

# Telehealth Policy Considerations for Teleaudiology

## The Future is Here

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# Vision for America

**NO MATTER WHO YOU ARE  
OR  
WHERE YOU ARE  
YOU GET  
THE HEALTH CARE YOU NEED  
WHEN YOU NEED IT**

# Challenges to Effective Care in US

- **Access: Persistent Geographic and Functionally Isolated Populations**
- **Aging Population: By 2030, 70 million Americans estimated to be over age 65 (20% of population)**
- **Provider Shortages: By 2020, RN nurse shortage estimated to reach 1 million**

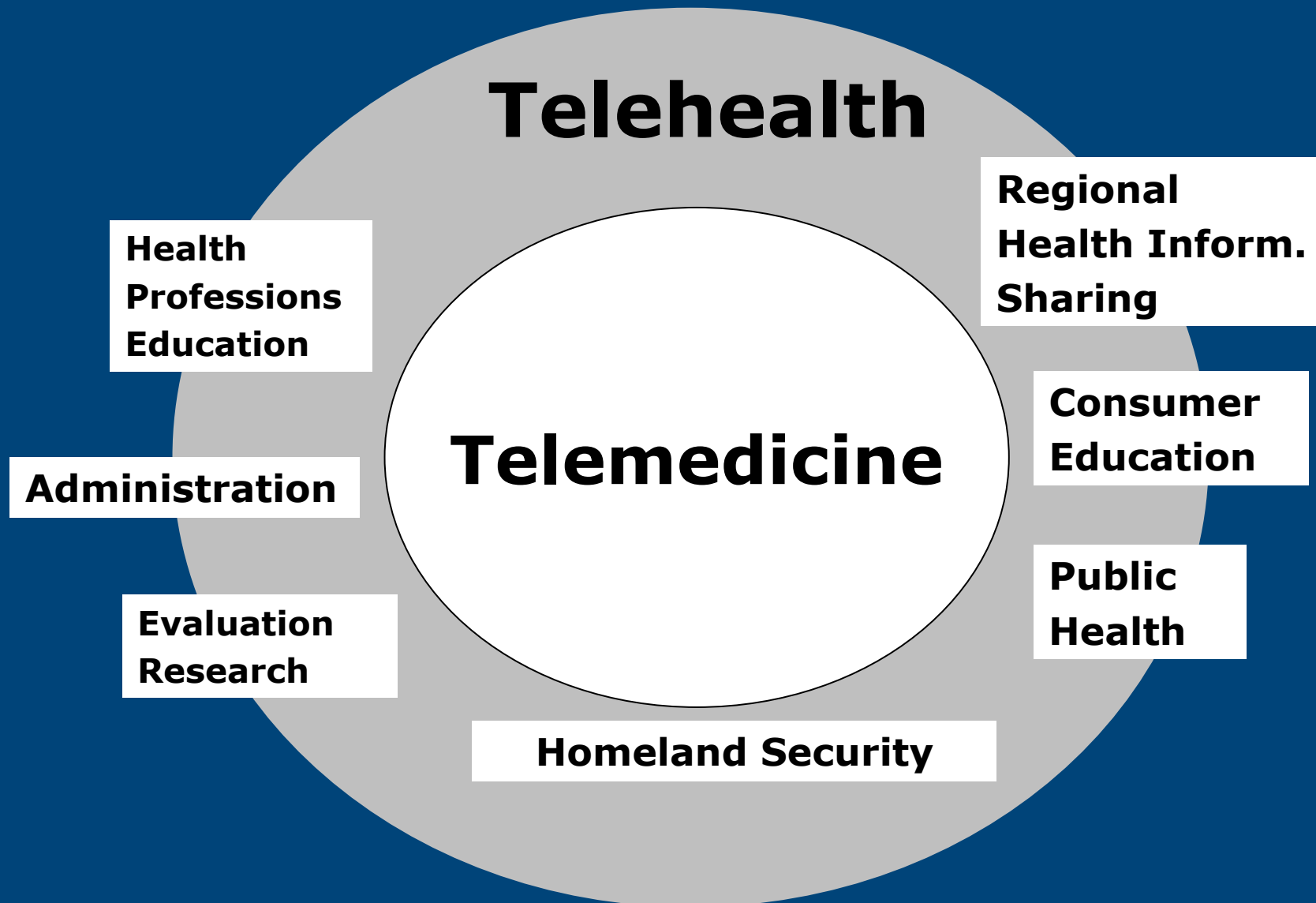
# Challenges to Effective Care in US

- **Baby Boomer Impact by 2020:**
  - **Account for more than 40% of all physician visits**
- **Baby Boomer Impact by 2030:**
  - **14 million will have diabetes**
  - **26 million will have arthritis**
  - **More than 21 million will be considered obese/care will cost Medicare 34% more than for others**
  - **Knee replacements will increase 800% from today**

# Safety Net Challenges

- **According to a Commonwealth Fund 2006 survey:**
  - **23.9% of physicians providing care to non-hospitalized patients use electronic health records in some form**
  - **Reimbursement a barrier to Telehealth and Health IT adoption**
  - **Doctors who treat large numbers of Medicaid/poor patients are half as likely to have electronic health records**
  - **Doctors in cities are more likely to have EHRs than those in rural areas, as are doctors in larger practices and in larger health care facilities**

# Telehealth vs. Telemedicine



# Definitions

- **Telemedicine: The use of Telecommunications and information technologies to provide clinical services when distance separates the participants.**
- **Telehealth: The use of telecommunications and information technologies to support health care services when distance separates the participants.**

# History of U.S. Involvement in Telehealth

- **Initiated telemedicine**
  - Dates back to 1880s after invention of the telephone
- **Early U.S. Telehealth/Telemedicine**
  - **Nebraska Medical Center - 1955**
  - **Massachusetts General Hospital/Logan International Airport Medical Station - 1967**
  - **Space Technology Applied to Rural Papago Advanced Health Care (STARPAHC) – 1972-1975**
  - **Alaska ATS-6 Satellite Biomedical Demonstration – 1971**
  - **Texas Tech -1989**

# Does Telehealth “Work”

- **Answer depends on clinical service, setting, and implementation**
- **What we think we know:**
  - **Telehealth services can improve access in rural communities**
  - **Telehealth can improve quality of care**
  - **Telehealth services do not necessarily improve productivity; depends on workflow design**
  - **Telehealth: Cost-effectiveness shown in closed systems, such as the VA, Kaiser, and limited small studies of non-closed systems - “free-world.”**

# Why is Implementing Telehealth Technologies Complicated?

- **Implementation can be costly, complicated, and time consuming**
- **Getting clinician buy-in can be difficult with some providers**
- **Successfully implementing and meaningfully using these technologies requires significant changes in how the medical practices operate**
- **Safety-net providers often operate on narrow financial margins and have many competing priorities, e.g., patient care, other operational initiatives**
- **There is an over-abundance of information about these technologies and few trusted resources**

# Key Challenges

- **Reimbursement/Start-up Costs**
- **Infrastructure**
- **Re-engineering Practice/Clinical Acceptance**
- **Evaluating cost/effectiveness, value-added**
- **Financial Sustainability**
- **Licensure/credentialing/scope of practice**
- **Integration with EHRs/Health Information Exchange at "Point of Care"**
- **HIPAA**

# Addressing Telehealth Challenges: Demonstrating Value- Added

## **Improve Clinical Acceptance:**

- Demonstrate efficacy in broader range of clinical services and settings

## **• Reengineering Practice**

- Impact of Telehealth on work-flow and productivity

## **• Financial Sustainability:**

- Cost-effectiveness/not simply reducing costs
- Alignment of incentives

## **• Workforce:**

- Address health professions shortages and maldistribution in light of increased demand due to demographics and expanded coverage

# Reimbursement

- **School Contracts**
- **Medicaid**
  - 23 states
- **Private Plans**
  - Recommend obtaining advance approval
  - State Laws mandating coverage (e.g., Maine)
- **Medicare**
  - Speech Language Pathologists and Audiologists not included as eligible Telehealth Providers

# Licensure/Privileging

- **Significant variability in definitions and details of regulation**
- **Current licensure language (where it exists) requires licensure in state where client receives service**

# Other Policy Considerations

- **FDA Approval**
- **Telecommunications regulations**
- **Anti-kickback laws**
- **Anti-trust laws**
- **EHR/Meaningful Use**

# Technical Assistance/ Information

<http://www.HRSA.gov/telehealth>

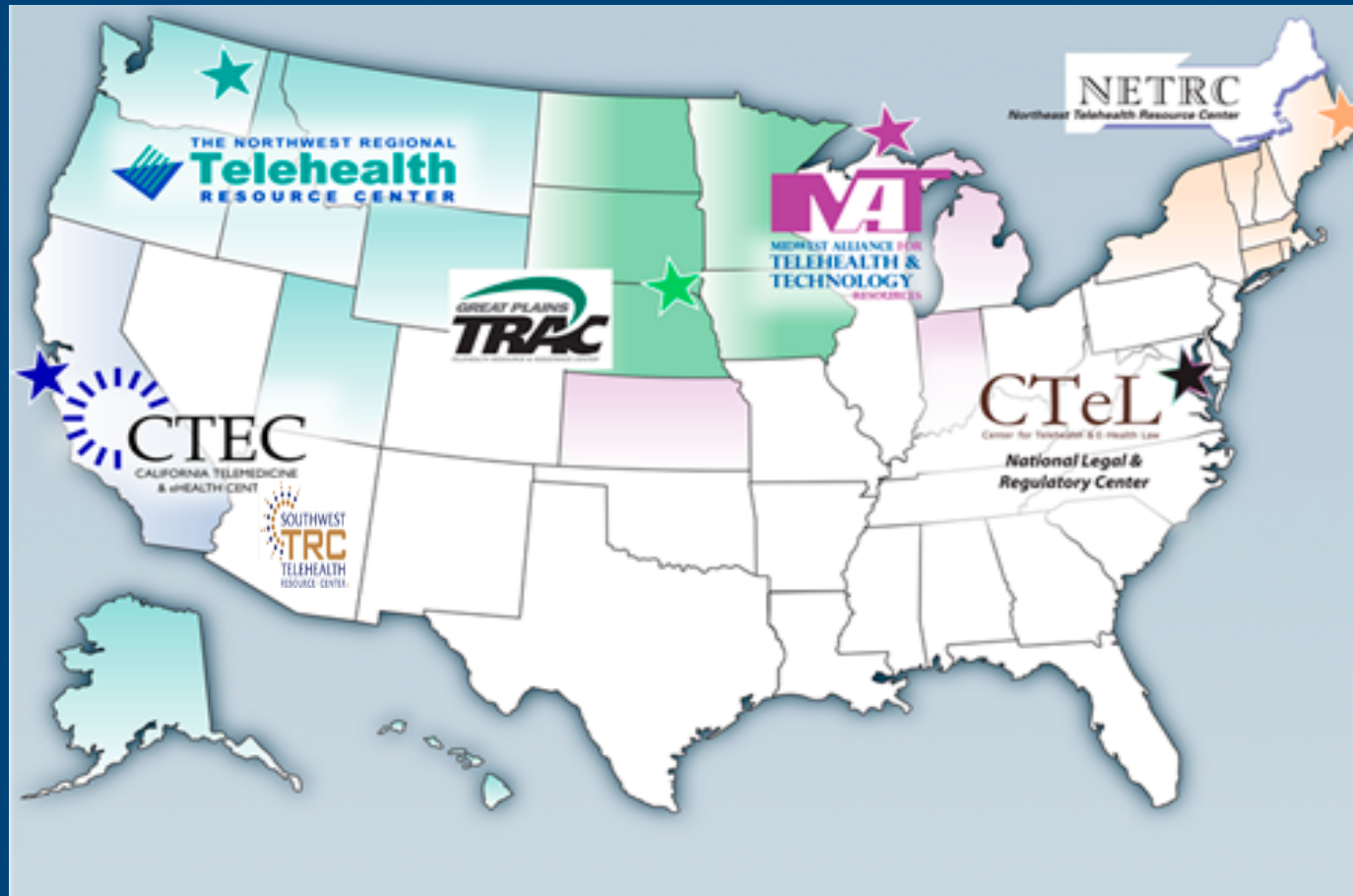
<http://healthit.ahrq.gov/>

<http://telehealthresourcecenter.org>

## Grants Information

<http://www.grants.gov>

# Telehealth Resource Center Map



# Other Resources

- **American Telemedicine Association**

<http://www.atmeda.org>

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