



Committee on Health Coverage, Insurance
and Financial Services
c/o Legislative Information Office
Cross Building, Room 214
100 State House Station
Augusta, ME 04333

Re: LD1: *An Act To Establish the COVID-19 Patient Bill of Rights. Amendment February 12, 2021*

Dear Senator Sanborn, Representative Tepler and other members of the Committee on Health Coverage, Insurance and Financial Services,

We represent the NASW Maine in support of President Jackson's LD1 February 12th amendment. Our state and national organization believes it to be essential to add the audio-only specifications to the COVID-19 Patient Bill of Rights. We also advocate for making permanent the telehealth expansion under COVID-19, including removing site and geographic restrictions, enabling the use of audio-only devices and payment parity with in-person payment rates.

We believe reimbursement and parity for audio-only telehealth to be a health equity issue. Approximately 13% of the US population lacks access to high speed internet, with higher percentages effecting low income, rural, Black, Hispanic and persons living with disabilities (JAMA, 2020) 30% of persons with incomes less than \$30,000 do not have a smart phone. 40% lack access to a computer or high speed broadband (Pew, 2020). From March-June, 2020, 30% of Medicare beneficiaries reported receiving their care through audio-only devices (Health Affairs, 2020).

Behavioral health has seen widespread conversion to telehealth, where evidence shows efficacy in treatment of depression, post-traumatic stress disorder, anxiety, and adjustment disorders (Psychological Services, 2019). I have a brother who is a disabled veteran. Due to quarantine restrictions during the Covid-19 pandemic, he had to rely on telehealth calls with medical staff to continue receiving needed medications and other health services. Julie has witnessed transportation and time as major barriers for patients accessing health and behavioral health care, both of which are remedied through telehealth. As a social worker in clinic with a high proportion of patients who are medically underserved, she has witnessed countless number of patients with anxiety disorder having difficulty getting into the front door or curtailing much needed medical and behavioral health treatment due to the need to be physically present for their care. One patient would cower in the waiting room aisle, sitting far away from others due to their out of control anxiety. She has seen working mothers with multiple children and two jobs unable to come in for their medical care or their counseling due to time. Yet, they now can access care during their breaks and lunch times over the phone.

It is all about providing the right care, at the right time with the right technology. We urge you all to vote yes on LD1 and its authorization of the delivery of health care services through telehealth by audio-only telephone.

Respectfully submitted,

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