



P E N N S Y L V A N I A
**Academy of Dermatology
and Dermatologic Surgery**

September 12, 2018

The Honorable Mark Mustio
Chair, House Professional Licensure Committee
416 Irvis Office Building
PO Box 202044
Harrisburg, PA 17120-2044

Dear Chair Mustio,

On behalf of the more than 350 members of the Pennsylvania Academy of Dermatology & Dermatologic Surgery (PAD), we appreciate that thoughtful consideration has been given toward the drafting of SB 780, which would authorize the use of telemedicine as a method of care delivery. Dermatologists have first-hand knowledge of the benefits that telemedicine can offer patients in gaining access to specialty care. As such, PAD supports the appropriate use of and payment for telemedicine as a means of improving access to the expertise of board-certified dermatologists when certain criteria are met. We support SB 780 and believe the legislation is a step forward to achieve these goals.

Members of PAD believe dermatologists delivering teledermatology should be licensed in the state in which the patient receives services, and must abide by the state's licensure laws and medical practice acts and regulations. We support the requirement set forth in SB 780 that a health care provider must hold a valid license and could be disciplined for violating the standards of care or rules of practice. The delivery of teledermatology should be consistent with state scope of practice laws and any use of non-physician clinicians should be in accordance with the supervision requirements set forth in the American Academy of Dermatology's *Position Statement on the Practice of Dermatology*¹.

While teledermatology is a viable option to deliver high quality care to patients, PAD supports provisions in SB 780 that would preserve a patient's choice and to refuse telemedicine services without jeopardizing one's access to other available services. Telemedicine is not a substitute for in-person services. Some types of information relevant

¹ *Position Statement on The Practice of Dermatology: Protecting and Preserving Patient Safety and Quality Care*. American Academy of Dermatology. Approved by the Board of Directors May 22 2010, Revised May 21 2016. <https://www.aad.org/Forms/Policies/Uploads/PS/PS-Practice%20of%20Dermatology-Protecting%20Preserving%20Patient%20Safety%20Quality%20Care.pdf>

to diagnosis and treatment of patients is poorly transmitted through a non-face-to-face interaction. These limitations apply both to store and forward teledermatology, as well live interactive teledermatology. Some of these elements that may be difficult to convey through teledermatology include the additional diagnostic clarity provided by sensory information unavailable in video, like touch, and even smell; and finally, the color and lighting of a skin eruption, which may differ in video, as versus face-to-face interaction.

Additionally, we are pleased that the health care provider who provides telemedicine and who does not have an established provider-patient relationship would disclose his or her medical specialty or applicable credentials. A patient should also know the licensure and board certification qualifications of the clinician providing care in advance of the treatment just as one would for in-person care.

Lastly, there is evidence of poor quality direct to patient commercial platforms in dermatology that rely on asynchronous images as the initial point of contact. In a study by Resneck, et al it was shown that these platforms exist and that suboptimal care is delivered leading to wrong diagnoses and inappropriate prescribing. (Resneck J, Abrouk M, et al. Choice, transparency, coordination, and quality among direct-to-consumer telemedicine websites and apps treating skin disease. JAMA Dermatology, 2016). We appreciate that the language in SB 780 does not suggest that store-and-forward or asynchronous communications alone would constitute a physician-patient relationship or meet criteria for a telemedicine virtual examination.

The Pennsylvania Academy of Dermatology & Dermatologic Surgery appreciates the continued work to ensure that our patients can benefit from advances in telemedicine, while preserving the highest standards of patient safety and efficacy. SB 780 is a step forward to providing the necessary foundation to ensure that patients who choose to access dermatologic services via telemedicine receive high quality care. Please contact Kim Whetsell, executive director for the Pennsylvania Academy of Dermatology & Dermatologic Surgery at kwhetsell@pamedsoc.org, should you require any additional information or clarification.

Sincerely,

Lorraine Larsen Rosamilia, MD, FAAD
President
Pennsylvania Academy of Dermatology & Dermatologic Surgery