Telehealth

8 TAKEAWAYS from 2016

1 The Value of Telehealth

There is significant optimism in the healthcare industry that telehealth has a role to play in the ongoing shift to value-based care. Many questions remain to be answered, however, regarding what exactly telehealth's role will be and what value the various telehealth modalities can add across patient populations, health conditions, and settings.

2 Evidence Base

The current evidence base for telehealth is fairly robust and promises to continue growing in breadth and methodological rigor. Currently, clinical evidence best supports telehealth for counseling and remote patient monitoring for select chronic diseases, as well as for psychotherapy. While there is some evidence to suggest cost effectiveness, more research is needed in this area.

3 4 Drivers of Adoption

I. Recent and likely near term expansion in reimbursement practices from both public and commercial payers is fueling telehealth adoption.

II. Ongoing healthcare reform and transition to value based payments are generating more demonstration projects and case studies to help define the value of telehealth.

III. The evolution of healthcare consumerism is complex and dynamic. Telehealth modalities appear poised to provide the flexibility providers need to pace this evolution.

IV. The growing financial success of private telehealth companies has them leading the telehealth adoption curve and demonstrating that telehealth is in demand by consumers.

4 4 Key Barriers to Adoption

I. No two states or federal agencies define or regulate telehealth in the same way, resulting in a fragmented and confusing environment for adoption and practice.

II. Issues related to provider licensure and credentialing remain a multilayered challenge, although the Federation of State Medical Boards' COMPACT hopes to help address this barrier.

III. Privacy and security concerns are complex and need to be addressed before adoption becomes widespread.

IV. Data collection and management challenges, such as interoperability, may limit efforts to understand and maximize telehealth value.

5 Rural Connectivity

Despite pledged Federal funding efforts to improve connectivity for rural America, the FCC's 2016 fact sheet notes:

- **39%** of the rural population (34 million Americans) lacks access to fixed broadband at the FCC benchmark speed of 25 Mbps/3 Mbps.
- **66%** of Americans living in US Territories (2.6 million people) lack access to the benchmark speed of 25 Mbps/3Mbps.

Start-up and ongoing program costs add to rural telehealth challenges.

6 Best Practices

Professional organizations are increasingly adopting and posting telehealth clinical, ethical, and service delivery guidelines.

For example, in 2016 the American Medical Association adopted telehealth ethical guidelines and principles to promote the safe and effective use of mHealth apps.

Telehealth accreditation offered by organizations such as URAC and ATA are helping to set standards and benchmarks for best practices.

7 Reimbursement

Although still a barrier to adoption, positive changes in reimbursement practices may gradually be reaching a tipping point. In 2017, the federal government and states look to continue to address key gaps or limitations in Medicare and Medicaid reimbursement policies as telehealth services expand.

Commercial plans are increasingly offering coverage of telehealth services. Reimbursement parity, however, still varies across and within plans (by state).

8 Innovators

There is a growing number of exciting, innovative programs and demonstration projects that are pushing boundaries and promise to change the landscape of telehealth. For example:

- Expanding Capacity for Health Outcomes (ECHO) Act
- Model eHealth Community for Aging (MeHCA)
- Next Generation ACO Model
- Virtual care centers (e.g. Mercy Virtual)
- VA Telehealth Services