



# HOUSE OF REPRESENTATIVES

2 STATE HOUSE STATION  
AUGUSTA, MAINE 04333-0002

(207) 287-1400

TTY: MAINE RELAY 711

## **Sam Zager**

90 Prospect Street  
Portland, ME 04103

Residence: (207) 400 - 6846

[Sam.Zager@legislature.maine.gov](mailto:Sam.Zager@legislature.maine.gov)

### *Testimony of Rep. Sam Zager introducing*

#### **LD 333 An Act Regarding Telehealth**

#### **LD 1007 An Act to Increase Availability of Health Care Through Telehealth**

#### *Before the Joint Standing Committee on Health Coverage, Insurance, and Financial Services*

*May 6, 2021*

Senator Sanborn, Representative Tepler, and other honorable members of the Health Coverage, Insurance, and Financial Services Committee, thank you for your service and holding this hearing. I'm Sam Zager, and I am honored to represent House District 41 in Portland, and pleased to testify as a cosponsor of LD 1007.

I cosponsored this bill because, I join others in believing we have an opportunity to thoughtfully define the contours of telemedicine as a mode of the delivery of healthcare in Maine. The current executive order has permitted patients in Maine to continue to have access to credentialed healthcare providers via telemedicine to an extent like never before. *The approach suitable for a pandemic likely needs to be refined as we look toward an eventual time when the current pandemic recedes.*

- Here's an example of an ideal use of telemedicine from a couple weeks ago: I have a young adult male patient who had not come for an appointment, despite our outreach, for a few years. I then received a message that he was at a recovery residence, after having relapsed with heroin. Fortunately, his girlfriend, friends, and employer all recognized opioid use disorder as the treatable condition that it is, and convinced him to get urgent inpatient help. He told me that this wrap-around of "tough love" was very powerful and therapeutic. Before he could be lost to follow up again, we arranged a telehealth visit. It was an opportunity for him to seamlessly re-establish primary care; see that his doctor was very invested in his wellness and very much welcomed him back; and afforded us an opportunity to coordinate care with the inpatient treatment facility.

- Here's an example of a visit that would have been catastrophic if we assume telemedicine is equivalent to in-person care. An older woman came for an annual wellness visit, and during the routine exam, I heard with my stethoscope some turbulence in her carotid artery. This was an ominous finding, signaling risk of an impending stroke. We obtained an ultrasound, which confirmed a high-risk lesion, which a skilled vascular surgeon cleared.

As Representative Hymanson mentioned in her remarks introducing LD 333, telemedicine has proven utility, but also definite limitations. We in this 130<sup>th</sup> Legislature see every day how operating in a virtual environment is *functional* but *not ideal* for legislative work. So too with telemedicine, and I would submit, as both a practicing primary care physician and a legislator, that much more legislation than healthcare can be done in the virtual environment.

Thank you for your attention. I would be happy to take questions.