



The ROI for Telehealth: Finding the Value for HIV Care



Becky Bounds, MSN, RN-BC, CPHQ
TexLa Telehealth Resource Center

Conflict of Interest Disclosure Statement

- There are no conflicts of interest to disclose.

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Learning Objectives

- Review reimbursement policy for telehealth
- Discuss the COVID-19 effect on reimbursement
- Verbalize challenges and benefits to telehealth services
- Correlate telehealth benefits to HIV care



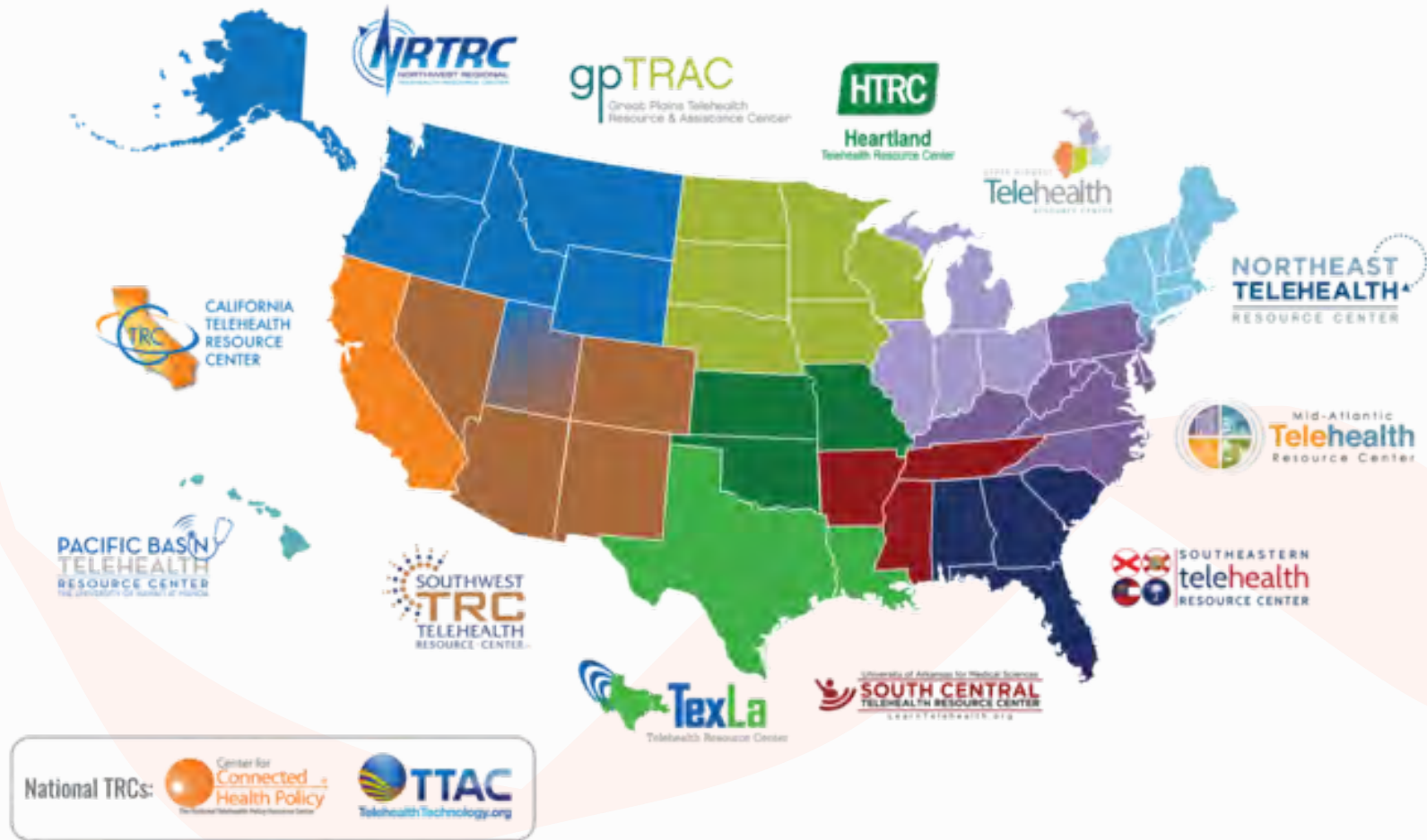
The F Marie Hall Institute for Rural and Community Health at Texas Tech University Health Sciences Center is partnered with Well-Ahead Louisiana with the Louisiana Department of Health to form the TexLa Telehealth Resource Center (TRC).



The TexLa Telehealth Resource Center is a federally-funded program designed to provide technical assistance and resources to new and existing Telehealth programs throughout Texas and Louisiana.

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National Consortium of Telehealth Resource Centers



Telehealth Adoption



Telehealth utilization increased to 50% of all physician visits mid-April and has stabilized at 15 – 20% of all visits



COVID-19 'hot spot' states' telehealth adoption rose.

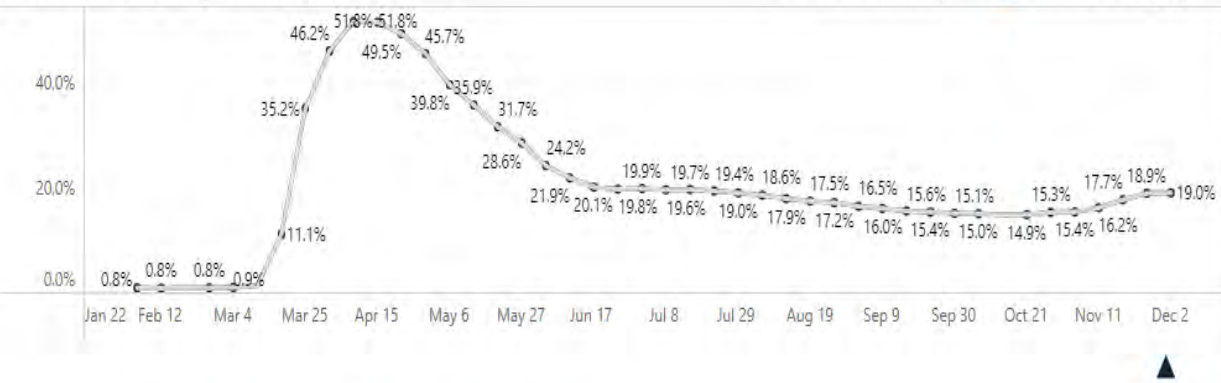


Telehealth adoption is higher in urban areas – up to 28%, widening the urban-rural divide.

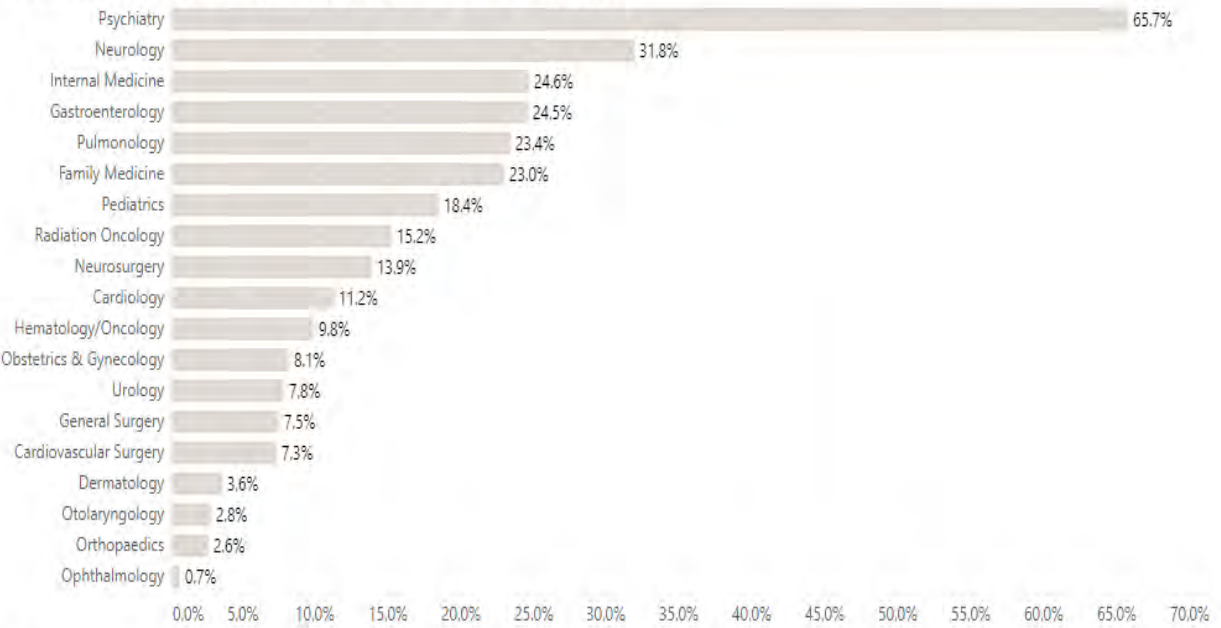


Telehealth is primarily being used for established patients rather than to establish new patients.

% Telehealth for All Specialties - National



% Telehealth by Physician Specialty - National - Week of 12/2/2020



Beta version - last updated 12/18/2020 Data below sufficient sample size has been blinded for confidentiality. Powered by Data from Kythera Labs

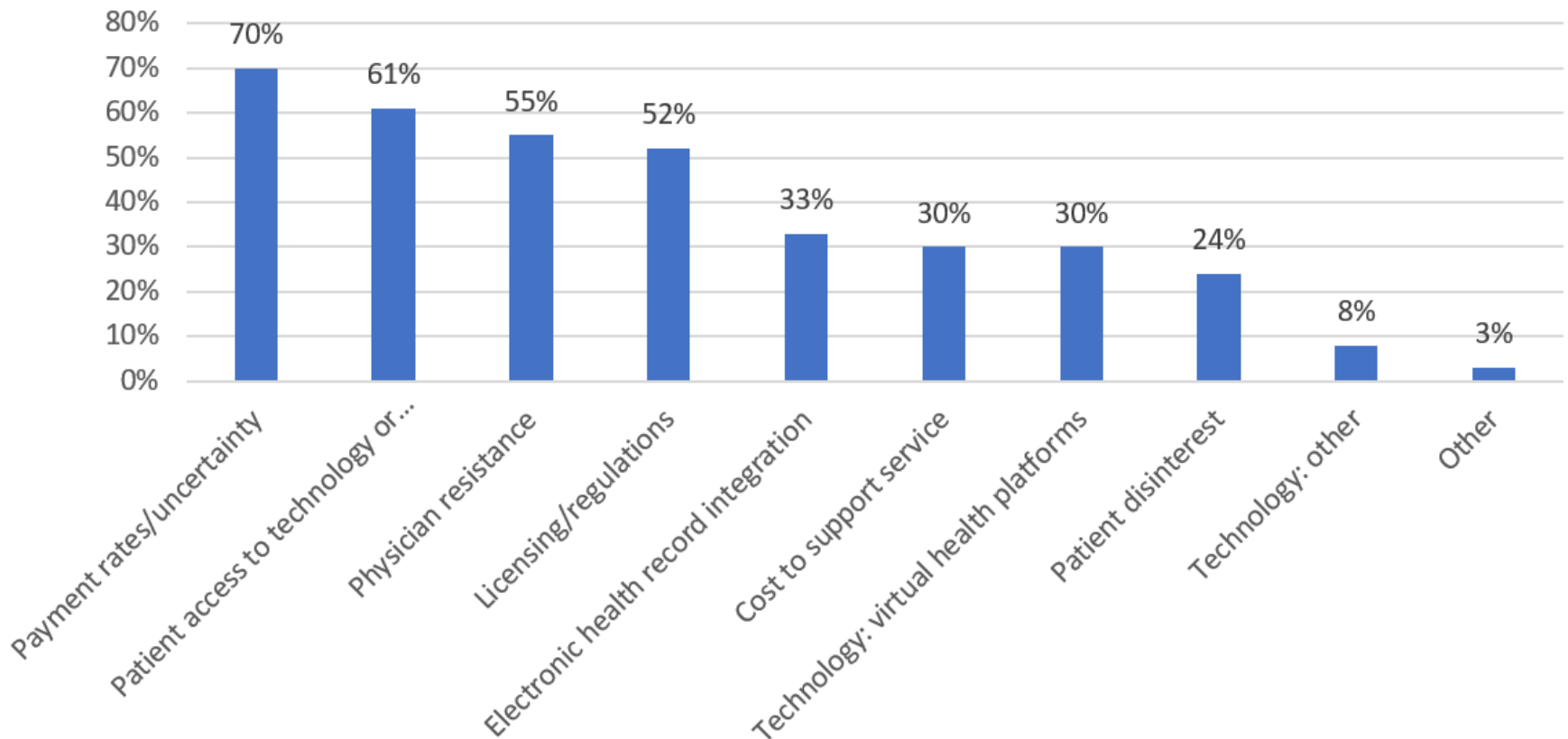
https://reports.chartis.com/telehealth_trends_and_implications-aug2020/



Challenges

Key virtual care scaling challenges*

Which barriers present the greatest challenge to scaling your virtual health enterprise?



Reimbursement for Telehealth

Reimbursement, both government and private, poses the primary obstacle to success. Even when effective mitigation of challenges is taken into account, reimbursement continues to present the most formidable obstacles.

REACHHealth 2017 U.S. Telemedicine Industry Benchmark Survey

In TexLa TRC surveys of telemedicine sites across Louisiana and Texas, reimbursement was identified at the top barrier to implementing or advancing telemedicine.

How Payment Decisions Are Made

Medicare

Patient Setting

Technology

Geography

Provider Type

Service Type

Medicaid

Patient Setting

Technology

Provider Type

Service Type

Commercial

Parity Laws

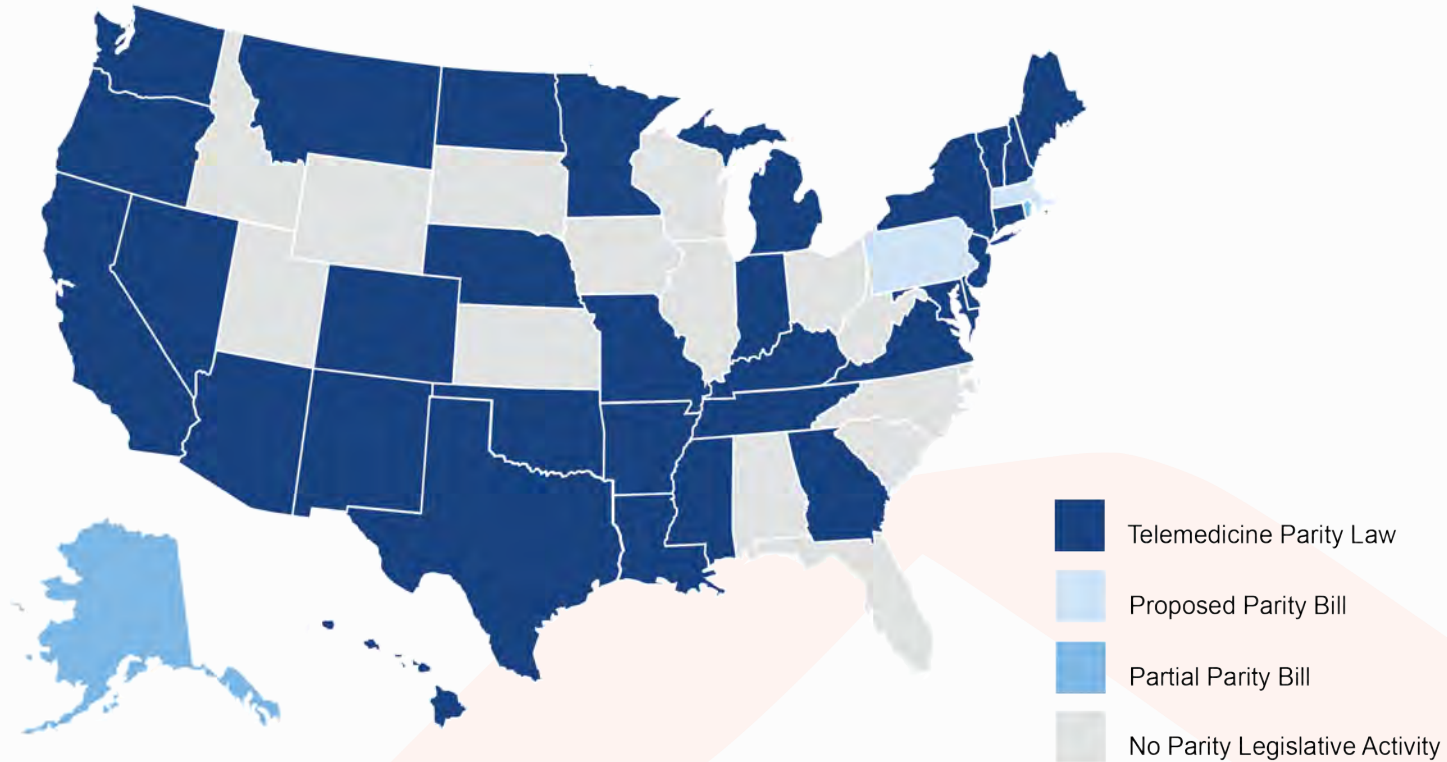
May follow Medicare or Medicaid

Exceptions

Telehealth Parity Before COVID-19

70%

U.S. states with some form of telehealth parity



Source: <https://www.cchpca.org>

Policy Changes - PHE

- Proclamation on Declaring a National Emergency Concerning the Novel Coronavirus Disease (COVID-19) Outbreak began March 13, 2020.
- The federal government took concrete steps to make telehealth services easier to implement and access during this national emergency. These changes are temporary measures during the COVID-19 Public Health Emergency and are subject to revision.



Secretary Azar signs the Public Health Emergency Declaration

CMS Medicare Policies During COVID-19

Subject	Policy During COVID-19
Patient location	Geographic restrictions removed; patient's home allowable
Modality	Live video, phone only codes, Communications based services – virtual check-in, eVisit
Provider types	All healthcare professionals that bill Medicare
Services	Billing codes added; See this list of codes
Reimbursement	Same as in-person; may waive copay
Supervision	Virtual physician supervision of providers (NP, PA), residents, and students allowed
In-person requirements and frequencies waived	SNF, ESRD, Hospice, Home Health

Value Beyond Reimbursement

Patient

- Engagement
- Access

Value-based

- Population management
- Alternative Payment Models

Provider

- Remote patient access
- Reduced overhead

Results in Our Region: Benefits

- Safety for patients and providers during COVID-19
- Maintaining patients in their community
- Uptake noted for the Black/African American population using virtual care (population has been disproportionately affected by COVID-19)
- More patients were reached for Medicare, LA Medicaid, and commercial payers
- Decreased no-shows
- Patient convenience
- Eliminated wait times
- Decreased anxiety for pedi patients
- Greater flexibility for providers

Challenges Reported: TexLa Region

- Connectivity in rural areas
- Provider engagement
- Platform selection, equipment & technology decisions
- Rapidly changing policies and flexibilities due to COVID/PHE
- Urgency to offer telehealth due to COVID
- Lack of experience
- Lack of broadband/connectivity for many patients
- Workflow development
- Patient education, billing concerns, staff training, provider comfort level, and EHR integration.

Telehealth Value for PLWH

- High acceptability & positive experience by patients
- Higher rate of patient retention/more total clinic visits
- Some improvement in viral suppression
- Reaching challenging and underserved populations
 - Rural and remote areas
 - Correctional facilities

Telehealth Post-COVID

- Expanded list of covered services
- Redefined process for adding new telehealth codes
- Advocacy across the nation from professional associations and affected groups
- More policy considerations from legislators

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More information about Medicare policy changes, refer to:

- [Medicare Coverage and Payment of Virtual Services](#) (video) — from the Centers for Medicare & Medicaid Services
- [List of Telehealth Services](#) (covered for COVID-19) — from the Centers for Medicare & Medicaid Services
- [COVID-19 Telehealth Coverage Policies](#) — from the Center for Connected Health Policy
- [Medicare Telemedicine Health Care Provider Fact Sheet](#) — from the Centers for Medicare & Medicaid Services
- [Medicare Telehealth Frequently Asked Questions](#) (PDF) — from the Centers for Medicare & Medicaid Services
- [Coronavirus Waivers & Flexibilities](#) — from the Centers for Medicare & Medicaid Services



Contact Us

TexLa Telehealth Resource Center:

www.texlatrc.org

NCTRC Contact Page:

<https://www.telehealthresourcecenter.org/contact/>

Becky Bounds
Program Manager, TexLa Telehealth Resource
Center
Email: becky.bounds@ttuhsc.edu or
texlatrc@ttuhsc.edu



Resources

- Clinical Consultation Center
<http://nccc.ucsf.edu/>
 - HIV Management
 - Perinatal HIV
 - HIV PrEP
 - HIV PEP line
 - HCV Management
 - Substance Use Management
- AETC National HIV Curriculum
<https://aidsetc.org/nhc>
- AETC National Coordinating Resource Center
<https://targethiv.org/library/aetc-national-coordinating-resource-center-0>
- Additional trainings
scaetcecho@salud.unm.edu