A Telehealth Update

Presented to the Health and Government Operations Committee

October 15, 2020



Telehealth – MHCC's Role

Telehealth is an important strategy to improve access to care and reduce health care costs, three key initiatives (*The Maryland Health Care Commission 2019-2022 Strategic Report*)

- Assess barriers to adoption and propose solutions to address barriers
- Foster technology adoption and meaningful use
- Educate providers and consumers on value and best practices

Supporting Telehealth Policy Development

The MHCC is planning to conduct an impact evaluation of telehealth in 2021; key questions include:

- Has telehealth improved access to care, particularly for more vulnerable patients?
- Has telehealth induced new demand for services or offset in-person care?
- What is the financial impact of widespread use of telehealth on Maryland's Total Cost of Care Model?
- Does telehealth reduce emergency department utilization?
- How can new components of telehealth, such as remote patient monitoring, be integrated into the course of care and systems of reimbursement?

PHE and Regulatory Relief Propels Telehealth Adoption

Enabled by Executive Orders from Governor Hogan and waivers from the federal government; waivers were time limited, however, many have been extended to the end of the public health emergency (PHE)

- Telehealth waivers (some variance across payors):
 - Patient location (originating site) lessening of geographical restrictions
 - Licensing greater flexibilities to practice across State lines
 - o Patient-provider relationship redefined what constitutes a treatment relationship
 - Eligible providers expanded provider types that can deliver telehealth services
 - Types of services covered increased the number of services payable when furnished via telehealth

PHE and Regulatory Relief Propels Telehealth Adoption

(Continued)

- Cost-sharing patient obligation eliminated or reduced
- Technology use of popular non-public facing applications (for video and text) temporarily permitted to deliver telehealth services
 - The Office for Civil Rights is exercising enforcement discretion and not imposing penalties for noncompliance with the regulatory requirements under HIPAA Rules for the good faith provision of telehealth

Telehealth Adoption Pre-COVID-19

Adoption in Maryland informed by data:

- 11% practices (2017 Maryland Board of Physicians License Renewal)
- 96% hospitals; diffusion limited to certain departments, 4% planning to implement (2018 Hospital Health IT Survey)
- 12% nursing homes (2019 Nursing Home Survey)
- 27% home health agencies; limited to remote patient monitoring (2019 Home Health Health IT Scan)
- 4% dentists (2019 Dental Health IT Scan)

Telehealth Adoption in Response to COVID-19

- *Adoption in Maryland based partly on anecdotal information:
- 70% practices (↑ 59%)
- 100% acute care hospitals; expansion to most departments (↑ 4%)
 - One health system reports conducting about 100,000 telehealth visits in May and June, up from about 100 per month before COVID-19
- 45% nursing homes (↑ 33%)
- 65% home health agencies; limited to remote patient monitoring (↑ 38%)
- 6% dentists (↑ 2%)

MHCC Activities in Response to COVID-19

Telehealth Virtual Resource Center

A web page with resources to assist providers with telehealth implementation

- Featured information:
 - o Payor policy changes and reimbursement
 - Web-enabled Telehealth Readiness Assessment Tool
 - Technology vendor selection guidance
 - Privacy and security considerations
 - Best practices for patient engagement and virtual care
- Resources are continuously added, reflective of stakeholders inquiries and requests

Consumer Awareness Building

- Educational materials highlighting the utility of telehealth, answers to frequently asked questions about virtual care, and safety tips during the PHE
- Podcasts highlighting the telehealth experience
- Telehealth public service announcements (broadcasted in 91 Giant Food Stores and on 15 radio stations in Maryland)

Telehealth Adoption Grant

- A technology grant awarded to three State-Designated Management Service Organizations (MSOs) to assist small practices with telehealth implementation
 - Coaches work with practices to complete specific milestones
- Practice activity as of September 2020:
 - 150 expressed interest in working with an MSO
 - 72 provided with adoption support
 - 52 attested to using telehealth in care delivery

Post-COVID-19 Planning

- Momentum increasing nationally to make some telehealth policy changes permanent; a complete post- COVID-19 telehealth policies are not yet clear
- Payors have signaled that some dialing back will occur at the end of the federal/State PHE
 - o Audio only, first contact telehealth visits, telehealth from within same site
 - Getting the prices right Medicare will use the annual physician fee schedule update as a vehicle for making changes to the scope and fee levels for Medicare telehealth services
 - Medicaid federal and State collaboration on scope and payment with possible State budget impact
- Policymakers need to address inequities in access to telehealth

Post-COVID-19 Planning (Continued)

- The MHCC is convening a Telehealth Policy Workgroup to discuss policies and potential future legislation alignment opportunities
 - Over 60 different stakeholders consisting of payors, providers, consumers, and technology vendors, among others
 - O Virtual kick-off held September 30th, meetings are planned through the end of this year
 - An information brief is targeted for release in 2021

The End

Appendix

Note: Italicized items represent temporary measures waiving certain use requirements for telehealth during the COVID-19 public health emergency

Category	Maryland Medicaid		Medicare	
Distant Site Providers (that can bill for telehealth services)	 Somatic Services: As permitted by licensing board Licensed Physical Therapists Individualized Education Program (IEP)/Individualized Family Service Program (IFSP) Licensed Speech Pathologists Licensed Occupational Therapists Qualified Service Coordinators per COMAR 10.09.40 or COMAR 10.09.52 Dentists 	 Behavioral Health:* Psychiatrists Psychiatric Nurse Practitioners (CRNP-PMH) Advanced Practice Nurses (APRN-PMH) LCPC, LCMFT, LCADC, LCPAT LCSW-C In Outpatient Mental Health Clinics - only under supervision - LMSW or LCSW, LGPC, LGADC LGMFT, LGPAT In ASAM Level 1 outpatient SUD program, State licensed providers only – CAC-AD, CSC-AD FQHCs who bill through the Specialty Behavioral Health System Licensed Psychiatric Rehabilitation Program Licensed Substance Use Disorder Intensive Outpatient Centers Substance Use Disorder Residential Treatment Program 	 Physicians Nurse Practitioners Physician Assistants Nurse Midwives Clinical Nurse Specialists (CNS) Certified Nurse Anesthetists Clinical Psychologists Clinical Social Workers Registered Dietitians or Nutrition Professionals Physical Therapists Occupational Therapists Speech Language Pathologists 	

^{*}Behavioral health providers must be enrolled in the Maryland Department of Health's Specialty Behavioral Health Program

Category	Maryland Medicaid	Medicare
Locations (originating site: where the patient and possibly a provider are located; distant site: where the provider is located)	 Originating site A college or university student health or counseling office; A community-based substance use disorder provider; A deaf or hard of hearing participant's home or any other secure location as approved by the participant and the provider; An elementary, middle, high, or technical school with a supported nursing, counseling or medical office; A local health department; A Federally Qualified Health Center (FQHC); A hospital, including the emergency department; A nursing facility; A private office (physician, physician assistant, psychiatric nurse practitioner, nurse practitioner, or nurse midwife); An opioid treatment program; An outpatient mental health center (OMHC); A renal dialysis center A residential crisis services site; or Patient's home or another secure location Distant site Any secure, private location 	 Originating site in a rural area Physician and practitioner offices Hospitals Critical Access Hospitals (CAHs) Rural Health Clinics FQHC Hospital-based or CAH-based Renal Dialysis Centers (including satellites)* Skilled Nursing Facilities (SNFs) Community Mental Health Centers (CMHCs) Renal Dialysis Facilities * Homes of beneficiaries with End-Stage Renal Disease (ESRD) getting home dialysis* Mobile Stroke Units Any health care facility or the patient's home regardless of rural designation Distant site *Rural area restriction does not apply

Category	Maryland Medicaid	Medicare
Services	 Audio-visual Somatic Care: Services permitted within a provider's scope of practice by the licensing board Physical Therapy (PT) IEP/IFSP PT, Occupational Therapy, Speech Therapy, Psychotherapy, Nutrition Services Outpatient and Residential Substance Use Disorder Treatment Dental Group Therapy Treatment Audio-only Telephone Somatic Services: Evaluation and management of an established patient (5-15 minutes) Behavioral Health Evaluation and management of an established patient Psychotherapy: Individual and families Outpatient and Residential substance use disorder treatment 	 Telehealth Visit (real-time audio-visual) Virtual Check-Ins (several modalities) Not related to a medical visit within the previous 7 days Does not lead to a medical visit within the next 24 hours E-Visit (online portal) Patient initiated Occurs over a maximum of 7 days (Full list of telehealth codes included on CMS website)

Category	Maryland Medicaid	Medicare
Types of Technology	 Must have the following: A camera that has the ability to manually, or under remote control, provide multiple views of a patient with the capability of altering the resolution, focus, and zoom requirements according to the consultation; Have display monitor size sufficient to support diagnostic needs used in the service via telehealth; Bandwidth speed and image resolution sufficient to provide quality video to meet a minimum of 15 frames per second, or higher, as industry standards change; Unless engaging in a telehealth communication with a participant who is deaf or hard of hearing, audio equipment that ensures clear communication and includes echo cancellation; Creates audio transmission with less than 300 millisecond delay; Secured and HIPAA compliant telehealth communication (COMAR 10.09.36 General Medical Assistance Provider Participation Criteria) Notebook computers and smartphones that do not fully meet the qualifications outlined in the Program Manual (above) Audio-only telephone For video applications that do not meet State regulations and audio-only telephone services, patient must be provided with a clear explanation of potential limitations, including confidentiality, and provide explicit consent 	For a telehealth visit, interactive, real-time audio and video telecommunications system For a virtual check-in, system that enables secure communication (e.g., telephone, secure text message/email, video, or image) For an E-Visit, online portal
Cost-Sharing	Same as in-person visits	 Generally applies to services rendered For telehealth visits only, flexibility to reduce or waive cost-sharing paid by federal health care programs (may not apply to virtual check ins or e-visits)

Category	Aetna	CareFirst	Cigna	United	-lealthcare
	In-network providers	 Clinicians and Associated Nurse Practitioners in: Primary Care General Practice Internal Medicine Pediatrics OBGYN Behavioral Health Psychiatrists Nurse Practitioners Psychologists Licensed Certified Social Workers Licensed Professional Counselors Dentists 	In-network providers	 Physicians Nurse Practitioners Physician Assistants Nurse-Midwives Clinical Nurse Specialists Registered Dietitians or Nutrition Professionals Clinical Psychologists Clinical Social Workers 	 Certified Registered Nurse
Locations (originating site: where the patient and possibly a provider are located)	Check with carrier	Check with carrier	• Check with carrier	 The office of a physician or practitioner; A hospital (inpatient or outpatient); A CAH; A rural health clinic (RHC); An FQHC; A hospital-based or critical access hospital-based renal dialysis center (including satellites); NOTE: Independent renal dialysis facilities are not eligible A SNF 	 CMHC Mobile Stroke Unit Patient home only for monthly ESRD, ESRD-related clinical assessments, and for purposes of treatment of a substance use disorder or a co-occurring mental health disorder; and Patients home or other secure location for any visit type

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Category	Aetna	CareFirst	Cigna	UnitedHealthcare
Services	 Services that can be appropriately delivered via telehealth following requirements of Maryland law* Behavioral Health Partial Hospitalization Program Applied Behavioral Analysis Outpatient psychiatric services Psychotherapy Dental Audio-visual or Phone Somatic Brief Check-In 5-10 minutes (phone) Behavioral Health Assessment or reassessment Mental health visits Group psychotherapy Alcohol and drug treatment services Medication Management 	 Services that can be appropriately delivered via telehealth following requirements of Maryland law* Evaluation and Management (E/M) Behavioral Health Outpatient psychiatric services Assessment or Reassessment Applied Behavioral Analysis Developmental Screening End-Stage Renal Disease (ESRD) Advanced care planning Physical Therapy Speech Therapy Dental Telephone-Only E/M for somatic and behavioral health 	Audio-visual or Telephone Services that can be appropriately delivered via telehealth following requirements of Maryland law* Virtual check in existing patient	Audio-visual Services that can be appropriately delivered via telehealth following requirements of Maryland law* Annual Wellness Visits Behavioral Health Psychotherapy Neurobehavioral Counseling Smoking Cessation Alcohol or substance abuse treatment ESRD Genetics Counseling Retinal Treatment Assessment and reassessment Nutrition Self-Management Education/Training E/M Transitional Care Management Cancer screening Consultations (inpatient/outpatient) Chronic Care Management Cardiac monitoring Physical Therapy Occupational Therapy Speech Therapy Chiropractic Home Health Hospice Audio-visual or audio-only Virtual Check-In (several modalities) Evaluation and management of an established patient (5-15 minutes) Dentistry E-visit (online portal)

Category	Aetna	CareFirst	Cigna	UnitedHealthcare
Types of Technology	 Synchronous audio-visual connection in accordance with Telemedicine Policy Telephone only for evaluation, care management, and some behavioral health services 	 Interactive audio, video, or other electronic media Telephone only consultations 	 Audio-visual or telephone (audio-only) Audio-visual technology only for behavioral health 	 For a telehealth visit, synchronous audio-visual connection For a virtual check-in, several communication modalities, including telephone For e-visits, online portal
Cost-Sharing	Waiving fees for outpatient behavioral and mental health counseling	Waiving fees for COVID-19 related virtual visits	 Waiving fees for virtual screening telephone consult Waiving fees for COVID-19 related virtual visits 	Waiving fees for COVID-19 related virtual visits

MHCC Key Initiatives

Telehealth Virtual Resource Center (TVRC)	Dedicated web page with resources to assist practices with telehealth implementation during the COVID-19 public health emergency and beyond.	mhcc.maryland.gov/mhcc/Pages/hit/hit_telemedic_ine/hit_telemedicine_virtual_resource.aspx
Consumer Awareness Building	Educational materials highlighting the utility of telehealth and answers to frequently asked questions about virtual care. Activities include public service announcements recorded by former Baltimore Orioles player, Jim Palmer and current catcher, Austin Wynns, guest blogging for AARP, and a telehealth podcast in collaboration with Giant.	mhcc.maryland.gov/mhcc/Pages/hit/hit_telemedic ine/hit_telemedicine_consumer.aspx
Telehealth Readiness Assessment (TRA) Tool	An interactive, web-based application designed to help ambulatory practices gauge their readiness for telehealth and identify areas for improvement across five key areas: core readiness, financial considerations, operations, staff engagement, and patient readiness.	mhcctelehealthtool.herokuapp.com/
Federal Communications Commission (FCC) COVID-19 Telehealth Program	Technical support provided to acute care hospitals and skilled nursing facilities to advance remote patient monitoring for COVID-19 positive and high risk patients. Eligible applicants could submit an application for one or more use cases and receive up to \$1 million for telecommunications services, information services, and devices necessary to provide connected care services. Maryland providers received nine awards totaling nearly \$5.5 million. The FCC stopped accepting new applications on June 25th; an announcement of final awards was issued July 8 th .	www.fcc.gov/covid-19-telehealth-program
Stakeholder Inquiries	Responses provided ongoing to inquiries from providers and consumers as it relates to telehealth technology selection, implementation, workflow redesign, staff training, payor policies, and acclimating consumers to virtual care delivery.	Over 150 inquiries received by email and phone and responded to using a call center approach since the COVID-19 public health emergency.

MHCC Key Initiatives (Continued)

Telehealth Technology Vendor Portfolio (portfolio)	Designed to help save practices time identifying and reviewing about 70 HIPAA-compliant telehealth vendors with just a few clicks, users can select basic technology features, such as compatibility with medical devices (e.g., blood pressure cuffs and glucometers) or personal devices (e.g., smartphones and tablets) and assess vendor user ratings that incorporate perceptions around ease-of-use and overall product satisfaction. This provides practices with a unique opportunity to begin the process of evaluating telehealth solutions and the vendor providing the service.	To maximize automation, click "Enable Content:" mhcc.maryland.gov/mhcc/pages/hit/hit telemedicie/documents/TLHT Telehealth Portfolio Protected.x lsm Traditional excel workbook: mhcc.maryland.gov/mhcc/pages/hit/hit telemedicine/documents/TLHT Telehealth Portfolio Protecte Standard.xlsx
Telehealth Demonstration Projects	Since 2014, MHCC has awarded 17 telehealth grants to qualified health care organizations operating in Maryland.	mhcc.maryland.gov/mhcc/pages/hit/hit_telemedicin e/documents/TLHT_Grants_Table.pdf
Expanding Telehealth Adoption in Ambulatory Practices	Three State-Designated Management Service Organizations (MSOs) are providing technical guidance to ambulatory practices in the State to support diffusion of telehealth during the COVID-19 public health emergency and beyond.	mhcc.maryland.gov/mhcc/pages/hit/hit/documents/ HIT Coach Flyer.pdf
Webinars	Features telehealth champions, including local and national experts to provide telehealth education and awareness to different provider types.	mhcc.maryland.gov/mhcc/Pages/hit/hit/hit_webinaraspx
Dental	A questionnaire is being designed to help assist dentists in determining if teledentistry is a suitable option for their practice based on data compiled from a 2019 Dental Health Information Technology environmental scan and feedback from dentists.	The questionnaire is under development.

MSO Grant Milestones

Milestone 1

- Completion of the TRA tool or an alternative MHCC approved practice assessment in collaboration with practice staff
- Development of a plan to address areas of improvement including prioritization of those areas identified in the TRA tool or an MHCC approved alternative
- O Consultation advice to practices on the selection and implementation of a telehealth solution

 Note: MSOs are prohibited from promoting a single solution to practices under this grant; A range of options must be presented

Milestone 2

 Educate practice staff on telehealth guidance issued by OCR, CMS, Maryland Medicaid, and commercial payers regarding new and existing requirements, temporary waivers, etc.

Milestone 3

Development of a telehealth workflow matrix diagram in consultation with practice staff

Milestone 4

 Training of practice staff on using the selected telehealth technology and the practice approved telehealth workflow matrix diagram consisting of reengineered workflows to support telehealth