



January 21, 2022

The Honorable Richard Hilderbrand  
Chair, Kansas Senate Committee on Public Health and Welfare  
Kansas State Capitol  
300 SW 10th St., Room 445-S  
Topeka, Kansas 66612

**RE: ATA OPPOSITION TO SENATE BILL 121**

Dear Chair Hilderbrand and committee members,

On behalf of the American Telemedicine Association (ATA) and the over 400 organizations we represent, I am writing you to express our opposition to Senate Bill 121.

The ATA is the only national organization whose mission revolves solely around the advancement of telemedicine. Our utmost priority is ensuring that Americans have the ability to receive affordable, high-quality health care, including dental care, when and where they need it. The expansion of telemedicine infrastructure around the country eases strain on the overburdened health care system, enabling it to provide care for millions more patients every year in an efficient and effective manner. The ATA represents a diverse and expansive coalition of technology solution providers and payers, as well as partner organizations and alliances, working together to promote the implementation of telemedicine across the country, endorse responsible telemedicine policy, encourage government and market normalization, and deliver the education and resources necessary to integrate virtual care through the use of various innovative technologies.

The ATA has serious concerns about provisions in the bill that create artificial barriers to the use of technology to provide remote health care. Specifically, Senate Bill 121 would require these examinations to entail a review of the patient's most recent diagnostic digital or conventional radiographs or other equivalent bone imaging, with treating dentists mandated to order new radiographs or imaging unless the patient has had such radiographs or imaging done within the last six months.

Our organization maintains that providers should be able deliver dental care via whichever method they deem appropriate – including via teledentistry technologies – so long as this method enables them to meet the standard of care for the condition presented by the patient. A review of clinical studies indicates that a) dentists diagnosing and treating patients for mild to moderate malocclusions may not need to review radiographic images in order to do so in many cases and b) providers utilizing teledentistry technologies to diagnose and treat such malocclusions are just



as successful as providers rendering care in person. Requiring the review of radiographic (or equivalent) imaging, imaging which must be conducted via an in-person interaction, serves as an arbitrary and clinically unsupported barrier to dental care, one which would make it much more difficult for Kansans to access the oral health care services they need via teledentistry. Those most affected by this legislation would be unserved and underserved Kansans, especially those in rural areas, who do not have convenient access to a brick-and-mortar dentist's office.

The ATA urges you to vote against Senate Bill 121. It is anti-competitive and discriminates unfairly against innovative technologies in health care. In the context of the ongoing COVID-19 pandemic, we urge you and your colleagues to consider the effects that passing this bill would have on Kansans' ability to access affordable, high-quality dental care in a safe and efficient manner. Please do not hesitate to let us know how we can be helpful in your efforts to advance common-sense teledentistry policy in Kansas. If you have any questions or would like to discuss the telemedicine industry's perspective further, please contact me at [kzebley@americantelemed.org](mailto:kzebley@americantelemed.org).

Kind regards,

A handwritten signature in black ink that reads "Kyle Zebley". The signature is fluid and cursive, with a long horizontal stroke at the end.

Kyle Zebley  
Vice President of Public Policy  
American Telemedicine Association