

2021 HOUSE HUMAN SERVICES

HCR 3014

2021 HOUSE STANDING COMMITTEE MINUTES

Human Services Committee Pioneer Room, State Capitol

HCR 3014
2/10/2021

A concurrent resolution directing the legislative management to consider studying solutions to provider and end-user barriers to access to and utilization of telehealth services in this state

Chairman Weisz opened the hearing at 2:54 p.m.

Representatives	Attendance
Representative Robin Weisz	P
Representative Karen M. Rohr	P
Representative Mike Beltz	P
Representative Chuck Damschen	P
Representative Bill Devlin	P
Representative Gretchen Dobervich	P
Representative Clayton Fegley	P
Representative Dwight Kiefert	P
Representative Todd Porter	A
Representative Matthew Ruby	P
Representative Mary Schneider	P
Representative Kathy Skroch	P
Representative Bill Tveit	P
Representative Greg Westlind	P

Discussion Topics:

- Patient experiences
- Internet services
- Successful telehealth services

Rep Gretchen Dobervich, District 11 (2:53) introduced the resolution, testified in favor of, and submitted testimony #6234.

Courtney Koebele, Executive Director North Dakota Medical Association (2:57) testified in favor and submitted testimony #6371.

Melissa Hauer, General Counsel North Dakota Hospital Association (2:58) testified in favor and submitted testimony #6162.

Rep. Bill Devlin (3:00) made a motion for a **Do Pass Place on Consent Calendar**.

Rep. Kathy Skroch (3:00) second.

Representatives	Vote
Representative Robin Weisz	Y
Representative Karen M. Rohr	Y
Representative Mike Beltz	Y
Representative Chuck Damschen	Y
Representative Bill Devlin	Y
Representative Gretchen Dobervich	Y
Representative Clayton Fegley	Y
Representative Dwight Kiefert	Y
Representative Todd Porter	A
Representative Matthew Ruby	Y
Representative Mary Schneider	Y
Representative Kathy Skroch	Y
Representative Bill Tveit	Y
Representative Greg Westlind	Y

Motion Carried Do Pass Place on Consent Calendar 13-0-1

Bill Carrier: Rep. Karen Rohr

Chairman Weisz adjourned at 3:02 p.m.

Tamara Krause, Committee Clerk

REPORT OF STANDING COMMITTEE

HCR 3014: Human Services Committee (Rep. Weisz, Chairman) recommends **DO PASS** and **BE PLACED ON THE CONSENT CALENDAR** (13 YEAS, 0 NAYS, 1 ABSENT AND NOT VOTING). HCR 3014 was placed on the Tenth order on the calendar.

HCR 3014 Telehealth End User Study Testimony

Good Afternoon Chairman Weisz and Members of the House Human Services Committee. For the Record my name is Representative Gretchen Dobervich and I represent the people of District 11 in Fargo.

HCR 3014 is a study resolution to explore the experiences and needs of the end users of telehealth services, the patients. Telehealth is frequently touted as the solution to access to medical providers in rural areas, and during the COVID-19 pandemic has become a common means of accessing care for many patients in the city too.

Previous studies, policies and investments in telehealth have focused on the provider and payment component of successful telehealth services in ND. I believe it is time to assess if these investments are improving access to services, health outcomes, and for whom.

Utilizing telehealth services requires access to internet service. While ND has great broadband access, not everyone can afford internet service to connect to it. A patient may lack transportation to drive to the closest public library or to the clinic to access an out of town specialist. Utilizing telehealth services require a computer, laptop, tablet or smartphone. Not everyone has this technology.

I have had the privilege of utilizing telehealth services to connect with my medical care team while traveling across the country for work, as well as during the COVID-19 Pandemic to reduce my risk of contracting the virus. I also have the privilege of living in Fargo with very good internet service, the financial means to pay for the service, and a variety of hardware to choose from when connecting to my providers. But what do we know about other users of telehealth services or those who it would increase access to care for, but are unable to use it?

HCR 3014 provides the opportunity to explore the link for successful telehealth services we have yet to learn more about, patients. If we continue to invest in telehealth services as the means of addressing workforce shortages and expanding access to care in rural and underserved areas, this is the next logical step in building a system that achieves its goals.

Mr. Chairman and Members of the Committee, thank you for your time and consideration of HCR 3014. I urge you to vote Do Pass and will stand for questions.



**House Human Services Committee
HCR 3014
February 10, 2021**

Chairman Weisz and Committee Members, I am Courtney Koebele, the Executive Director of the North Dakota Medical Association. The North Dakota Medical Association is the professional membership organization for North Dakota physicians, residents, and medical students.

NDMA supports HCR 3014 which provides that legislative management consider studying solutions to provider and end-user barriers to access to and utilization of telehealth services in the state.

Telehealth technology has an opportunity to address some of the greatest challenges facing the health care system in North Dakota, including access, quality, and cost of care. However, impediments to the adoption and utilization of telehealth persist as a result of uncertainties in health insurance coverage and reimbursement. This, in turn, undermines any potential benefits the health system and residents may reap related to improvements in access to and value of care associated with the use of telehealth technology.

Telehealth directly addresses challenges of access facing North Dakota patients by allowing them to see their providers without the inconvenience—or impossibility—of traveling to the office. This technology can address inequities in access to care for patients who have difficulty traveling to a physician office because of location-, age-, disability-, and/or socioeconomic status-related challenges. Telehealth can be particularly useful in expanding access to psychiatric care, allowing patients receive crucial treatment in the comfort of their home.

Telehealth can also improve the quality of care provided. Uses of the technology span from the most critical ICU patients who can be closely monitored via innovative technologies available from tele-ICU services to providing 24-7 access to urgent care telehealth as an alternative to emergency department visits.

Telehealth can allow for better follow-up care after a procedure by allowing frequent, brief check-ins by physicians and nursing staff, and it can allow for greater care coordination, medication adherence, etc. Many rigorous studies have demonstrated the increased quality of patients receiving telemedicine care.

There are also barriers to the users of telehealth – the patients. There is a lack of internet access and access to devices to facilitate telehealth. Telehealth was essential to keeping people healthy and safe during the pandemic, and it has great potential to increase healthcare access. However, it can also be stressful for those without the proper tools to access telehealth.

A study which provides solutions to these barriers would be good for North Dakota. NDMA urges a DO PASS on HCR 3014.

Thank you.

Courtney Koebele
Executive Director
North Dakota Medical Association



2021 HCR 3014
House Human Services Committee
Representative Robin Weisz, Chairman
February 10, 2021

Chairman Weisz and Members of the House Human Services Committee, I am Melissa Hauer, General Counsel, North Dakota Hospital Association. I am here to testify regarding 2021 House Concurrent Resolution 3014 and ask that you give it a **Do Pass** recommendation.

We support the concurrent resolution's suggestion for a study of solutions to provider and end-user barriers to access to and utilization of telehealth services in this state. Telehealth can improve the delivery of acute and behavioral health services. Many innovations have been made to improve access, quality, and efficiencies in areas such as critical care, teleneurology, telepsychiatry and home health settings. The COVID-19 pandemic has further driven the demand for, and use of, telehealth. We believe this demand will only continue to grow even after the pandemic. So, identifying barriers and solutions to improve access to care is important.

Telehealth can improve quality outcomes, reduce length of stay, readmissions, and emergency room visits, expedite treatment, and broaden access to specialty providers. It also ranks high in patient and staff satisfaction and can result in better management of care. Telehealth services, such as telepsychiatry, can also provide privacy for patients who might otherwise be unwilling to seek such services and it provides access in areas of our state for those who might otherwise have to travel to receive the services.

NDHA supports a study to identify barriers to access to telehealth services which could be used to further increase patient access and quality of care. We ask that you give this concurrent resolution a **Do Pass** recommendation.

I would be happy to try to answer any questions you may have. Thank you.

Respectfully Submitted,

Melissa Hauer, General Counsel/VP
North Dakota Hospital Association

2021 SENATE HUMAN SERVICES

HCR 3014

2021 SENATE STANDING COMMITTEE MINUTES

Human Services Committee
Sakakawea Room, State Capitol

HCR 3014
3/29/2021

A concurrent resolution directing the Legislative Management to consider studying solutions to provider and end-user barriers to access to and utilization of telehealth services in this state.

Madam Chair Lee opened the hearing on HCR 3014 at 9:04 a.m. Members present: Lee, K. Roers, Hogan, Anderson, Clemens, O. Larsen.

Discussion Topics:

- Increased access of telehealth services

[9:05] Representative Gretchen Dobervich, District 11. Introduced HCR 3014 and provided testimony #10884 in favor.

[9:09] Dylan Wheeler, Sanford Health Plan. Provided oral testimony in favor.

[9:11] Courtney Koebele, Director, ND Medical Association. Provided testimony #10886 in favor.

[9:13] Melissa Hauer, General Counsel, ND Hospital Association. Provided testimony #10873 in favor.

Senator K. Roers moves **DO PASS**.

Senator Hogan seconded.

Senators	Vote
Senator Judy Lee	Y
Senator Kristin Roers	Y
Senator Howard C. Anderson, Jr.	Y
Senator David A. Clemens	Y
Senator Kathy Hogan	Y
Senator Oley Larsen	N

The motion passed 5-1-0

Senator Hogan will carry HCR 3014.

Additional written testimony: N/A

Madam Chair Lee closed the hearing on HCR 3014 at 9:14 a.m.

Justin Velez, Committee Clerk

REPORT OF STANDING COMMITTEE

HCR 3014: Human Services Committee (Sen. Lee, Chairman) recommends **DO PASS** (5 YEAS, 1 NAY, 0 ABSENT AND NOT VOTING). HCR 3014 was placed on the Fourteenth order on the calendar.

HCR 3014 Telehealth End User Study Testimony

Good Morning Chairwoman Lee and Members of the Senate Human Services Committee. For the Record my name is Representative Gretchen Doberovich and I represent the people of District 11 in Fargo.

HCR 3014 is a study resolution to explore the experiences and needs of the end users of telehealth services, the patients. Telehealth is frequently touted as the solution to access to medical providers in rural areas, and during the COVID-19 pandemic has become a common means of accessing care for many patients in the city too.

Previous studies, policies and investments in telehealth have focused on the provider and payment component of successful telehealth services in ND. I believe it is time to assess if these investments are improving access to services, health outcomes, and for whom.

Utilizing telehealth services requires access to internet service. While ND has great broadband access, not everyone can afford internet service to connect to it. A patient may lack transportation to drive to the closest public library or to the clinic to access an out of town specialist. Utilizing telehealth services require a computer, laptop, tablet or smartphone. Not everyone has this technology.

I have had the privilege of utilizing telehealth services to connect with my medical care team while traveling across the country for work, as well as during the COVID-19 Pandemic to reduce my risk of contracting the virus. I also have the privilege of living in Fargo with very good internet service, the financial means to pay for the service, and a variety of hardware to choose from when connecting to my providers. But what do we know about other users of telehealth services or those who it would increase access to care for, but are unable to use it?

HCR 3014 provides the opportunity to explore the link for successful telehealth services we have yet to learn more about, patients. If we continue to invest in telehealth services as the means of addressing workforce shortages and expanding access to care in rural and underserved areas, this is the next logical step in building a system that achieves it goals.

Ms. Chairwoman and Members of the Committee, thank you for your time and consideration of HCR 3014. I urge you to vote Do Pass and will stand for questions.



**Senate Human Services Committee
HCR 3014
March 29, 2021**

Chair Lee and Committee Members, I am Courtney Koebele, the Executive Director of the North Dakota Medical Association. The North Dakota Medical Association is the professional membership organization for North Dakota physicians, residents, and medical students.

NDMA supports HCR 3014 which provides that legislative management consider studying solutions to provider and end-user barriers to access to and utilization of telehealth services in the state.

Telehealth technology has an opportunity to address some of the greatest challenges facing the health care system in North Dakota, including access, quality, and cost of care. However, impediments to the adoption and utilization of telehealth persist as a result of uncertainties in health insurance coverage and reimbursement. This, in turn, undermines any potential benefits the health system and residents may reap related to improvements in access to and value of care associated with the use of telehealth technology.

Telehealth directly addresses challenges of access facing North Dakota patients by allowing them to see their providers without the inconvenience—or impossibility—of traveling to the office. This technology can address inequities in access to care for patients who have difficulty traveling to a physician office because of location-, age-, disability-, and/or socioeconomic status-related challenges. Telehealth can be particularly useful in expanding access to psychiatric care, allowing patients receive crucial treatment in the comfort of their home.

Telehealth can also improve the quality of care provided. Uses of the technology span from the most critical ICU patients who can be closely monitored via innovative technologies available from tele-ICU services to providing 24-7 access to urgent care telehealth as an alternative to emergency department visits.

Telehealth can allow for better follow-up care after a procedure by allowing frequent, brief check-ins by physicians and nursing staff, and it can allow for greater care coordination, medication adherence, etc. Many rigorous studies have demonstrated the increased quality of patients receiving telemedicine care.

There are also barriers to the users of telehealth – the patients. There is a lack of internet access and access to devices to facilitate telehealth. Telehealth was essential to keeping people healthy and safe during the pandemic, and it has great potential to increase healthcare access. However, it can also be stressful for those without the proper tools to access telehealth.

A study which provides solutions to these barriers would be good for North Dakota. NDMA urges a DO PASS on HCR 3014.

Thank you.



2021 HCR 3014
Senate Human Services Committee
Senator Judy Lee, Chairman
March 29, 2021

Chairman Lee and Members of the Senate Human Services Committee, I am Melissa Hauer, General Counsel, North Dakota Hospital Association. I am here to testify regarding 2021 House Concurrent Resolution 3014 and ask that you give it a **Do Pass** recommendation.

We support the concurrent resolution's suggestion for a study of solutions to provider and end-user barriers to access to and utilization of telehealth services in this state. Telehealth can improve the delivery of acute and behavioral health services. Many innovations have been made to improve access, quality, and efficiencies in areas such as critical care, teleneurology, telepsychiatry and home health settings. The COVID-19 pandemic has further driven the demand for, and use of, telehealth. We believe this demand will only continue to grow even after the pandemic. So, identifying barriers and solutions to improve access to care is important.

Telehealth can improve quality outcomes, reduce length of stay, readmissions, and emergency room visits, expedite treatment, and broaden access to specialty providers. It also ranks high in patient and staff satisfaction and can result in better management of care. Telehealth services, such as telepsychiatry, can also provide privacy for patients who might otherwise be unwilling to seek such services and it provides access in areas of our state for those who might otherwise have to travel to receive the services.

NDHA supports a study to identify barriers to access to telehealth services which could be used to further increase patient access and quality of care. We ask that you give this concurrent resolution a **Do Pass** recommendation.

I would be happy to take any questions you may have. Thank you.

Respectfully Submitted,

Melissa Hauer, General Counsel/VP
North Dakota Hospital Association