



August 7, 2020

The Honorable Holly Mitchell
Chair, Senate Budget Committee
State Capitol, Room 5055
Sacramento, CA 95814

The Honorable Phil Ting
Chair, Assembly Budget Committee
State Capitol, Room 5144
Sacramento, CA 95814

Re: Urgent Action - Community Health Center Telehealth/Telephonic Priorities

Dear Chair Mitchell and Chair Ting:

As you know, for California's Community Health Centers (CHCs) to remain viable, they **must** be able to continue to provide virtual preventive and primary medical care to patients. Therefore, as this legislative session comes to an end, ***I implore you to apply the same leadership you have provided throughout this unprecedented public health emergency and adopt trailer bill language to allow telehealth flexibilities and telephonic allowances to be extended indefinitely which will be vital to California's recovery.***

Roughly 1,370 Community Health Centers in California provide high-quality comprehensive care to 7.2 million people – **that is 1 in 6 Californians**. For the membership of Health Center Partners, that's 1 in 5 San Diegans – 20% of the population. CHCs provide the full spectrum of care, from primary care to dental to behavioral health services, to everyone who walks through their doors, regardless of their ability to pay, their health insurance coverage status, or their individual circumstances.

Telehealth and Telephonic Care is Critical for CHCs and their Patients

To ensure continuity of care, CHCs provide telehealth/telephonic care in safe and effective ways to patients, eliminating existing access issues (e.g., transportation, childcare, work schedules, etc.). The current COVID-19 pandemic and social distancing practices have proven how important telehealth is for CHCs and patients, while also increasing patient and provider satisfaction. Because of the COVID-19 pandemic, ***over the last 12 weeks, telehealth and telephonic encounters have accounted for an average of 65% of all patient visits among my 16 member organizations, which serve more than 850,000 patients each year for more than 3.6 million patient visits each year, at 160 practice sites, across San Diego, Riverside, and Imperial Counties.***

CHCs have quickly transformed care due to the COVID-19 pandemic. Telehealth, including telephonic visits, have quickly become key to maintaining timely access to care while mitigating COVID-19 exposure to CHC patients, clinicians and staff. Telehealth is a mode of health care delivery whereby information and communication technologies are used in consultation, diagnosis and care management. Under this spring's state emergency guidance relative to COVID-19, CHCs can provide, and bill for, telehealth, including telephonic care, in a way they could not outside of the declaration of emergency.



CHCs are grateful for the Administration's decision and guidance to allow them to receive PPS for telephonic care and lift restrictions on telehealth visits. As we transition our delivery system from immediate response to a new COVID-19 normal, we will need the allowances we have today to continue. Unfortunately, these telehealth flexibilities are dependent on two federal declarations of emergencies being maintained. If the Public Health Emergency is not renewed this October, or the National Emergency is rescinded, tremendous investments CHCs have made in – and progress won through – telehealth, including telephonic care, will be undone. The ability to be reimbursed for care provided by telehealth, including telephonic modalities, is key to the ongoing health of our communities as well as CHC financial viability. ***CHCs must be able to continue to integrate innovations and technology into their practice and clinical workflows to better serve patients and meet them where they are in today's post-COVID environment.***

The COVID-19 pandemic has shown that, now more than ever, CHCs, and the health care delivery system more broadly, require innovative tools to better protect health care workers and the patients they serve, all while guaranteeing timely access to care.

Health center leaders, as well as health system partners, understand and appreciate that these collective interests will come with a price tag at a time when the state is reeling fiscally. These costs pale in comparison to the risks of loss of life to providers, health care workers and the underserved communities that they serve. Most importantly, these costs need to be seen in the context of California's economic recovery, a recovery that cannot happen without a health recovery.

Health Center Partners of Southern California urges the Governor and the Legislature to take urgent action to adopt trailer bill language in this session to allow telehealth flexibilities and telephonic allowances to be extended indefinitely which will be vital to California's recovery.

Sincerely,

A handwritten signature in blue ink that reads "Henry N. Tuttle".

Henry N. Tuttle
President and CEO
htuttle@hcpsocal.org

cc: Senate President pro Tempore Toni Atkins
Assembly Speaker Anthony Rendon
State Senator Jeff Stone
State Senator Patricia Bates



HEALTH CENTER PARTNERS

of Southern California

State Senator Richard Roth
Assemblymember Ben Hueso
Assemblymember Brian Jones
Assemblymember Brian Maienschein
Assemblymember Chad Mayes
Assemblymember Eduardo Garcia
Assemblymember Jose Medina
Assemblymember Lorena Gonzalez
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Assemblymember Shirley Weber
Assemblymember Tasha Boerner Horvath
Assemblymember Todd Gloria

[Health Center Partners of Southern California](#), a family of companies, includes a 16-membership organization of federally qualified health centers, Indian Health Services Organizations, both urban and sovereign, and Planned Parenthood of the Pacific Southwest, collectively serving 850,000+ patients each year, for 3.6 million patient visits each year, at 160 practice sites across San Diego, Riverside, Imperial counties, with the seventh largest provider group in the region. Read our [2018/2019 Impact Report](#).