

July 11, 2016

Administrative Rules and Regulations Subcommittee
Arkansas Legislative Council
1 Capitol Mall
Little Rock, AR 72201

Dear Members of the Administrative Rules and Regulations Subcommittee:

As the Subcommittee takes up the proposed telemedicine regulations promulgated by the Arkansas State Medical Board (“the Board”), the undersigned organizations express concern over a last-minute, substantive change made to these regulations and respectfully request the Subcommittee not vote on this issue until an appropriate public comment period has been reopened.

Our organizations previously supported the proposed language amending Regulation 2 and adding Regulation 38. The Board asked for public comment on these regulations, and we responded to the language supplied by the Board. However, an amendment considered during the meeting, that was not made available to the public before or even during the June 9 meeting, was adopted. The amendment substantively changed telemedicine regulation without allowing for appropriate public comment. It is an amendment that our organizations would have opposed, if given the opportunity to do so, because of its restrictive effects on telemedicine’s ability to expand access to the wide variety of patient, business and community interests for which we advocate. We are disappointed that the Board has taken this action. Further, it is unclear if the Board overstepped its authority by further defining a term already addressed in existing statute.

The Board’s action has real consequences affecting the lives of many Arkansans. This rushed amendment represents a move to restrict telemedicine in Arkansas, to the detriment of our geographically diverse, mobility-challenged and hardworking citizens.

We share state policymakers’ interests in ensuring the highest standards of care for Arkansans, and we believe that telemedicine providers can play a vital role in fulfilling that goal. We believe Arkansas policymakers can successfully incorporate telemedicine into their overall approach towards healthcare delivery, using the remote delivery of healthcare services and clinical information to improve patient-physician collaboration and overall health outcomes in their communities. Arkansas would benefit in many ways, reducing medical costs and unnecessary inconvenience to patients, providers, and businesses across the state.

There has not been sufficient public participation on the regulations which you are reviewing today; as such we believe it is inappropriate for the Administrative Rules and Regulations Subcommittee to vote on this issue. We respectfully ask the Subcommittee to consider these comments, as well as the pressing healthcare needs and preferences of Arkansans, in developing effective telemedicine policy for the state.

Sincerely,

ARKANSAS TRUCKING ASSOCIATION

Shannon Newton, *President*

ARKANSAS FREEDOM FUND FOR VETERANS

Mark Leonard, *Executive Director*

AMERICA'S CAR-MART, INC.

Mike Ward, *Vice President of Associate Support and Development*

AMERICAN FIDELITY GENERAL AGENCY, INC.

Clint Schwab, *Vice President, Agency Director*

CARELINK, THE CENTRAL ARKANSAS AREA AGENCY ON AGING

Luke Mattingly, *CEO and President*

THE ERISA INDUSTRY COMMITTEE

Annette Guarisco Fildes, *President and CEO*

FRANKLIN ELECTRIC CO., INC.

Chelle Turner-Bale, *Benefits Manager*

FRESHBENIES

Reid Rasmussen, *Co-founder and CEO*

MARTIN RESOURCE MANAGEMENT CORPORATION

Jamie Graham, *Benefits Manager*

NEW BENEFITS

Joel Ray, *Chairman and CEO*

LEGACY CAPITAL GROUP ARKANSAS

Lisa Moriconi, *Principal and Senior Consultant*

MICHAEL J. FOX FOUNDATION FOR PARKINSON'S RESEARCH

Barbara Hogg, *Arkansas State Director*

TELADOC

Claudia Tucker, *Vice President of Government Affairs*

TELAMED PLUS

Robert John, *Partner*

UNITED SPINAL ARKANSAS

Erin Gildner, *President & Executive Director*