

October 3, 2024

The Honorable Christina Henderson Chairperson, Committee on Health Council of the District of Columbia The John A. Wilson Building, 1350 Pennsylvania Avenue, NW Washington, DC 20004

RE: ATA ACTION SUPPORT WITH AMENDMENTS FOR B25-0948

Dear Chairperson Henderson and members of the Committee on Health,

On behalf of ATA Action, I am submitting the following comments regarding B25-0948, the Certificate of Need Improvement Amendment Act of 2024.

ATA Action, the American Telemedicine Association's affiliated trade association focused on advocacy, advances policy to ensure all individuals have permanent access to telehealth services across the care continuum. ATA Action supports the enactment of state and federal telehealth coverage and fair payment policies to secure telehealth access for all Americans, including those in rural and underserved communities. ATA Action recognizes that telehealth and virtual care have the potential to truly transform the health care delivery system – by improving patient outcomes, enhancing safety and effectiveness of care, addressing health disparities, and reducing costs – if only allowed to flourish.

Our organization appreciates the clarification that this legislation will make to statute, particularly that a certificate of need (CON) is not required for telehealth service providers operating online and capable of reaching patients anywhere in the District. B25-0948 will therefore better align the CON law with its original goal of regulating capital intensive, institutional healthcare organizations seeking to expand brick-and-mortar operations in the District.

While this exemption for telehealth-only entities and the clarification around the CON requirement remain positive steps forward, ATA Action encourages the removal of language creating a Department of Health registration process for telehealth entities, primary care clinics and specialty care services operating in the District. There does not appear to be a clear purpose for this new registration, which would be redundant of other registrations the District already requires of telehealth entities and providers. For example, telehealth entities already must register with the Office of Tax and Revenue and telehealth practitioners treating patients in the district also must be licensed or authorized to practice with the appropriate District professional board.

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The addition of another registration requirement seems more likely to risk additional paper work cost and confusion than any provided benefit to residents of the District.

Thank you for your support for telehealth. While we encourage you to support this legislation, in the interest of most effectively expanding access to telehealth care, we recommend the removal of the registration language for telehealth, primary care clinics and specialty care services operating in the District before advancing the legislation. Please do not hesitate to let us know how we can be helpful to your efforts to advance common-sense telehealth policy in the District. If you have any questions or would like to discuss the telehealth industry's perspective further, please contact me at kzebley@ataaction.org.

Kind regards,

Kyle Zebley

Executive Director

ATA Action