Telemedicine is the use of medical information exchanged from one site to another via electronic communications to improve patients’ health status.

Telehealth The use of electronic information and telecommunications technologies to support long-distance clinical health care, patient and professional health-related education, public health and health administration.

Source: Health Resources Services Administration

Telemedicine vs. Telehealth

Telemedicine is real time two-way audio video communications and includes the application of video conferencing and store-and-forward.

Telehealth is the delivery healthcare services to facilitate the assessment, diagnosis, consultation, treatment, education, and self management of a patients healthcare.

Time is Money

- Average wait time for appointment = 24.1 days
- Travel time = 37 minutes
- Wait in Clinic = 84 minutes
- Time spent with provider = 20 minutes


Disruptive Technology

New ways of doing things that disrupt or overturn the traditional business methods and practices

- Uber vs. Taxi
- Amazon vs. Retailer
- Netflix vs. Blockbuster
- Telemedicine vs. Clinic
Competition

- Urgent Care
- Telemedicine

- Convenience
- Access
- Transparency
- Cost

Telemedicine Price Transparency

Physician Office
- Medicare = $69.08
- Average = $80.00

Telemedicine

Telemedicine Corporations

- Dr.
- Teladoc
- MD
- CareClix

Telemedicine Platforms

- Subscription fee
- Established patients
- Global period
- Supplement
- Chronic Care Mgmt

Telemedicine Trends

- Expanding reimbursement and payment opportunities
- Continued momentum at the state level
- Retail clinics and employer onsite health clinics on the rise
- Increased adoption in ACOs

Telemedicine Growth

- Patients will increase from 350,000 in 2013 to 7 million in 2018
- 22% of employers with 1,000 or more employees offer telemedicine services and another 37% plan to by the end of 2015
- >50% of hospitals have a telemedicine Program
- Projected to grow at a compound annual growth rate of 14.3% from 2014 to 2020
- 2016 legislative session, 44 states have introduced over 150 telehealth-related pieces of legislation

Sources: Public Health Institute Center for Connected Health Policy, Beckers Hospital Review
Telemedicine MGMA Poll

Will You Offer TELEHEALTH SERVICES in 2017?

- Currently Do: 16.83%
- Planning To: 21.21%
- Unsure: 20.53%
- No: 36.23%

January 10, 2017 Poll
1325 Respondents

Technology Adoption

- 64% • American adults own a smartphone
- 42% • American adults own a tablet computer
- 59% • Adults 65+ use the internet
- 53% • Adults 65+ say health information is the top reason for getting online

- 32% • Users have a healthcare app on their phone
- 64% • Patients willing to have video visits with Physician
- 97% • Patients frustrated with wait times
- 74% • Patients prefer easy access to healthcare services over in-person interactions with provider

Source: Pew Research Center

Telemedicine Advantages

- Convenience/Access
- Patient Engagement
- Remote Patient Monitoring
- Patient Compliance
- Reduced Hospitalization /ER Visits
- Time Management
- Decreased cost

Telemedicine – Triple Aim

- Improved Quality Care
- Better Patient Experience
- Lower Healthcare Costs

Telemedicine Challenges

- Privacy/Security
- Face to Face visit
- Technology Limitations
- Documentation
- Reimbursement
- Equipment
- Regulations

Interstate Medical Licensure Compact
Remote Monitoring & Mobile Health

Otoscope
Stethoscope

Telemedicine Technology & Application

Synchronous
Asynchronous
Remote Monitoring
Mobile Health

Definition of Interactive
Two-way, real-time (live) interactive communication between the patient and the distant site (consulting) practitioner.

Definition of Store and Forward
Asynchronous (not live) transmission of medical information to be reviewed at a later time by a health care provider at the distant (consulting) site.

Telemedicine Application

Remote
• Prescription Refill
• Urinary Track Infection
• Minor Cough & Cold
• Chronic disease Mgmt
• Care Plan Updates

In-Person
• Complex Infection
• Physical Exam
• Cut Sprain Fracture

Telemedicine Reimbursement Considerations

Tennessee Parity Law (56-7-1002)
Telehealth Services (63-1-155)
Tennessee Board of Medical Examiners
Self Pay
BCBS
CMS Coverage Guidelines
Tennessee Parity Law (56-7-1002. Telehealth services) (2017)

- Requires commercial insurance payors to cover telehealth services effective October 1, 2015
- Qualified site
- Store-and-forward telemedicine services
- Telehealth
- Applies to commercial payors only


- Telehealth set to the same standard as in person encounters
- Board or licensing entity governing any healthcare provider may not establish more restrictive policy
- Obtain informed consent for telemedicine consultations

Tennessee Board of Medical Examiners 0880-02-16

- Effective 10/31/2016
- Requires full medical license in state of Tennessee
- Defines Facilitator
- Clarifies Requirements
- Defines Physician Patient Relationship


Tennessee Board of Medical Examiners 0880-02-.14

PREREQUISITES TO PRESCRIBING OR DISPENSING DRUGS - IN PERSON, ELECTRONICALLY OR OVER THE INTERNET

- Performed an appropriate history and physical examination
- Made a diagnosis based upon the examinations and all diagnostic and laboratory tests consistent with good medical care
- Formulated a therapeutic plan, and discussed it, along with the basis for it and the risks and benefits of various treatments options, a part of which might be the prescription or dispensing drug, with the patient
- Insured availability of the physician or coverage for the patient for appropriate follow-up care

Are Telemedicine visits reimbursable?

- Yes
  - As long as you meet the payor requirements
  - Some telemedicine companies are a self pay only program
- No
  - Texting, email, and fax are not reimbursable
  - Many payors have restrictions

Telemedicine Self-Pay

- May have patients sign a waiver or ABN
- May be attractive to patients in high deductible health plans
- May use healthcare savings account
Telemedicine BCBS of Tennessee

- Medical Appropriateness
  - Both providers licensed in Tennessee
  - Site of origin of service
     - Physician or practitioner office
     - Hospital
     - Critical Access Hospital
     - Rural health clinic
     - Federally qualified health center
- Practitioner at distant site must be a physician or allied health professional
- Administered through an interactive audio and video in real time
- Must have policies and procedures in place to comply with local, state and federal requirements;

CMS Coverage Guidelines

Geographic Location
- HPSA Area
- A county outside of a MSA.

Originating Sites
- The offices of physicians or practitioners
- Hospitals
- Critical Access Hospitals (CAHs)
- Rural Health Clinics
- Federally Qualified Health Centers
- Hospital-based or CAH-based Rural Dialysis Centers (including satellite of a CAH)
- Skilled Nursing Facilities (SNFs)
- Community Mental Health Centers (CMHCs)

Practitioners
- Physicians
- Nurse practitioners (NPs)
- Physician assistants (PAs)
- Nurse-midwives
- Clinical psychologists (CPs) and clinical social workers (CSWs)
- Registered dietitians or nutrition professionals

Telemedicine Coding

- Telemedicine is not a service provided, it is a mode of delivery
- The originating site is the location of the patient at the time the service is being furnished.
- The distant site is the site where the physician or other licensed practitioner delivering the service is located.
- Originating site use HCPCS code Q3014
- Distant site use 02 place of service
- Medicare modifier GT
- Commercial payer modifier 95

Telemedicine Privacy and Security

- Authorized users
- Secure communication
- Monitor communication
- Bandwidth
- Storage
- Business Associate Agreement (BAA)

Telemedicine Malpractice

- Obtain written assurances from carrier
- May create telemedicine policy
- Consider state lines
- Little history available
Telemedicine Documentation

- Same as that any face-to-face patient encounter
- Statement that the service was provided using telemedicine
- The location of the patient
- The location of the provider
- The names of all persons participating in the telemedicine service and their role in the encounter.

Telemedicine Considerations

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<thead>
<tr>
<th>Type of Service</th>
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<tbody>
<tr>
<td>New vs. Est Patients</td>
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<tr>
<td>Chronic Conditions</td>
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<tr>
<td>Minor Issues</td>
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<table>
<thead>
<tr>
<th>State lines</th>
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<tbody>
<tr>
<td>Licensed where patient is located</td>
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<tr>
<th>Workflow</th>
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<td>Scheduling</td>
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<td>Documentation</td>
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<tr>
<td>Coordinator</td>
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<th>Speed, Clarity, and Security</th>
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<tr>
<td>BAA</td>
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<tr>
<td>Bandwidth</td>
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Questions

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