

HCR 3014 Telehealth End User Study Testimony

Good Afternoon Chairman Weisz and Members of the House Human Services Committee. For the Record my name is Representative Gretchen Dobervich and I represent the people of District 11 in Fargo.

HCR 3014 is a study resolution to explore the experiences and needs of the end users of telehealth services, the patients. Telehealth is frequently touted as the solution to access to medical providers in rural areas, and during the COVID-19 pandemic has become a common means of accessing care for many patients in the city too.

Previous studies, policies and investments in telehealth have focused on the provider and payment component of successful telehealth services in ND. I believe it is time to assess if these investments are improving access to services, health outcomes, and for whom.

Utilizing telehealth services requires access to internet service. While ND has great broadband access, not everyone can afford internet service to connect to it. A patient may lack transportation to drive to the closest public library or to the clinic to access an out of town specialist. Utilizing telehealth services require a computer, laptop, tablet or smartphone. Not everyone has this technology.

I have had the privilege of utilizing telehealth services to connect with my medical care team while traveling across the country for work, as well as during the COVID-19 Pandemic to reduce my risk of contracting the virus. I also have the privilege of living in Fargo with very good internet service, the financial means to pay for the service, and a variety of hardware to choose from when connecting to my providers. But what do we know about other users of telehealth services or those who it would increase access to care for, but are unable to use it?

HCR 3014 provides the opportunity to explore the link for successful telehealth services we have yet to learn more about, patients. If we continue to invest in telehealth services as the means of addressing workforce shortages and expanding access to care in rural and underserved areas, this is the next logical step in building a system that achieves it goals.

Mr. Chairman and Members of the Committee, thank you for your time and consideration of HCR 3014. I urge you to vote Do Pass and will stand for questions.