

ONE HUNDRED THIRTEENTH CONGRESS  
**Congress of the United States**  
**House of Representatives**  
COMMITTEE ON ENERGY AND COMMERCE  
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WASHINGTON, DC 20515-6115  
Majority (202) 225-2927  
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May 22, 2014

Ms. Kofi Jones  
Vice President of Public Affairs  
American Well  
75 State Street, 26th Floor  
Boston, MA 02109

Dear Ms. Jones:

Thank you for appearing before the Subcommittee on Health on Thursday, May 1, 2014, to testify at the hearing entitled "Telehealth to Digital Medicine: How 21st Century Technology Can Benefit Patients."

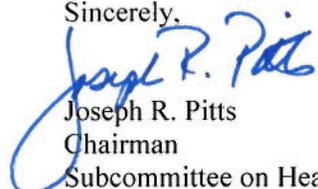
Pursuant to the Rules of the Committee on Energy and Commerce, the hearing record remains open for ten business days to permit Members to submit additional questions for the record, which are attached. The format of your responses to these questions should be as follows: (1) the name of the Member whose question you are addressing, (2) the complete text of the question you are addressing in bold, and (3) your answer to that question in plain text.

Also attached are Member requests made during the hearing. The format of your responses to these requests should follow the same format as your responses to the additional questions for the record.

To facilitate the printing of the hearing record, please respond to these questions and requests with a transmittal letter by the close of business on Thursday, June 5, 2014. Your responses should be mailed to Sydne Harwick, Legislative Clerk, Committee on Energy and Commerce, 2125 Rayburn House Office Building, Washington, D.C. 20515 and e-mailed in Word format to [Sydne.Harwick@mail.house.gov](mailto:Sydne.Harwick@mail.house.gov).

Thank you again for your time and effort preparing and delivering testimony before the Subcommittee.

Sincerely,

  
Joseph R. Pitts  
Chairman  
Subcommittee on Health

cc: The Honorable Frank Pallone, Jr., Ranking Member, Subcommittee on Health

Attachments

## Attachment 1—Additional Questions for the Record

### The Honorable Joseph R. Pitts

1. What role can telemedicine play to facilitate new payment models?
2. What payment models are likely to best encourage the development of telemedicine or benefit from the use of telemedicine and how?
3. How has the advancement of telemedicine in recent years benefited the discovery, development or delivery of healthcare?
4. As the capacity for telemedicine continues to grow, what regulatory bottlenecks are most likely to get in the way of its further development?
5. Can telemedicine raise the quality of service provided to patients? If so, how?
6. Can telemedicine lead to more patients receiving care without costly, unnecessary, and time-consuming trips to their doctors? If so, how?
7. WellPoint now offers patients 24-hour online access to doctors and nurse practitioners at a fraction of the cost of in-person consultations. How does Medicare compare to private insurance in making use of telemedicine such as WellPoint?
8. There are fears of a physician shortage in the coming years. With doctors showing increasing reluctance to accept new Medicare patients to their practice, could telemedicine help extend the reach of those currently in practice and allow them to expand the number of patients they can see? For example, could virtual visits allow for a physician or other support staff to see some patients sooner with low risk concerns?

### The Honorable Rence Ellmers

1. I would like to continue the discussion on care giving. As a nurse for over 20 years, it is a topic I am very familiar with. I would like to share some statistics:
  - American caregivers are predominantly female (66%) and are an average of 48 years old.
  - Most care for a relative (86%), most often a parent (36%).
  - Family caregivers provide an average of 20 hours of care per week.
  - One in seven caregivers provides care, over and above regular parenting, to a child with special needs (14%).
  - Care giving lasts an average of 4.6 years.

Making it easier to get care to those who may have trouble traveling long distances to see a provider will improve outcomes and lives. Patients who have chronic conditions live longer and healthier lives when they have coordinated care and adhere to treatment programs. Today, children, often the daughter, are the caregivers for their parents. They are the vital component of coordinated care. Millions of women, who are caregivers, want to be there for their loved ones, but also need to be home to take care of their children or do their job.

With the billions of dollars invested in using broadband technologies national networks with high speeds and capacity, today's state by state licensing of doctors is a barrier that should be removed. Established in the 1800s, it is an antiquated relic and it is time for it to be changed as it is proving to be an impediment to providing quality care for seniors. This is why I am a proud cosponsor of Reps. Nunes and Pallone's H.R. 3077, the Tele-Med Act. A bill that would allow Medicare doctors licensed in one state to see a Medicare beneficiary across state lines without a separate license.

Can we not use technology to ensure family members and caregivers are included in discussions with the provider and the patient they are caring for? Would it not improve communications if the caregiver can speak with the patient's doctor directly, with the patient and for the patient, and be kept up-to-date with what the doctor is telling the patient, without having that caregiver fly across the country to attend a short appointment? What barriers are we facing to making this a reality?

## **Attachment 2—Member Requests for the Record**

*During the hearing, Members asked you to provide additional information for the record and you indicated that you would provide that information. For your convenience, descriptions of the requested information are provided below.*

### **The Honorable Joe Barton**

1. How secure are medical records when using this kind of technology?
2. There are some concerns that if the doctor, the patient and the health insurance are in different places Medicare and Medicaid sometimes do not know how to or are unwilling to calculate the charges that result from a telemedicine visit. Would you please speak to that issue?