



Testimony Supporting H.B. No. 6442: An Act Concerning Equitable Access to Broadband

Samantha Lew, MSW

Energy and Technology Committee

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Dear Senator Needleman, Representative Arconti, Senator Winfield, Representative Allie-Brennan, and esteemed members of the Energy and Technology Committee,

My name is Samantha Lew and I am submitting this testimony on behalf of Health Equity Solutions, where I serve as the Policy Analyst and Advocacy Specialist. Health Equity Solutions is a nonprofit organization with a statewide focus on promoting policies, programs, and practices that result in equitable health care access, delivery, and outcomes for all people in Connecticut. Our vision is for every Connecticut resident to attain optimal health regardless of race, ethnicity, or socioeconomic status.

Health Equity Solutions supports H.B. 6442 An Act Concerning Equitable Access to Broadband.

Broadband services are key to equitable access to safe health services during the pandemic and beyond. In our era, a reliable internet connection means improved access to information, applications for social services and health insurance, telehealth, and more. People with lower incomes and Black, Indigenous, Latino(a), and other people of color have been disproportionately impacted by COVID-19 and are disproportionately likely to struggle with barriers to care such as a lack of broadband access in non-pandemic times. For years telemedicine has been a proposed means of addressing social determinants of health (such as lack of transportation) that prevent people from seeking care. Yet, limited access to technology and broadband remain barriers to health care for many Connecticut residents.¹

Some states are making strides towards both providing necessary internet/technology to access telehealth and expanding coverage.² States including Massachusetts and New York have issued resources to provide Medicaid beneficiaries with information about options for accessing technology required for telehealth. States such as Colorado, Nevada, Oregon, and Washington have agreed to work together to identify best practices and address inequities in telehealth.³ Some states, including Minnesota, Tennessee, California, and Colorado, provide grants to improve broadband coverage in historically underserved areas.⁴

¹ IMPAQ Health and American Institutes for Research. "The Expansion of Telehealth: Equity Considerations for Providers & Payers." Retrieved from: https://impagint.com/sites/default/files/issue-briefs/The%20Expansion%20of%20Telehealth_Issue%20Brief_1.2.pdf

² Jared Augenstein, Jacqueline Marks, *Executive Summary: Tracking Telehealth Changes State-by-State in Response to COVID-19 - January 2021*. Retrieved from <https://www.jdsupra.com/legalnews/executive-summary-tracking-telehealth-8692451/>

³ Washington COVID-19 (Coronavirus), News & Media (2020). Retrieved from <https://www.governor.wa.gov/news-media/washington-colorado-nevada-and-oregon-announce-coordination-telehealth>

⁴ Kathryn de Wit and Anna Read, *How States Are Expanding Broadband Access*. Retrieved from <https://www.pewtrusts.org/en/research-and-analysis/reports/2020/02/how-states-are-expanding-broadband-access>

HEALTH EQUITY SOLUTIONS

If telehealth is to promote equity in access to healthcare, we must address equity in access to broadband and technology. Telehealth may have improved access for patients who would otherwise face barriers such as physical mobility, transportation, or dependent care. For others, access to services is still negatively impacted by a lack of access to a reliable internet connection, skill navigating technology, and access to a suitable device.

The impacts of systemic racism mean that a number of social and economic factors disproportionately limit access to care, particularly for Black and Latino residents of our state. If Connecticut is intentional in our approach to broadband, we can work to address inequities in access to this important utility. We agree with others that consumer input and tracking not only the availability of broadband but also uptake of the service are key to ensuring these proposals truly promote equity. It is likely that cost will remain a barrier to broadband even with these proposed changes and the state should analyze the extent of this issue and recommend policies or initiatives to address the inequities caused by lack of affordable broadband.

For individuals who rely on telehealth coverage, equitable access to broadband will mean access to care as the COVID-19 pandemic continues. ***By expanding broadband access and evaluating the distribution of broadband resources, the state will be taking a key step in ensuring that all people in Connecticut, regardless of race, ethnicity, and/or socioeconomic status have equitable access to health care.***

Thank you for the opportunity to testify in support of working towards equity-focused telehealth by addressing the digital divide and ensuring that all residents of our state are able to access the internet. I can be reached with any questions at slew@hesct.org or 860.937.6432.