



## **Telehealth Expansion: The New Healthcare Experience**

As more Americans grow accustomed to getting their information electronically, the consumer demand for anytime-access to healthcare services via telehealth seems like a natural extension of this trend. According to a study by data and analytics firm HIS, the market for telemedicine is expected to grow by 50 percent a year to \$1.9 billion by 2018. With convenience as the major benefit, consumers are showing an interest in this type of on-demand care. According to a new study by telehealth services provider AmercianWell, 64 percent of patients surveyed responded they would be willing to see their doctor online, and seven out of 10 patients would get a prescription refilled via an online video visit. In this article, we'll explore some of the recent advancements in telehealth, as well as why telehealth has been slow to expand in the United States.

### **Telehealth in Practice**

A telehealth visit is treated same as a physician consultation, but is simply completed using a different method of communication, such as real-time audio or video conferencing via a computer or smartphone. Telehealth is simply another form of patient treatment using technology as the means of communication, given that it coordinates existing services and care. Some of the possible applications of telehealth include:

- Virtual physician visits via audio, video or chat functionality
- Web-based patient education
- Telemonitoring of patients' vital signs and symptoms
- Dosing and prescription refills and consultations
- Interdisciplinary meetings for patient case reviews
- Healthcare employee training and education – publishing and sharing information

Some of the ways telehealth has been changing the experience of the healthcare visit include allowing for:

- Greater access to healthcare, especially for those in rural areas
- Less time spent waiting or traveling to routine care or follow-up appointments
- Greater convenience for care after hours and on weekends
- Early identification, assessment, symptom management and treatment of conditions
- Likely decrease in hospital readmissions
- Potential overall reduction in costs for both caregivers and patients

### **Telehealth Expansion:**

At the start of the telehealth trend, institutions began using telehealth services in categories that were a natural fit, such as the mental health and home-based health categories. However, many U.S. healthcare

providers and institutions have made it a focus to expand their telehealth services to include a wider variety of patients, including:

- **Urgent care:** In the case of minor emergencies, such as fever, sore throat, sinus infections, skin or eye conditions or similar, telehealth services may be a more cost-effective and convenient option than waiting in urgent care or emergency rooms, particularly for consumers with children under the age of 18 who may seek middle-of-the-night care.
- **Primary care:** Patients who could also benefit from telehealth services include those seeking common primary care visits, such as follow-up doctor appointments, prescription refills or other routine visits. Using a videoconferencing or other application for the visit would save the patient travel costs and time, and would also offer privacy and security, among other benefits.
- **Palliative care:** For complex patients with serious or chronic illnesses, such as cancer, heart disease or diabetes, telehealth services could provide patients with ongoing treatment from the comfort of their homes, and even be used to conduct post-surgery or post-discharge follow-ups. In addition, the monitoring and ongoing educational opportunities telehealth provides could substantially increase the cost of care for these patients, helping to increase demand for these type of systems among providers and payers.

### **Telehealth Partnerships**

The overall telehealth market continues to expand, with major telehealth providers raising millions of dollars annually in funding to expand the effort. The largest healthcare chain, Community Health Systems, announced last year a partnership with telehealth provider American Well to expand its telehealth services to include virtual physician visits. Called VirtualHealth Now, the program will allow patients to access urgent care services 24 hours a day, seven days a week. The technology will be used to link rural hospitals with tertiary care facilities and also deliver ongoing care to patients with chronic conditions.

### **The Introduction of Kiosks**

According to consultancy IHS, the U.S. market for healthcare kiosks will rise from roughly 10,000 kiosks in 2015 to over 36,000 annually by 2020. Currently, at some RiteAid locations in Ohio, the Healthspot kiosks allow patients to sign in, get vitals checked by a nurse assistant, and video connect with a provider inside the kiosk. The provider chats with the patient to diagnose, and the doctor can then write a prescription to the patient's pharmacy, and send the patient off with a visit summary. These kiosks claim to be good for common visits such as eye/ear infections, colds/flu, skin conditions and other ailments. Some larger employers have already begun to add worksite kiosks onsite to save employees from having to visit the doctor while they are on the clock.

### **The Reimbursement Obstacle**

Reimbursement and payment for telehealth services has become a major hiccup in the expansion of telehealth services nationwide, with financial, regulatory and administrative challenges surrounding them. Many states have passed laws to increase insurance coverage for telehealth services, but other states are holding back.

One of the major reasons telehealth has not been quick to expand nationwide is that there is no single standard for private payers. While some insurance companies reimburse easily, others have no

reimbursement policies and require prior approval. In addition, each state has different standards through which their Medicaid programs will reimburse for telehealth expenses. Currently, 39 state Medicaid programs provide at least some reimbursement for telehealth services, with behavioral health experiencing the most rapid expansion of reimbursement policies.

Providers, who are generally open to expanding their telehealth services, have been holding off on offering these type of services due to the lack of reimbursement. An October 2015 survey from Anthem and the *American Academy of Family Physicians* revealed that 15 percent of primary-care doctors had used telemedicine technology over the past year, but 90 percent would use it if they got paid for it. Some telehealth vendors have sought certification from credentialing bodies in order to gain a competitive advantage, as they wait for payers and legislation to fuel their expansion.

However, there is some hope in the legislation department surrounding telehealth reimbursement. Many states are passing laws requiring commercial health plans to cover medical services provided via telehealth to the same extent that they cover medical services provided in-person. Such parity laws should start to promote increased innovation and investment in private telehealth technologies, and thus provide the impetus for providers to begin adopting the technology.

### **Implementing Telehealth**

Institutions must realize that telehealth access isn't simply about the application or the technology itself, but about how to engage and enhance the patient experience. Healthcare providers must consider a number of aspects when implementing a telehealth solution, including how it integrates with their patients' communication needs, internal electronic health records systems and health information exchanges. A neutral party such as CoreTech can help provide the education and expertise needed to evaluate and select a telehealth solution to ensure that it meets the needs of both the patient and the provider, as well as to evaluate the workflow, handle the implementation and workflow, and address future interoperability needs.