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February 29, 2024

Assembly Health Committee 1020 N Street, Room 390 Sacramento, California 95814

Support AB1943 (Weber): Telehealth for All

Dear Chair Mia Bonta, Vice Chair Marie Waldron, and Committee Members Cecilia Aguiar-Curry, Joaquin Arambula, Wendy Carrillo, Heath Flora, Vince Fong, Matt Haney, Reginald Jones-Sawyer, Brian Maienschein, Kevin McCarty, Joe Patterson, Freddie Rodriguez, Miguel Santiago, Pilar Schiavo, and Akilah Weber:

On behalf of the California Emerging Technology Fund (CETF), we are writing to urge you to pass AB1943 (Weber), Telehealth for All. AB1943 declares that it is the policy of the State of California to optimize the use of Telehealth to augment and enhance health and medical care for all residents — especially those who are medically-underserved — to improve individual patient outcomes and overall population health.

AB1943 (Weber) leverages the power of Telehealth technology to increase access to quality healthcare and specialized medical expertise for low-income and medically-disadvantaged residents. It builds upon the foundation of AB133 to study Telehealth and AB32 to sustain reimbursement parity for Telehealth visits by patients in Medi-Cal managed health plans. AB1943 is the next step to drive access to health and medical care through the collection of essential data to ensure "Telehealth for All" to achieve Health Equity.

AB1943 leverages the leadership of the California Department of Health Care Services (DHCS) to identify indicators and collect morbidity and mortality data to measure the impact on quantified patient outcomes and population health from increased access to healthcare, especially consultations with specialty care at medical centers that often is out of the reach of medically-underserved populations because community health providers serving low-income residents often lack the resource and capacity for remote access to medical experts. CETF applauds DHCS for development of the Telehealth Research and Evaluation Plan (December 2022) which can serve as a ready-made framework to implement AB1943, thus having minimal impact on the State Budget. AB1943 advances the visionary policy of the Legislature to tap Telehealth as a strategy to increase access and augments the authority of DHCS to collect information and data from providers to enhance accountability and assure transparency in the quest for Health Equity.

Public research findings indicate higher morbidity and mortality rates for all leading causes of death in low-income households and communities of color. Key factors that contribute to these higher mortality and morbidity rates include less access to health care and medical expertise. Therefore, the challenge remains to measure to what extent access to Telehealth—including specialty care through remote patient visits and expert consultations—can reduce adverse health outcomes for residents who are both economically-disadvantaged and medically-disadvantaged. AB1943 is a critical link in the quest for Health Equity in California.

While the COVID-19 pandemic was the impetus for the exponential growth of Telehealth, it also served to illuminate another level of inequities in health and medical care access regarding differentials in the ability for low-income households to use Telehealth. AB1943 establishes forever going forward the principle of "equality in healthcare access" through the Telehealth For All Policy with accountability for improved patient outcomes and population health.

We request your "aye" vote on AB1943 to advance Health Equity.

For additional information or questions, please contact Leticia Alejandrez, CETF Director of Policy and Communications at Leticia. Alejandrez@CETFund.org.

Thank you for your consideration.

Sincerely,

Sunne Wright McPeak
President and CEO

California Emerging Technology Fund

Sunse Wright Motore

Barb Yellowlees Chair, Telehealth Committee California Emerging Technology Fund

Grecowtees