

**Senator Roy Blunt**  
**Written Questions for the Record to**  
**Mr. Linkous**  
**“Advancing Telehealth through Connectivity”**  
**Senate Committee on Commerce, Science, and Transportation**

**Question 1:** Many States are wrestling with what constitutes a “patient-provider relationship” when telehealth medicine is involved and these rules vary greatly from State-to-State. How should patients, providers, and States balance the convenience and access of telehealth options with the importance of engaging patients in a dialogue about their health with a physician who can manage their ongoing needs?

**Response:** In general, a state’s patient-provider relationship requirements should be comparable between in-person and telehealth care. For example, urgent care services have no requirement for a pre-existing provider-patient relationship. It should be noted that most states accommodate the requirements for a relationship by the type of health service rendered and other circumstances such as emergencies.

**Question 2:** The Office of Rural Health at the Department of Health and Human Services administers several grant programs to provide funding for projects that demonstrate telehealth networks and improve healthcare services for medically underserved populations. This program can be a particularly important tool in allowing access to medical specialists for rural populations.

How do we adequately expand this program to ensure patients in underserved communities receive access to specialty care?

**Response:** Without Congress providing additional appropriations for such, one approach would be to consolidate the more categorical grant funding for the Office for the Advancement of Telehealth and possibly other HHS programs into one program specifically focusing on the delivery of services to underserved areas.

**Senator Dan Sullivan**  
**Written Questions for the Record to**  
**Mr. Linkous**  
**“Advancing Telehealth through Connectivity”**  
**Senate Committee on Commerce, Science, and Transportation**

**Question 1:** In Alaska, telehealth is hugely important, as it is the primary way many people in rural areas are able to receive healthcare. Some of our health facilities have reported interoperability problems with telehealth software and electronic health records (EHR) software. In addition to the problems caused by this lack of integration, we are also missing out on potential benefits of having fully integrated systems. Have you seen this interoperability problem in other areas of the country? If so, are there possible solutions to the problem?

**Response:** The lack of interoperability for sharing patient data is almost nationwide and comparable between in-person and telehealth services. As the major payor of health care services and the major payor for electronic health records, the federal government seems to have significant opportunities for requiring interoperability.