance providers encourage states to align rules and regulations that enable the continued growth of telehealth.

- **Collaborate with leaders in Congress to include telehealth in health savings account (HSA)-eligible plans.** To best serve the demands of low-income and underserved Americans, federal legislation should permit first-dollar coverage of telehealth services in HSA-eligible health plans. Existing law restricts what care or services a plan may cover pre-deductible in a high-deductible health plan while retaining HSA-eligibility. As telehealth is not only increasingly popular, it is a means of accessing care that is highly affordable for both the consumer and the health plan.
- **Collaborate with Congress to pass legislation that defines the necessary licensure and training needed to deliver care via telehealth.** While state licensing boards define practice training requirements, Congress should mandate minimum training requirements for the practice of telehealth both within and across state lines to ensure that the highest standards of care are upheld.

We look forward to working with the Commission and federal policymakers on these efforts and appreciate your consideration of our comments.

Sincerely,

A handwritten signature in cursive script that reads "Matthew Eyles".

Matthew Eyles
President and CEO