



February 25, 2021

Re: Ro Support for Telehealth Proposals in the 2021-2022 Executive Budget

Dear Chair Krueger, Chair Weinstein, and members of the Committee:

As a New York based healthcare technology company, Ro appreciates the opportunity to express our support for the telehealth reforms in the proposed budget, which will advance access to critical health care services.

Since 2017, Ro has facilitated more than six million telehealth digital healthcare visits in nearly every county in the United States, including 98% of primary care deserts. Ro's vertically integrated primary care platform powers a personalized, end-to-end healthcare experience from diagnosis, to delivery of medication, to ongoing care. With a nationwide provider network, in-home care, and proprietary pharmacy distribution centers, Ro seamlessly connects telehealth, diagnostics, and pharmacy services to provide high-quality, affordable healthcare without the need for insurance.

The use of telehealth technologies has been critical to maintaining a functioning healthcare system in New York through the challenges of the COVID-19 pandemic. We are proud that Ro was able to leverage our expertise to quickly launch the nation's first free, nationwide COVID-19 telehealth assessment, which was accessed by nearly 7,000 New York residents. The broad adoption of telehealth over the last year has allowed both providers and patients (many for the first time) to experience how technology can improve the experience, convenience, and cost of quality healthcare, particularly for patients in underserved areas or for those who struggle to access care in-person. We applaud that the Governor's telehealth proposals will make permanent many of the regulatory flexibilities that facilitated the rapid response to the COVID-19 pandemic, and in particular, we encourage the committee to:

- **Support interstate licensure flexibilities:** We strongly support the proposal to develop an interstate licensure program (Part F) that would authorize practitioners licensed in the Northeast region or surrounding states to provide telehealth services across state lines. While Ro's telehealth network includes physicians and providers who are licensed in all 50 states, we strongly support efforts for licensure portability as a way to ensure patients get care when and where the need arises. Throughout the COVID-pandemic, the Governor's EO to temporarily permit out-of-state clinicians in good standing has facilitated the delivery of care to patients hardest hit by the virus, addressed provider shortages, ensured continuity of care for patients with providers out-of-state, and helped telehealth companies balance provider workload at peak times. We believe an interstate licensure program would help reduce the administrative barriers of allowing out-of-state providers to treat New York patients through telehealth technologies, while at the same time ensuring patient safety and provider accountability to appropriate regulatory bodies.



- **Ensure technology mandates or regulatory frameworks do not exacerbate health inequities:** While Ro believes telehealth is a promising solution to democratizing our healthcare system, we agree with other commentators that New York needs to develop a long-term strategy to address the inequities between those who do and do not have access to telehealth services. Towards that end, we encourage the committee to continue to avoid any clinically unnecessary regulatory barriers to telehealth, such as requirements that providers always use live video (or “synchronous”) visits. Ro’s research¹ has indicated that limited broadband availability can restrict patients’ access to care through telemedicine, but only in states where a synchronous video visit is required by law. Permitting and reimbursing for asynchronous and audio-only telemedicine options enhances the ability of the over 400,000 New Yorkers who lack access to reliable, high-speed internet connections to receive the same level of care as those who are able to utilize high-speed internet capabilities. We strongly support the recommendations made by the Community Health Care Association of New York State “[c]linical decision-making and consumer choice must drive care delivery ...[and] regulations should permit the least intensive viable technology based on clinical considerations and consumer preference.”²
- **Future-proof telehealth regulation:** The quick scaling of telehealth was due in part to New York already having a patient-centered regulatory framework in place that allowed providers to use a variety of technologies to deliver quality care and meet patients where they are. New York can continue to have patient safeguards that ensure the standard of care is met, while also accommodating changes in technology that could improve care, broaden access, lower costs, and facilitate innovation. Ro encourages the Committee to continue to adopt and support “technology-neutral” policies that account for future developments and eliminate uncertainties about implementing new technologies that contain or lower costs and improve quality.

Ro is proud to be based in New York City and we continue to expand our talented team here. We hope the Legislature will make further investments to fuel growth of virtual care in this state and believe the telehealth proposals in the proposed budget are a step in the right direction. We appreciate consideration of the above input and are happy to further assist in any way that we can.

Sincerely,

Adam Greenberg
General Counsel, Ro

¹ L. Broffman, [Requiring Video Calls for Telemedicine May Contribute to Health Care Inequality \(2019\)](#).

² New York State Council for Community Behavioral Healthcare and the Community Health Care Association of New York State Joint Policy Recommendations for a Post-Pandemic Period ([here](#))