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Statement of Michael Atwood, MD, CHIE
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House Health and Human Services Committee
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Good Afternoon Chairman Hawkins and Members:

I am Mike Atwood, Chief Medical Officer, for Blue Cross and Blue Shield of Kansas. I practiced Family Medicine in Topeka for more than 20 years and understand the value that advancing telemedicine services in Kansas potentially offers to all Kansans. Blue Cross and Blue Shield of Kansas (BCBSKS) has a long history of supporting telemedicine services for our members. Providing access to specialty care in the State where such care would otherwise be unavailable was the prime reason BCBSKS was the pioneer in Kansas in providing coverage for telehealth services for specialty consults when these services are not available in the local community. Subsequently, we added coverage for the originating site fee to help defray the costs of the facility where telehealth services originate. Over the last 20+ years we have paid hundreds of thousands of dollars in reimbursement for telehealth services.

Telemedicine is an excellent tool when it is offered to compliment existing medical services in rural communities or bring select specialty services into underserved areas. Some services are more adaptable to the capabilities offered via telemedicine than others. Psychiatry services, particularly after a physician patient relationship has been established in person, may be continued via telemedicine with excellent results for some patients. Evaluation of abdominal pain is an example of a condition that would not generally be appropriate for evaluation and management via telemedicine. I have concerns with regard to the parity aspects of HB 2206. I believe that the provision calling for reimbursement parity will create a situation that will not serve to advance telemedicine in Kansas in the long term and it will create expectations that will not benefit our members, our providers or health plans. Parity in this regard will also result in increased costs to health insurance products at a time when the citizens of the State of Kansas are already feeling the pinch of significant health insurance cost inflation.

Telemedicine capabilities are expanding rapidly due to advances in technology, but they still have not replaced the need for hands on examination in many circumstances. Continued expansion that recognizes the business need to reimburse in a manner that matches the clinical situation without the one size fits all impact of a mandate would benefit all parties. Insurers are

challenged by both employers and the individuals who buy our coverage to offer high quality products with lower deductibles and premiums. It is extremely rare that state or federal laws and regulations dictate how insurers or any industry for that matter, structure their payment levels to their suppliers. The overall cost impact is likely to be deleterious and the benefit is unproven. On behalf of BCBSKS and our hundreds of thousands of members – Kansans who trust us for their health insurance needs, I ask the Committee to reconsider HB 2206 in favor of a less prescriptive and more market dictated approach to expanding access to telemedicine in Kansas.

