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LETTER OF TESTIMONY – Valerie O'Hara, DO, FAAP, ABOM

## IN SUPPORT OF LD 333 An Act Regarding Telehealth HEALTH COVERAGE, INSURANCE AND FINANCIAL SERVICES COMMITTEE

Public Hearing: May 6th, 2021

Senator Sanborn, Representative Tepler and distinguished members of the Health Coverage, Insurance and Financial Services Committee:

My name is Dr. Valerie O'Hara, originally from Aroostook County, and currently live in Blue Hill, Maine. I am a pediatric weight management physician and have practiced in both outpatient clinic and inpatient settings in Maine for over 25 years.

I am representing Maine AAP Telehealth Committee and as a physician practicing in Maine.

I am testifying in support of LD 333 An Act Regarding Telehealth.

As a Pediatrician and Pediatric Obesity Medicine provider, I have utilized Telehealth both before and during the COVID-19 pandemic (2015-present). I would like to highlight how vital telehealth has been and will continue to be specifically to Maine children and families:

1. Access to care they would not have otherwise received
2. Providing evidence-based care to all patients in Maine regardless of geographic or other barriers
3. Sustainability to provide needed care – parity and removal of additional restrictions on prescribing medications.

For my practice, Guidelines requires high intensity and frequency of patient contact with the physicians, nurse practitioners, nurse, dietitians, psychologists, and activity therapists on our clinical team. Telehealth removes significant barriers to this care: travel, time out of work, school, & weather challenges. Our patients obesity related diseases are also managed by our clinicians.

Our clinic provides the same care through both traditional in-person visits and telehealth. Since 2015, our team has treated over 200 children with thousands of telemedicine visits; care that most would not have received if burdened with attending an in-person clinic. Our clinic sees families throughout northern and eastern Maine, many living over 4 hours from my office. Without the use of telehealth, families would not have access to this basic standard of obesity care. Even for those living close by, a "routine" appointment means at least 3-4 hours lost to school and work in addition to cost of gas.

The availability and cost of broadband is a challenge for many of my patients. Therefore, it is vital that both telehealth and audio-only telephonic visits are covered to meet access needs. Both methods have proven invaluable during the pandemic.

On a personal note, being a Maine native, growing up in a rural area of Maine – as well as being a physician in Maine for 25 years, 10 years as a primary pediatrician in Aroostook county, I am passionate that patients in these areas of Maine have equal access to high quality medical care. Telehealth is absolutely vital to this end.

I am attaching my publication re: Utilization of Telemedicine for a Pediatric Weight Management Clinic pre-Covid, during and Post-Covid to provide more details related to this topic and our care.

Thank you for your attention. I am happy to answer any questions.

Respectfully,

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LD 333 An Act Regarding Telehealth