Can Telemedicine Solve the Healthcare Access Problem for Rural America’s Elderly and Poor?

Robin Richardson D.O.
Health Policy Fellowship 2014

Abstract

Access to medical care has been an issue for the Medicare and Medicaid populations for many years. As the nation faces a health provider shortage, the elderly and the poor are especially vulnerable. The Affordable Care Act (ACA) has improved access to primary care but efficient access to specialty medical services still presents a major obstacle to providing healthcare to these populations. Rural residents have faced greater barriers to accessing specialty services. The distances involved between patients and providers have limited the involvement of managed-care organizations in these regions. Primary care providers are scattered and have limited access to latest technology available to their urban colleagues. Critical access hospitals rarely have specialists on active staff and clinical staff lack training in critical healthcare procedures. Patients are often reluctant to travel long distances to seek specialty healthcare and when willing, the cost of transportation and temporary housing can be prohibitive to the individual and expensive to public payers. Utilization of telemedicine technology can improve access and effectiveness of specialty medical care for rural Medicare and Medicaid patients.

The following policies should be considered as a means of reducing barriers to telehealth in rural America:

- Change licensing rules that restrict use of telemedicine services across state lines;
- Create treatment guidelines for specialties which currently do not offer telehealth services; and
- Redesign reimbursement for telehealth providers.