

# **TESTIMONY OF SCOTT MILLER**

## **Senate Bill 2179 – Telehealth Coverage Mandate**

Good Morning, my name is Scott Miller. I am the Executive Director of the North Dakota Public Employees Retirement System, or NDPERS. I am here to testify in a neutral position regarding Senate Bill 2179.

Senate Bill 2179 proposes to do the following regarding coverage of telehealth services:

- Audio-only visits are allowed when other forms of communication are not feasible (i.e., lack of adequate broadband for video visits)
- Payment or reimbursement of expenses for covered health services delivered by means of telehealth under this section may not be less than reimbursement of expenses for covered health services that are delivered by in-person means
- Member cost sharing (copays, coinsurance, deductible) must be the same for telehealth as it is for in-person visits.
- No utilization management can be applied to telehealth that is not also applied to in-person visits
- May not require an in-person visit before allowing telehealth visits

Our consultant, Deloitte, noted the following regarding this bill:

- There will likely be an actuarial impact on the Group Health Plan, but there was insufficient time to determine exactly what that impact might be
- The definition of what constitutes “Telehealth Services” is not clear enough to make an accurate analysis
- Two recent sources of information show that the average telemedicine visit costs less compared to an in-person visit. Since this bill mandates that payment or reimbursement of telehealth be no less than in-person visits, we anticipate this bill will result in increased payments for telehealth services and higher cost for the plan and members through coinsurance/deductibles.

Note this bill does not first require application to NDPERS, but instead applies to all health plans issued within ND. As such, it may not comply with the statutory requirement that all new mandates first apply to NDPERS.

This concludes my testimony.