

Let's Get Digital: Moving the Physical to the Virtual Visit

Access to care has been a challenge for many during the COVID-19 health emergency, and telehealth has emerged as an option that many individuals are using for the first time.

Between 2014 and 2018, telehealth use grew by 624%¹—yet still accounts for less than 1% of all commercial claims² and less than 1% of total services utilized by fee-for-service Medicare beneficiaries.³ Now, during the crisis, **48% OF PHYSICIANS ARE USING TELEHEALTH TO TREAT PATIENTS**,⁴ and retail clinics⁵ and telehealth apps are reporting unprecedented demand.⁶

Federal and state policy makers, along with commercial payers, are embracing the rapid shift to telehealth. Changes include:



Centers for Medicare & Medicaid Services (CMS) Telehealth Guidance⁸

- Paying providers the same rate for services furnished via telehealth and in-person
- Reducing or waiving cost-sharing for telehealth
- Waiving the requirement that providers be licensed in the state in which the patient is located
- Expanding the list of telehealth services eligible for reimbursement to nearly 200 procedure codes⁹
- Growing the list of healthcare professionals who can deliver Medicare telehealth services
- Allowing providers to use a variety of applications to conduct virtual visits including FaceTime, Skype and Google Hangouts



Coronavirus Aid, Relief, and Economic Security (CARES ACT) Policies¹⁰

- Authorizing Medicare telehealth regulations including reimbursement limits and covered services
- Allowing federal qualified health centers and rural health clinics to furnish Medicare-covered telehealth services
- Permitting Medicare beneficiaries to receive home dialysis clinical assessments via telehealth
- Expanding the use of telehealth in veterans programs
- Increasing funding to providers and healthcare facilities for upgrades to technology, networks, and IT systems in support of telehealth and remote patient care



State Policy Reforms

- All 50 states have waived certain requirements to expand access to telehealth during COVID-19¹¹
 - Waivers include allowing physicians to practice across state lines and prescribe online¹²
- Some states have implemented their own telehealth controlled substance prescribing laws, allowing for the prescription of controlled substances over telehealth¹²



Commercial Insurers Payment and Coverage Reforms

- Several commercial insurers, are following new CMS guidelines and have enacted the following temporary policies to expand access to care through telehealth⁷:
 - Waiving member cost-sharing for telehealth visits
 - Reimbursing providers for telehealth services at the same rate as in-person visits
 - Expanding the list of covered telehealth services to include general medicine, behavioral health, and specialty care services





Considerations for Pharmaceutical Manufacturers

While the current environment remains challenging for patient access to treatment, particularly for new starts, there are ways for pharmaceutical manufacturers to remain connected to providers and help patients find and maintain appropriate treatment regimens.

Manufacturers should be looking at:

- Changes in telehealth reimbursement for public and private payers
 - Code additions
 - Modifiers necessary to process a claim for reimbursement
 - Categories (eg, telehealth visits, virtual check-ins, and telephone consultations)
 - Processes for payment
- Updates to patient consent and required documentation for telehealth¹³
- New regulatory guidelines for patient referrals for healthcare services payable by Medicare
- Impact of updated telehealth policies on physician-administered drugs, particularly home infusion
- Reforms to provider supervision requirements (eg, prior to COVID-19, telehealth was offered to patients in rural communities, such as medical staff provided chemotherapy infusion treatments to patients under direct supervision of a certified nurse practitioner based remotely at a cancer center)
- Leveraging telehealth to support and manage product launches, particularly for digital therapeutics
- Product life cycle management tools to:
 - Help patients manage drugs with variable doses
 - Demonstrate services that can achieve better outcomes (eg, remote patient monitoring)

In today's era of increased access to care through telehealth, Xcenda is strategically positioned to offer impact assessments, policy and reimbursement analyses, and creative patient access strategies.

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1. Fair Health. A multilayered analysis of telehealth. <https://s3.amazonaws.com/media2.fairhealth.org/whitepaper/asset/A%20Multilayered%20Analysis%20of%20Telehealth%20-%20A%20FAIR%20Health%20White%20Paper.pdf>.
2. Healthcare Financial Management Association. Telehealth use among Medicare patients limited but growing. <https://www.hfma.org/topics/article/63340.html>.
3. CMS. Information on Medicare telehealth. <https://www.cms.gov/About-CMS/Agency-Information/OMH/Downloads/Information-on-Medicare-Telehealth-Report.pdf>.
4. Merritt Hawkins. Survey: physician practice patterns changing as a result of COVID-19. <https://www.merrithawkins.com/news-and-insights/media-room/press/-Physician-Practice-Patterns-Changing-as-a-Result-of-COVID-19/>.
5. The Motley Fool. CVS Health Corp (CVS) Q1 2020 earnings call transcript. <https://www.fool.com/earnings/call-transcripts/2020/05/06/cvs-health-corp-cvs-q1-2020-earnings-call-transcri.aspx>.
6. Olson P. Telemedicine, once a hard sell, can't keep up with demand. <https://www.wsj.com/articles/telemedicine-once-a-hard-sell-cant-keep-up-with-demand-11585734425>.
7. America's Health Insurance Plans. Health insurance providers respond to coronavirus (COVID-19). <https://www.ahip.org/health-insurance-providers-respond-to-coronavirus-covid-19/>.
8. CMS. Physicians and other clinicians: CMS Flexibilities to Fight COVID-19. <https://www.cms.gov/files/document/covid-19-physicians-and-practitioners.pdf>.
9. CMS. List of telehealth services. <https://www.cms.gov/Medicare/Medicare-General-Information/Telehealth/Telehealth-Codes>.
10. 116th Congress. S. 3548. <https://www.congress.gov/116/bills/s3548/BILLS-116s3548is.pdf>.
11. Center for Connected Health Policy. COVID-19 related state actions. <https://www.cchpca.org/resources/covid-19-related-state-actions>.
12. Federation of State Medical Boards. U.S. states and territories modifying licensure requirements for physicians in response to COVID-19. <https://www.fsmb.org/siteassets/advocacy/pdf/state-emergency-declarations-licensure-requirements-covid-19.pdf>.
13. Agency for Healthcare Research and Quality. How to obtain consent for telehealth. <https://www.ahrq.gov/health-literacy/obtain-consent-telehealth.html>.