Policies to Expand the Use of Telemedicine

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Telemedicine is the use of medical information exchanged from one site to another via electronic communications to improve a patient’s clinical health status.
Recent significant changes

- Revisions to the Medicare rules in late 2014
- 23 bills are active in the 114th congress
- Telemedicine bills pending within state legislatures, affecting telemedicine through scope of practice, reimbursement mandates, and standards for care and security
- July 10, 2015 H.R. 6, the 21st Century CARES bill was passed House of Representatives and now awaits Senate vote
Background

- Space program
- 1993 – American Telemedicine Association
- 2003 – VA / Health Resources and Services Act (HRSA)
- 2013 – Omnibus HRSA report
The Public Health Trinity

Improve Quality
Reduce Costs
Expand Access
The Telemedicine Trinity

- Payment parity
- National Licensure
- Scope of practice
Stakeholders

• American Telemedicine Association
• American Medical Association / American Osteopathic Association
• Rural Health Association
• Federation of State Medical Boards
• State Medical Boards
• Local Medicine Organizations
Outcomes of Implementation

- Improved Access
- Improved Quality
- Lower costs
Unintended Consequences

• Doctor on Demand
• Liability across jurisdictions
• Privacy / need for consumer protections
• Facilitation of unqualified practice
Proposals - Federal

• Expansion of payment parity via Affordable Care Act revision

• Codification of care standards

• Licensure? [Pros-Cons]
Proposals - State

• Limited scope or streamlined licensure
• Service limits to ensure safety / quality
• Malpractice requirements
• Medical record guidance
Proposal - Local

• Institutional policies
  – Informed Consent
  – Patient Selection
  – Practitioner Selection
  – Alternatives
  – Records
  – Quality controls
  – Compliance
Questions?