# Why patients and family docs love telehealth

(and want it to stay post-COVID)



## Efficiency and Access

Virtual visits with a primary care doctor are typically more **convenient** for the patient, with decreased patient wait times and no need to take time off of work. There is often better access to important health data within the patient's home like medications and blood sugar logs, as well as more prompt visits with their trusted primary care provider when timely advice is needed.

Telehealth is truly "patient -centered". (1)

#### **Better Patient Outcomes**

A white paper from the AHRQ showed that telehealthimproves clinical outcomes and reduces hospitalizations and deaths for patients with diabetes, congestive heart failure, COPD, mental health issues, and other chronic medical conditions. (2)





# Cost Savings

Virtual visits can cost less for patients when accounting for cost of services, cost of travel/ mileage to a physical care setting, and lost earnings associated with travel and office wait times. With telehealth there are less costly and often unnecessary visits to the ER and hospital for patients with nonlife threatening conditions. (3)

# **Equal Value of Care**

Both physicians and patients now better appreciate how the quality of care done remotely is equal to care given in-person. Community

family docs are well trained to know which conditions can be managed remotely and which need a higher level in-person visit. With telehealth, family physicians still emphasize patient education and preventative measures, while also thoroughly reviewing medications, associated medical conditions, and socioeconomic factors - all while still having the same documentation and chart review demands, the same billing & coding processes and staff overhead, and the same medical decision making and time requirements as in-person care.

## Legislation Needed to Support Telehealth in Primary Care

- Ensure **appropriate reimbursement** (parity) for telehealth patient care post-pandemic, allowing for patients and physicians to continue having meaningful and more convenient virtual encounters.
- Increase patient access to various telehealth modalities (support both audio AND video visits, remote
  monitoring, eConsults, etc.), especially for high-risk, underserved, and vulnerable populations. This
  includes expanding broadband access to rural areas, and assisting technology-challenged older
  individuals with simpler platforms and more coordinated in -home care.
- Preserve telemedicine for patients with their local community primary care physicians, given the rapid
  expansion of corporate telehealth services, as community PCP's have long standing relationships with
  patients and local care teams, and are capable of coordinating optimal in-person care when necessary.
- Continue to allow physicians to responsibly prescribe controlled medications via telemedicine for mental health issues, for substance abuse disorders, and other conditions.

## Telehealth Impact Physician Survey

**CLINICAL OUTCOMES**More than 75% of clinicians responding to the survey indicated that telehealth enabled them to provide **quality care** in the areas of COVID19related care, acute care, chronic disease management, hospital and ED follow-up, care coordination, preventative care, and in mental/ behavioral health.



CHALLENGES More than 64% of respondents said technology

challenges for patients was a barrier to the sustainable use of telehealth. These perceived barriers included lack of access to technology and/or internet/broadband, as well as low digital literacy. 73.3% of clinician respondents indicated that **no or low telehealth reimbursement** will be a major challenge post-COVID (4).

#### **Telehealth Barriers**

- Current telehealth reimbursement rates and waived licensing restrictions are mainly supported by temporary emergency order extensions in response to the COVID19 pandemic.
- Continued issues with inappropriately **lower reimbursement rates** for telehealth care vs. in-person care, despite data demonstrating better patient outcomes and reduced healthcare costs with telehealth.
- Inconsistent state and federal **telehealth regulations** and restrictions that favor large corporations, making it difficult for solo or small group practice physicians to negotiate fair and equitable telehealth reimbursement rates with payers.
- Decreased telehealth access for low income, rurally located, less educated, and elderly patients.

<sup>1 -</sup> http://healthtechnologynet.com/2020/07/19/the-cost-savings-of-telemedicine

<sup>2 -</sup> https://effectivehealthcare.ahrq.gov/sites/default/files/pdf/telehealth-commentary-white-paper.pdf

<sup>3 -</sup> https://www.ahip.org/wp-content/uploads/FactSheet\_Telehealth-030719.pdf

<sup>4 -</sup> https://www.ama-assn.org/practice-management/digital/telehealth-research-key-resources-research-findings