

# Telemedicine: Ensuring Parity for Treatment and Access to Monitoring

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Telemedicine can be used to effectively address physician shortages across Iowa, including the mental health arena. There are proven models of care that rely on telemedicine to effectively manage behavioral health and other health care shortages in rural communities. Not reimbursing health care providers fairly for using telemedicine means these systems are not being used to full capacity.

Besides telemedicine, other states allow reimbursement for remote patient monitoring through state programs such as Medicaid. Remote patient monitoring allows health care professionals to watch a patient's vital signs outside of a clinical setting. This has been used for many chronic diseases, including blood glucose in diabetics, blood pressure with congestive heart failure and alerting caregivers when someone with dementia has fallen.

Telemedicine is proven to improve health and make care more affordable by making it easier to access services for rural residents and the medically frail. Iowa should take steps to ensure telemedicine services are developed and used effectively.

***The Legislature should pass legislation requiring that telemedicine services be reimbursed at the same rate as in-person services. In addition, the Legislature should allow remote patient monitoring to be included in the definition of reimbursable telemedicine services.***

## Issue Background - Talking Points

- Payment parity increases the investment in telehealth services. Payment parity ensures providers are reimbursed by insurance companies for the same amount of work as they would if they delivered a service in person. This encourages people to use telehealth services and increases access to care for patients who are difficult to reach.
- A goal of telehealth is to improve access to rural areas. This goal is met because increased access allows people to seek treatment for ailments they might not have received otherwise.
- The full use of telehealth services will provide better outcomes for patients with chronic conditions, allowing for faster reactions to incidents that can improve outcomes and potentially reduce costly treatments when a condition is not treated earlier.

## Recent Policy Changes

- In January 2019, H.F. 2305 was enacted to prevent insurance companies from discriminating on health care coverage between services provided in person and through telemedicine.
- This legislation does not have an explicit payment-parity requirement. It merely states insurance companies “shall not discriminate” between telehealth and in-person services. Insurance companies are paying hospitals and providers less for telehealth services than for an in-person visit, frustrating the goals of improving access in rural communities.

## Legislative Request

- It is important for legislation to clearly state that telemedicine services will be reimbursed the same as in-person services, which is like other states.
- Further, remote patient-monitoring services are an important tool in ensuring value-based care and patient outcomes. These services should be included in the definition of reimbursable telemedicine services.

***The Iowa General Assembly should revise Iowa law to allow for remote patient monitoring and state, “A health carrier shall reimburse the distant site licensed health care provider for covered services delivered through telemedicine on the same basis and at the same rate as the health carrier would apply to those services if the services had been delivered in person by the distant site licensed health care provider.”***