



**To:** Senate Health and Welfare Committee  
**From:** Jessa Barnard, Executive Director  
**Date:** March 30, 2022  
**RE:** H. 655, Telehealth Licensure and Registration

**The Vermont Medical Society is the largest physician membership organization in the state, representing over 2400 physicians, physician assistants and medical students across all specialties and geographic locations. Please accept this written testimony from VMS in support of H. 655 and establishing a streamlined process for telehealth registration and licensure. The framework and balances created in H. 655 were informed by the extensive stakeholder research and discussion process established by Act 21/H.104, including input from VMS, and we support the language as passed the House.**

As you are well aware from your personal and constituents' experiences - as well as your work on several other pieces of telehealth legislation - telemedicine has seen an unprecedented rise in uptake and utilization during the COVID-19 pandemic. While utilization appears to have plateaued since peaks in Spring 2020, the overall usage of telemedicine has grown and appears to be a "new normal" in medicine.

One of the elements of telehealth practice is considering where and how a health professional needs to be licensed. Prior to COVID and temporary licensing flexibilities being in place in Vermont and many other states, the prevailing regulatory approach has been that a professional must be compliant with all laws, including licensure laws, for the state where the patient is located at the time they receive care. So technically, even to call in a prescription renewal for insulin for a patient while he or she is traveling on vacation you are required to be licensed where that patient is located.

As we move out of the need for temporary COVID regulatory flexibilities, H. 655 will take and make permanent some of the best of what we have learned from the past two years by allowing patients located in Vermont more ability to see or continue a relationship with the health professional of their choosing if that professional happens to be located out-of-state. (As a reminder, Vermont law cannot impact the license types required for Vermont health professionals caring for patients located in another state). H. 655 balances increased flexibility with important guardrails that VMS supports. You have already heard from OPR an outline of the specific elements that the H. 655 registration and licensure processes would include so I will not repeat these details. However, I will share the circumstances when we think the telehealth registration or licensure will be most useful:

- Patient travel to Vermont: allowing an established care provider to provide services to someone in Vermont temporarily for vacation or school
- Vermonters seeking a second opinion or consult with a specialist located outside of Vermont
- Post-discharge follow-up for a Vermonter who was treated in-patient at an out-of-state facility

On the flip side, VMS also strongly supports the guardrails that H. 655 establishes for telehealth registration and licensure. Most importantly:

- Holding professionals to the same standard of care, scope of practice and laws regarding prescribing as in-state health professionals
- Having a limit on the number of patients who can be seen without requiring a full license: once a professional has an extensive relationship with Vermont patients, they should be fully-licensed in Vermont whether seeing patients in-person or via telehealth. Telehealth is simply a modality of practice and not a different kind of practice. So, while we support the faster speed of processing and lower cost of a telehealth registration or license for those professionals who have limited contact with Vermont patients, once that practice starts to be full volume, the type of license should be the same.
- Sufficient fees: while we support a lower fee for telehealth registration and licensure – to help encourage professionals to take advantage of these pathways and to facilitate continuity of care for Vermont patients – we also support these fees being sufficient to prevent professionals holding full licenses from being subject to increases in licensure fees in order to cover the costs of regulating out-of-state telehealth professionals.

Thank you for taking up H. 655 for accepting VMS' written testimony in support of H. 655. We look forward to participating in the mark-up process.