

— NATE GUSTAFSON —

STATE REPRESENTATIVE • 55TH ASSEMBLY DISTRICT

Chairman Moses, Vice-Chair Brooks, and members of the committee,

Thank you for the opportunity to testify today in support of Assembly Bill 212, legislation I authored to enhance access to health care services for Wisconsin residents through telehealth.

This bill establishes a streamlined registration process for qualified out-of-state health care providers to offer telehealth services to patients in Wisconsin. Providers must hold an active, unencumbered license in another state and meet stringent criteria, including a clean disciplinary record and appropriate malpractice insurance coverage.

I acknowledge that Governor Evers has expressed a preference for addressing interstate health care practice through licensure compacts. While compacts are valuable tools, they often involve complex negotiations, varying state participation, and extended implementation timelines.

In contrast, this bill provides a more immediate and straightforward solution. By allowing the Department of Safety and Professional Services to register out-of-state providers directly, we can quickly expand access to care without compromising on quality or oversight. The bill includes robust safeguards, such as public disclosure of provider credentials and disciplinary history, ensuring transparency and accountability.

In summary, while licensure compacts remain an important part of our long-term strategy, Assembly Bill 212 offers a practical and efficient approach to meet the pressing health care needs of our communities today.

Thank you for your consideration, and I welcome any questions.



ROB STAFSHOLT

STATE SENATOR • 10th SENATE DISTRICT

(608) 266-7745
Toll Free: (800) 862-1092
Sen.Stafsholt@legis.wi.gov

P.O. Box 7882
Madison, WI 53707-7882

DATE: May 14, 2025
RE: Testimony on Assembly Bill 212
TO: Members of the Committee on Health, Aging & Long-Term Care
FROM: Senator Rob Stafsholt

Thank you, Chairman Moses and members of the Assembly Committee on Health, Aging and Long-Term Care for hearing Assembly Bill 212 relating to registration of out-of-state health care providers to provide telehealth services.

This bill is a direct answer to the healthcare shortage in Wisconsin, in rural areas in particular. Assembly Bill 212 expands and improves health care services for all by reducing regulatory burdens and providing accessibility to qualified, out-of-state health care providers by allowing professionals that are licensed in another state to provide telehealth services to Wisconsinites within the scope of practice established in Wisconsin.

AB 212 also requires the Department of Safety and Professional Services (DSPS) and any applicable credentialing board to register such providers as a telehealth provider in Wisconsin, provided they meet certain criteria, including already having the health care credential issued by another state and being required to have a clean disciplinary record. It also requires DSPS to publish on its website, a list of all health care providers registered to provide telehealth services under this bill.

According to the Health Resources and Services Administration (HRSA), over 1.2 million Wisconsinites live in a primary care professional shortage area, and 1.5 million Wisconsinites live in a mental health professional shortage area. This bill offers one solution to those critical shortages.

I thank you for taking the time to consider this bill and I hope you will support it. Please reach out with any questions or concerns.



To: Members of the Wisconsin Assembly Committee on Health, Aging, and Long-Term Care

From: Kyle Maichle, President and Board Chairman, Americans for Autism Advocacy

Date: May 14, 2025

RE: Testimony in Support of Assembly Bill 212: Registration of Out-of-State Health Care Providers to Provide Telehealth Services

Chairman Moses, Vice Chair Brooks, and Ranking Member Subeck:

Good Afternoon, my name is Kyle Maichle from Sun Prairie, WI, and I serve as President and Board Chairman of Americans for Autism Advocacy (AFAA).

AFAA is an IRS 501(c)4 organization registered with the Internal Revenue Service. AFAA is dedicated to advocating for economic, educational, ethics reform, and health care policies that benefit the neurodivergent communities at the state and federal levels.

AFAA supports Wisconsin Assembly Bill 212 (AB 212), which aims to create Wis. Stat. § 440.18. This proposed legislation would enable qualified out-of-state health care providers to register and provide telehealth services to Wisconsin residents. By establishing a legal framework for these professionals to practice in the state, AB 212 would build upon Wisconsin's history of high-quality health care. [Autism Parenting Magazine rates Wisconsin](#) as the eighth most supportive state in the nation to raise a kid with Autism. AB 212 has the potential to further establish Wisconsin as a national leader in supporting neurodivergent individuals.

Enhancing Access to Specialized Care

AB 212 aims to improve access to specialized care for neurodivergent individuals, including those with ADHD, Autism Spectrum Disorder, Dyslexia, Down's Syndrome, and Tourette's. These individuals often need specialized services and may have co-occurring conditions requiring multiple specialists, which can be challenging to find locally, especially in rural or underserved areas.

AB 212 addresses this need by allowing qualified, licensed out-of-state healthcare providers to offer telehealth services. This would increase the pool of available professionals, including licensed professional counselors, psychiatrists, physicians, and speech pathologists, who already serve Wisconsin's neurodivergent community.

The bill is designed to ensure that only licensed professionals in good standing can provide this care, maintaining the integrity of professional licensing. AFAA supports AB 212 because it breaks down barriers to care while upholding professional standards, ultimately benefiting Wisconsin residents by expanding access to necessary medical services.

AB 212 is an Opportunity Give Licensed Out of State Providers Practice Telehealth in Wisconsin if their State is Not a Member of an Interstate Compact

Wisconsin is proud to be a member of the following health interstate licensure compacts including:

- [The Counseling Compact](#)
- [Psychology Interjurisdictional Compact](#) (PSY-PACT)
- [Audiology, Speech Language and Pathology](#) (ASLP-IC)

The Wisconsin Legislature is currently considering Senate Bill 74 that would add The Badger State to the [Social Work Interstate Licensure Compact](#). SB 74 is pending a floor vote by the Senate as of this writing. AB 212 would permit licensed professionals in good standing, who are not part of an interstate compact, to offer telehealth services in Wisconsin. Currently, neighboring Illinois is not a member of the ASLP-IC or the Counseling Compact. Iowa's legislature is considering joining PSYPACT, while Michigan's legislature has not joined several health licensure compacts. Texas is currently considering multiple such compacts. Passing AB 212 would allow Wisconsin to maintain a competitive edge over larger states like Illinois, New York, and Texas, which have not enacted these popular compacts.

Addressing Governor Evers Veto of the Telehealth Bill in 2024

Governor Evers' previous veto of a similar bill during the 2023-2024 session was, in AFAA's view, shortsighted and out of step with current legislative trends. To maintain Wisconsin's standing as a national leader in attracting talent, the Legislature must convey to the Governor that another such veto would be detrimental. AB 212 is crucial as it ensures that only qualified, licensed professionals in good standing can deliver telehealth services in Wisconsin. Therefore, this committee and the entire Legislature should promptly approve AB 212 without any unnecessary delays.

Conclusion

AB 212 is a step forward for Wisconsin by:

- Expands the pool of qualified, licensed professionals, including those specializing in specific care areas.
- Guarantees that only licensed professionals in good standing can provide telehealth services in Wisconsin.
- Encourages out-of-state providers not belonging to interstate compacts to practice in Wisconsin.
- Improves access to quality care for neurodivergent individuals with co-occurring conditions.

Thank you for the opportunity to testify, and I welcome any further questions.

The Americans for Autism Advocacy Board of Directors consisting of:

Mr. Kyle Maichle, President and Board Chairman, Sun Prairie, WI
Mr. Nicholas Glad, Board Secretary, Formerly of Milwaukee, now in Albuquerque, NM.
Ms. Jacqueline Pickrell, Treasurer, Albuquerque, NM.
Ms. Emily Smedlund, At-Large 1 Board Member, Cary, Illinois
Mr. Daniel C. Loftis, At-Large 2 Board Member, Titusville, FL



THE ERISA
INDUSTRY COMMITTEE
*Shaping benefit policies
before they shape you.*

DILLON CLAIR
Director, State Advocacy

May 14, 2025

Representative Clint P. Moses
Chair, Assembly Committee on Health,
Aging and Long-Term Care
Wisconsin State Legislature
State Capitol Building, 2 E Main St,
Madison, WI 53702
Submitted Electronically

**RE: ERIC Written Testimony in Support of Wisconsin Assembly Bill 212 –
Licensure Portability for Out-of-State Telehealth Providers**

Dear Chair Moses and members of the Assembly Committee on Health, Aging and Long-Term Care:

The ERISA Industry Committee (“ERIC”) appreciates the opportunity to comment on the proposed legislation contained in AB 212 being considered by the Wisconsin Assembly Committee on Health, Aging and Long-Term Care (“Committee”) during this week’s hearing. **ERIC urges Committee members to vote “yes” and advance AB 212 to expand and secure access to quality telehealth services for Wisconsinites.**

ERIC is a national nonprofit organization exclusively representing the largest employers in the United States in their capacity as sponsors of employee benefit plans for their nationwide workforces. With member companies that are leaders in every economic sector, ERIC is the voice of large employer plan sponsors on federal, state, and local public policies impacting their ability to sponsor benefit plans. ERIC member companies offer benefits to tens of millions of employees and their families, located in every state and city.

As plan sponsors, our members strive to provide the best health care possible to their employees, retirees, and families at an affordable cost. ERIC recognizes the significant opportunity provided by virtual care to modernize health care delivery and improve access to quality medical care for workers and their dependents. Telehealth is not only convenient, safe, and effective, but also offers tremendous cost savings potential for millions of Americans.

Large employers have long been the biggest innovators in health care, and the vast majority have adopted telehealth as a way to provide added value for their employees and to help drive down ever-rising health care costs. For these reasons, ERIC is supportive of state legislation that facilitates access to critical telehealth services without placing arbitrary obstacles in the way of vulnerable patients. Assembly Bill 212 is an excellent example of this, as it would expand the telehealth service options available to Wisconsin residents by allowing those health care providers with a medical license in good standing in another state to provide telehealth services to patients in Wisconsin.

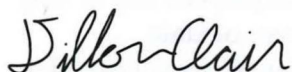
As critical shortages of health care providers continue within Wisconsin and across the country, there is a growing need among patients for improved access to a range of specialists, rehabilitation services, mental health experts, and primary care providers. While many states, including Wisconsin, have turned to increasingly popular interjurisdictional licensure compacts to remedy provider shortages, the fact that many different compacts exist for separate areas of practice and that they rely on adoption by multiple states before taking effect has led to a messy and incomplete solution to this problem. Alternatively, the most effective way to address this need would be to create an expedited and uniform process by which licensed out-of-state providers can be allowed to offer invaluable telehealth services to patients within Wisconsin. This is precisely the approach that AB 212 would take.

Importantly, AB 212 would allow Wisconsin to retain regulatory control and oversight of out-of-state providers offering remote telehealth services within the state, meaning that Wisconsinites would continue to receive the same level of care they have come to expect. Specifically, AB 212 would require out-of-state provider applicants to: 1) submit an application to the Department of Safety and Professional Services or an applicable credentialing board, 2) be licensed and in good standing in another state, 3) have no disciplinary actions taken against them in the past five years, 4) designate an in-state registered agent, and 5) maintain liability insurance covering services provided to patients in Wisconsin.

The approach outlined by AB 212 represents a key opportunity for Wisconsin to centralize the application process for out-of-state providers, uphold current state practice standards, and provide access to vital telehealth services for those Wisconsinites most in need of care. Notably, this legislation is very similar in nature to the out-of-state telehealth registration processes established by lawmakers in Colorado and other states in recent years. Along this line, more and more states are beginning to recognize the practical advantages of interstate telehealth licensure portability and pursue policies similar to AB 212.

On behalf of our large member companies, ERIC strongly supports AB 212 and respectfully urges the Assembly Committee on Health, Aging and Long-Term Care to vote in favor of this legislation. If you have any questions concerning our comments or would like to discuss ways in which health care access and affordability can be improved for workers across Wisconsin, please contact us at (202) 789-1400 or dclair@eric.org.

Sincerely,



Dillon Clair
Director, State Advocacy



May 12, 2025

The Honorable Representative Moses
Chair, Assembly Committee on Health, Aging and Long-Term Care
Madison, WI 53707

RE: Teladoc Health's Support for Assembly Bill 212

Dear Chairman Moses,

On behalf of Teladoc Health, I write in support of Assembly Bill 212 which creates a process for certain individuals who hold a license, certification, registration, or permit granted by another state to apply for and receive a privilege to practice in Wisconsin. We respectfully request that the Committee vote in favor of this bill.

By way of background, Teladoc Health is the world's largest telehealth company with more than 5,000 employees. We deliver health care in 175 countries and in more than 40 languages. We partner with employers, hospitals, health systems, and more than 50 health insurance plans in all 50 states – including Wisconsin – to transform health care delivery. Teladoc Health provides health care services to more than 40 percent of Fortune 500 employers as well as thousands of small businesses, labor unions and public-sector employers which offer our virtual care services to their employees.

Teladoc Health is offered as a benefit by over 9,000 Wisconsin employers covering over 800 thousand patients in the state. Some of the employers that offer Teladoc Health as a benefit include: Kohler, Nestle, Abbott, Greenheck, Green Bay Area Public Schools, Brown County, and the City of Kenosha. Teladoc also contracts with Aetna, Anthem, Group Health Cooperative (Medicaid), and UnitedHealthcare to provide virtual care services for their health plan beneficiaries.

The Need for More Healthcare Providers

Provider shortages are a considerable problem across the nation, including in Wisconsin. Unfortunately, there simply are not enough providers to meet demand. The Health Resources and Services Administration (HRSA) found that over 1.2 million Wisconsin residents live within a primary care health care professional shortage area,¹ and over 1.5 million Wisconsin residents live within a mental health care health professional shortage area.² In fact, the entirety of over 40 counties are designated as both provider shortage areas for primary care³ and provider shortages for mental health.⁴

Several local Wisconsin organizations have also noted the impact of this workforce shortage. A March 2022 report from the Wisconsin Hospital Association (WHA) found that an "aging workforce combined with a spike in worker departures created unprecedented levels of vacancy rates. A lack of workers,

¹ <https://www.kff.org/other/state-indicator/primary-care-health-professional-shortage-areas-hpsas/?currentTimeframe=0&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22desc%22%7D>

² <https://www.kff.org/other/state-indicator/mental-health-care-health-professional-shortage-areas-hpsas/?currentTimeframe=0&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22desc%22%7D>

³ <https://www.ruralhealthinfo.org/charts/5?state=WI>

⁴ <https://www.ruralhealthinfo.org/charts/7?state=WI>



combined with a licensing backlog affecting health care workers, leaves health care providers struggling to staff their facilities.”⁵

Similarly, the University of Wisconsin School of Medicine and Public Health notes that “Wisconsin faces a deficit of more than 8,000 healthcare positions across the state, with 3,500 of them in the Madison area.”⁶ Unfortunately, without intervention and a way to utilize the national network of providers, the problem may only worsen. The WHA released a study that found that by 2030, Wisconsin will see many people leaving or retiring from the healthcare industry while the number of patients to be served will only increase.⁷

The Solution: Licensure Portability

While it may take several years for the education system to retool with an expanded emphasis on developing a pipeline for healthcare professionals, the legislation before you today offers a short-term solution which can be implemented immediately.

We commend the Wisconsin Legislature for its leadership in tackling this workforce shortage dilemma by addressing licensure reforms. Teladoc Health supports all commonsense efforts to increase cross-state recognition of health professional licenses. From our own experience, we witnessed Governors and Legislatures across the country remove state licensure barriers to practice during the COVID-19 pandemic. The result was a more efficient, nimble, and effective health care system which allowed providers to quickly serve patients where they were as the disease moved from hotspot to hotspot without having to overcome the various hurdles of traditional licensure. These licensure flexibilities (many of which have subsequently been made permanent) led to faster and more convenient patient care, diverted patients from unnecessary ER/urgent care visits, and was done in a safe and reliable manner.

Making licensure portability simpler and more streamlined will allow providers and patients to fully capitalize on the benefits of telehealth technology and bring more highly qualified providers into the state. This, in turn, will significantly increase patients’ access to care – including by decreasing wait and travel times, offering more convenient appointments for patients, and offering more native language services. All of these factors will ultimately lower cost pressures on the entire health care sector, leading to system-wide cost savings due to effective diversion from the emergency departments and urgent care centers, lower rates of chronic conditions by catching and treating those diseases early, and overall cost savings with telehealth economies of scale and a higher supply of providers.

To date, several states have adopted licensure portability models outside of the various licensure compacts, including: Arizona, Colorado, Florida, Idaho, Kansas, Minnesota, South Carolina, and West Virginia.

⁵ https://captimes.com/news/government/lobbyists-wisconsin-health-care-workers-shortage-could-drive-bipartisan-action/article_c1821744-f89d-502d-a9ce-eb4e998dc13e.html

⁶ <https://www.uwhealth.org/news/wisconsin-medicines-addresses-workforce-shortages>

⁷ https://www.wxow.com/news/healthcare-worker-shortage-to-be-dire-by-2030-report-says/article_1189c240-cdb9-11ed-900f-9bb0dda45308.html



While the pre-pandemic fears that licensure reciprocity would lead to an increase in patient complaints and injuries, a 2023 study found no examples of licensing agencies taking disciplinary action against out-of-state telehealth providers for patient safety issues.⁸ Furthermore, on the issue of increasing the health care workforce, the research found that Florida increased their total provider count by 14,000, with thousands of those providers being doctors and mental health providers. To be sure, should the need for enforcement or disciplinary actions arise, the various Wisconsin state agencies, courts, and licensing boards will continue to have jurisdiction over all health care professionals practicing in the State of Wisconsin.

Thank you for the opportunity to provide Teladoc Health's unique insights on this important piece of legislation. It is our hope that the Committee will pass AB212. Please do not hesitate to contact me at mercermay@teladochealth.com with any questions or concerns you may have.

Sincerely,

Wm. Mercer May, Esq.
Teladoc Health
Director of State Government Affairs

⁸ <https://ciceroinstitute.org/wp-content/uploads/2023/02/Few-Disciplinary-Issues-with-Out-of-State-Telehealth-Report.pdf>



May 13, 2025

The Honorable Clint P. Moses
Chair, Assembly Committee on Health, Aging and Long-Term Care
Wisconsin State Legislature
Room 12 West
State Capitol
PO Box 8953
Madison, WI 53708

The Honorable Robert Brooks
Vice-Chair, Assembly Committee on Health, Aging and Long-Term Care
Wisconsin State Legislature
Room 216 North
State Capitol
PO Box 8952
Madison, WI 53708

RE: ATA ACTION SUPPORT OF AB 212

Dear Chair Moses, Vice-Chair Brooks and members of the Committee on Health, Aging and Long-Term Care,

On behalf of ATA Action, I am writing you to express our support for Assembly Bill 212 relating to cross-state telehealth provider registration.

ATA Action, the American Telemedicine Association's affiliated trade association focused on advocacy, advances policy to ensure all individuals have permanent access to telehealth services across the care continuum. ATA Action supports the enactment of state and federal telehealth policies to secure telehealth access for all Americans, including those in rural and underserved communities. ATA Action recognizes that telehealth and virtual care have the potential to truly transform the health care delivery system – by improving patient outcomes, enhancing safety and effectiveness of care, addressing health disparities, and reducing costs – if only allowed to flourish.

As patients and consumers seek out more convenient and affordable ways to access health care, telehealth providers have come to rely on a variety of technological modalities to deliver care. Allowing out-of-state health care providers that maintain good standing in their own state the opportunity to deliver telehealth services in Wisconsin will substantially increase available care options for Wisconsin patients. By implementing a registration system, this legislation helps to remove arbitrary geographical barriers and avoids the costs associated with more complicated licensure regimes. Moreover, AB 212 maintains appropriate Board control over the registration system to ensure patient safety, including taking action when disciplinary concerns arise in the provider's state of license. ATA Action believes Boards should be empowered to ensure that practitioners are appropriately upholding the standard of care and can still be held accountable should any issues arise from treatment.

Evidence from Florida's telehealth registration system substantiates its viability and beneficial effects on patient access to care. In 2019, Florida legislators enacted a telehealth registration scheme similar to the

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proposal in AB 212. In the two years following enactment, over 14,000 providers began offering services in Florida using a telehealth registration and the Florida Department of Health was able to register roughly 90% of all applications.¹ During this same time period, there were only 16 complaints against these telehealth registrants, with zero cases resulting in discipline for services offered to Florida patients.²

ATA Action believes that this legislation will help create a health care environment in which Wisconsin can access much-needed health services as efficiently and effectively as possible, without compromising the standard of care. AB 212 would serve as an important step forward for telehealth care and patient choice in Wisconsin.

Thank you for the opportunity to comment. We urge you to pass AB 212 in the interest of expanding Wisconsin patients' access to high-quality, affordable health care. Please do not hesitate to let us know how we can be helpful to your efforts to advance common-sense telehealth policy in Wisconsin. If you have any questions or would like to discuss the telehealth industry's perspective further, please contact me at kzebley@ataaction.org.

Kind regards,

Kyle Zebley
Executive Director
ATA Action

¹ Josh Achambault, MPP & Ateev Mehrotra, M.D., M.P.H., *Few Disciplinary Issues with Out-of-State Telehealth*, Cicero Inst., page 4 (Jan. 2023), <https://ciceroinstitute.org/wp-content/uploads/2023/02/Few-Disciplinary-Issues-with-Out-of-State-Telehealth-Report.pdf>.

² *Id.* at 7.



May 13, 2025

The Honorable Clint P. Moses
Chair, Assembly Committee on Health, Aging and Long-Term Care
Wisconsin State Legislature
Room 12 West
State Capitol
PO Box 8953
Madison, WI 53708

The Honorable Robert Brooks
Vice-Chair, Assembly Committee on Health, Aging and Long-Term Care
Wisconsin State Legislature
Room 216 North
State Capitol
PO Box 8952
Madison, WI 53708

RE: ATA ACTION SUPPORT OF AB 212

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ATA Action, the American Telemedicine Association's affiliated trade association focused on advocacy, advances policy to ensure all individuals have permanent access to telehealth services across the care continuum. ATA Action supports the enactment of state and federal telehealth policies to secure telehealth access for all Americans, including those in rural and underserved communities. ATA Action recognizes that telehealth and virtual care have the potential to truly transform the health care delivery system – by improving patient outcomes, enhancing safety and effectiveness of care, addressing health disparities, and reducing costs – if only allowed to flourish.

As patients and consumers seek out more convenient and affordable ways to access health care, telehealth providers have come to rely on a variety of technological modalities to deliver care. Allowing out-of-state health care providers that maintain good standing in their own state the opportunity to deliver telehealth services in Wisconsin will substantially increase available care options for Wisconsin patients. By implementing a registration system, this legislation helps to remove arbitrary geographical barriers and avoids the costs associated with more complicated licensure regimes. Moreover, AB 212 maintains appropriate Board control over the registration system to ensure patient safety, including taking action when disciplinary concerns arise in the provider's state of license. ATA Action believes Boards should be empowered to ensure that practitioners are appropriately upholding the standard of care and can still be held accountable should any issues arise from treatment.

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Telehealth Policy to Transform Healthcare

proposal in AB 212. In the two years following enactment, over 14,000 providers began offering services in Florida using a telehealth registration and the Florida Department of Health was able to register roughly 90% of all applications.¹ During this same time period, there were only 16 complaints against these telehealth registrants, with zero cases resulting in discipline for services offered to Florida patients.²

ATA Action believes that this legislation will help create a health care environment in which Wisconsin can access much-needed health services as efficiently and effectively as possible, without compromising the standard of care. AB 212 would serve as an important step forward for telehealth care and patient choice in Wisconsin.

Thank you for the opportunity to comment. We urge you to pass AB 212 in the interest of expanding Wisconsin patients' access to high-quality, affordable health care. Please do not hesitate to let us know how we can be helpful to your efforts to advance common-sense telehealth policy in Wisconsin. If you have any questions or would like to discuss the telehealth industry's perspective further, please contact me at kzebley@ataaction.org.

Kind regards,

A handwritten signature in black ink, appearing to read "Kyle Zebley", with a stylized, cursive-like script.

Kyle Zebley
Executive Director
ATA Action

¹ Josh Achambault, MPP & Ateev Mehrotra, M.D., M.P.H., *Few Disciplinary Issues with Out-of-State Telehealth*, Cicero Inst., page 4 (Jan. 2023), <https://ciceroinstitute.org/wp-content/uploads/2023/02/Few-Disciplinary-Issueswith-Out-of-State-Telehealth-Report.pdf>.

² *Id.* at 7.

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NOAH D. DOMNITZ
PRESIDENT, MILWAUKEE

DANIELLE M. SCHRODER
PRESIDENT-ELECT, MADISON

REBECCA L. DOMNITZ
VICE-PRESIDENT, MILWAUKEE

CHRISTOPHER J. MACGILLIS
SECRETARY, MILWAUKEE

COREY G. LORENZ
TREASURER, MADISON

PETER M. YOUNG
PAST-PRESIDENT, WAUSAU

BRYAN M. ROESSLER
EXECUTIVE DIRECTOR

Amend AB-212/SB-214 to Protect Patients

Under Chapter 655 of the Wisconsin Statutes, health care providers are required to maintain medical malpractice insurance featuring at least \$1 million in coverage per occurrence/claim. Any economic damages above that amount are then covered by the Injured Patients and Families Compensation Fund (IPFCF). This regime serves to protect medical professionals and injured patients. Medical professionals then pay a fee to participate in the IPFCF to obtain this vital extension in insurance coverage.

All health care providers who practice in Wisconsin for more than 240 hours annually are required to participate in the IPFCF under Wis. Stat. § 655.002.

Bill Creates Potential Loophole that Should be Closed. Telehealth providers who provide more than 240 hours of care to Wisconsin patients should be required to maintain the same level of insurance coverage as they would be if physically located here. Without explicitly requiring coverage, providers could use telehealth as a means of circumventing IPFCF participation requirements to the detriment of both themselves and patients.

Follow the Example set by AB-257. AB-257 adapts the Ch. 655 insurance coverage regime to extend vital protection to medical professionals and patients to the new types of providers facilitated by the bill. This bill should follow that example.



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May 14, 2025

The Honorable Nate Gustafson
Wisconsin Assembly
Room 316 North State Capitol
PO Box 8952
Madison, WI 53708

Re: Support for AB 212, a bill related to expanding telehealth services

Dear Representative Gustafson,

I write to you on behalf of TechNet and our members in support of AB 212 (Gustafson), a bill expanding out of state healthcare providers to provide telehealth services.

TechNet is the national, bipartisan network of technology CEOs and senior executives that promotes the growth of the innovation economy by advocating a targeted policy agenda at the federal and 50-state level. TechNet's diverse membership includes 100 dynamic American businesses ranging from startups to the most iconic companies on the planet and represents five million employees and countless customers in the fields of information technology, artificial intelligence, e-commerce, the sharing and gig economies, advanced energy, transportation, cybersecurity, venture capital, and finance.

Telehealth is fundamentally altering how patients experience care. New telecommunications technologies allow health care professionals to provide patients with medical care and services in convenient, affordable, and accessible ways. However, across the state of Wisconsin, patients lack access to health care services. Recent studies have shown that throughout the state, all but three counties are designated as a shortage for primary care, and all but six for mental health. Wisconsin lawmakers have the opportunity to address this by expanding telehealth capabilities, which can help augment the provider workforce.

By using telehealth as the solution, Wisconsin can address these primary care professional shortages by expediting the credentialing process for out-of-state healthcare professionals and allow them to treat in-state patients with telehealth. Healthcare practitioners with an out-of-state license or certificate that falls under the requirements in the bill, may qualify as an out-of-state telehealth provider if they meet the requirements in AB 212. This legislation is modeled after the State of Florida, which recently enacted similar legislation.

If you have any questions regarding our support for this legislation or on telehealth, please reach out to me at 630-400-3439.

Thank you,

A handwritten signature in black ink, appearing to read 'Tyler Diers', with a stylized, flowing script.

Tyler Diers
Executive Director, Midwest
TechNet

CC: Representative Moses