February 15, 2022

Representative Chris Sprowls
Speaker, Florida House of Representatives
The Capitol, Room 420
402 South Monroe Street
Tallahassee, FL 32399

RE: SB 312 – Medicaid Coverage of Audio-Only Telehealth Services

Dear Speaker Sprowls:

On behalf of Floridians living with cystic fibrosis (CF), we write to express our support for SB 312, which would revise the definition of telehealth and allow Medicaid to reimburse for audio-only telephone calls following the expiration of the federal public health emergency. Coverage of audio-only telehealth visits will help facilitate better, more equitable access to care via telehealth for Medicaid members, including those with CF.

Cystic fibrosis is a life-threatening genetic disease that affects more than 30,000 children and adults in the United States, including nearly 1,700 people in Florida. CF causes the body to produce thick, sticky mucus that can clog the lungs and digestive system, which can lead to serious infections. As a complex, multi-system condition, CF requires specialized treatment and medications, and most people with CF receive care at accredited care centers that provide multidisciplinary, coordinated care. Medicaid is a crucial source of coverage for people living with cystic fibrosis – nearly 60 percent of children and a third of adults with CF in Florida rely on the program for some or all of their health care coverage.

Remote care remains an important mode of care for our community and we commend the state for recognizing the long-term value of telehealth for its residents. Telehealth has long been an important care delivery method for improving access in underserved communities, particularly rural areas, areas with physician shortages, and areas with limited access to primary care services. It also helps reduce gaps in access to services and care when in-person visits are not a safe or feasible option, which has been critical during the COVID-19 pandemic. In response to a May 2021 survey, a Florida CF care center reported that approximately half of their CF care visits were conducted over the phone. Access to telehealth is especially important for Medicaid enrollees who, according to a recent report published by the U.S. Department of Health and Human Services, were the highest users of telehealth during 2021 compared to those with other sources of health coverage.1

Audio-only telehealth visits can be an important supplement to in-person care for people with CF. While audio-only visits are not suitable for all health care services and not a substitute for all in-person care, there are a number of aspects of a regular CF visit that can be conducted over the phone. For

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1 https://aspe.hhs.gov/reports/hps-analysis-telehealth-use-2021
instance, clinicians can easily review medical history, current medications, discuss symptoms, and adjust a patient’s care plan. CF patients and care teams can also review data from home spirometers to track trends in lung function, a key health indicator for people with CF. For CF providers, listening to a patient’s cough can also provide actionable information about potential exacerbations.

Coverage of audio-only telehealth visits will help address disparities in access to telehealth services. The option to use the telephone is particularly important for rural and low-income populations who are more likely to have limited access to the internet, a computer, or a smartphone. For CF patients who do not have sufficient broadband to support video conferencing or do not have any internet access at all, telephone visits with their care team are their option for accessing remote care. Providers and patients also encounter technical issues with the platform or broadband, and some patients do not have the technological expertise to navigate video platforms – all of which necessitate the use of telephone visits. A survey of over 400 CF patients and families conducted in fall of 2020 found that nearly one in ten respondents had participated in an audio-only visit. Of these, one in five reported opting for an audio-only health service because of challenges with video technology or lack of reliable internet.2

Recent research also shows that racial and ethnic minorities are less likely to have access to broadband and video technology. According to the aforementioned HHS report, video telehealth rates were lowest among Latino (51%) and Black (54%) individuals, compared to 62% among White individuals. Furthermore, survey data collected by the Pew Research Center shows that 71% of Black and 65% of Hispanic adults report having a broadband connection at home, compared to eight in ten White adults.3 Providing permanent coverage of audio-only services will allow Florida Medicaid to promote health equity by addressing racial and ethnic disparities in video use and broadband access.

By supporting SB 312, you will help ensure long-term access to audio-only services for Florida Medicaid members, including those with CF. Coverage of audio-only telephone visits is critical to making remote care more accessible to Medicaid beneficiaries during the COVID-19 pandemic and beyond.

Thank you for your attention to this important issue.

Sincerely,

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