



TESTIMONY RELATIVE TO HOUSE 578 and SENATE 549

AN ACT ADVANCING AND EXPANDING ACCESS TO TELEMEDICINE SERVICES

Joint Committee on Financial Services

July 17, 2017

The Massachusetts Psychiatric Society appreciates the opportunity to comment on these two bills before the Joint Committee on Financial Services related to telemedicine services.

The Massachusetts Psychiatric Society represents over 1700 member psychiatrists in Massachusetts, physicians who are committed to providing outstanding medical/psychiatric care through accurate diagnosis and comprehensive treatment of mental illnesses and substance use disorders.

Telemedicine technology has been in place since 1959 in Nebraska for behavioral health for individual, long-term therapy, group, and Consultation Liaison therapies and medical student education.

In 1969, Massachusetts General Hospital provided these services to families and children at the Logan Airport Health Clinic¹. Since that time, the field has expanded exponentially throughout the world. A growing body of scientific evidence support the facts that telemedicine in behavioral health is equivalent to in-person care in terms of quality of diagnoses and effectiveness of treatment. Additionally, behavioral health studies have shown its successful treatment with depression, anxiety disorders, psychosis, as well as being helpful to patients with cognitive and attentional disorders².

Telepsychiatry has broad ranging applicability in behavioral health to include work with patients in jails and prisons, emergency room settings to connect with outpatients follow-ups, and to assist primary care physicians in their management of patients with co-morbid mental disorders.

There are many prerequisite for good outcomes. These include training excellent clinicians, clinical and administrative teamwork and appropriate technology³. These additional supports recognize that the quality of the treatment will reflect some needed commitment of resources by the team.

Clinical studies have reported the satisfaction of patients and of health care clinician who work in this area of mental health service delivery.

The Massachusetts Psychiatric Society strongly urges parity in payment so that these rates for telemedicine services are equivalent to those rates for the in-person care of patients, when medically appropriate.

For these reasons Massachusetts Psychiatric Society strongly urges support of H 578 and S 549 relative to advancing and expanding access to telemedicine services. This favorable action will ensure coverage and parity in reimbursement for services provided by telemedicine to some of our most vulnerable patients.

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1. <http://www.psychiatry.org/psychiatrists/practice/telepsychiatry/history-of-telepsychiatry>
 2. Shore JH. Telepsychiatry: videoconferencing in the delivery of psychiatric care. *Am J Psychiatry* 170:3, March 2013, 256-262
 3. <https://www.psychiatry.org/psychiatrists/practice/telepsychiatry/clinical-outcomes>