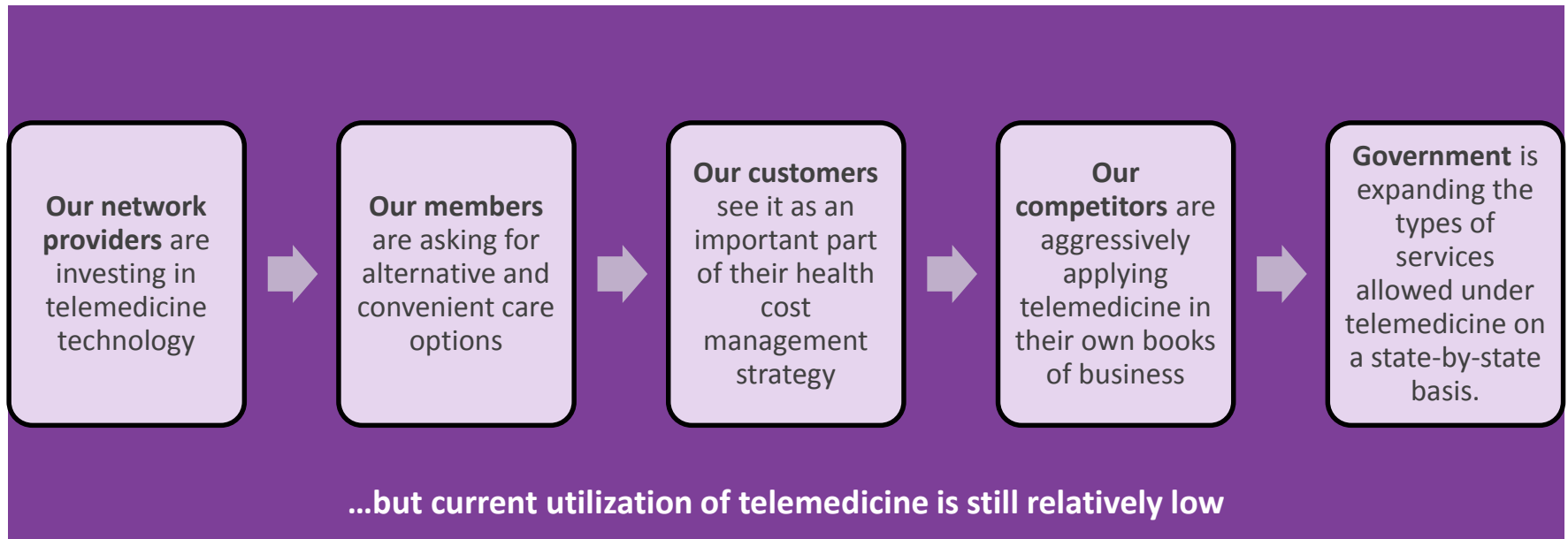# Telemedicine

October 2017

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- Telemedicine momentum and stakeholder engagement

- Landscape and Aetna's position

- Telemedicine strategy

Momentum is growing for telemedicine across all segments

- A large percentage of employers have and continue to adopt telemedicine as an important part of their cost management strategy.

- Millennials are more enthusiastic and engaged but more consumer segments appear interested.

- Competitor engagement is rapidly growing.

- Telemedicine can be integrated with value-based contracting initiatives that pay for outcomes, not services.

- Federal initiatives as MACRA are aligned to entice provider and patient engagement.

- Growing Industry Trends

We believe telemedicine can improve affordability, access to care, quality, and the patient experience…

| **Our network providers** are investing in telemedicine technology | | **Our members** are asking for alternative and convenient care options | | **Our customers** see it as an important part of their health cost management strategy | | **Our competitors** are aggressively applying telemedicine in their own books of business | | **Government** is expanding the types of services allowed under telemedicine on a state-by-state basis. |

…but current utilization of telemedicine is still relatively low

Aetna is actively working to enhance provider adoption of telemedicine and consumer engagement strategy, and believe that integrated telemedicine administered by our "network providers" can help meet our goals of expanding service, coverage, and the appropriate use and adoption of telemedicine, while at the same time meeting customer needs and expectations.

Aetna is also actively working with telemedicine vendor relationships to supplement gaps with technology platform and workflow solutions to targeted providers in the local network

What is telemedicine?

Telemedicine is the remote delivery of health care services and clinical information using telecommunications technology. This includes a wide array of clinical services using internet, wireless, satellite and telephone media.
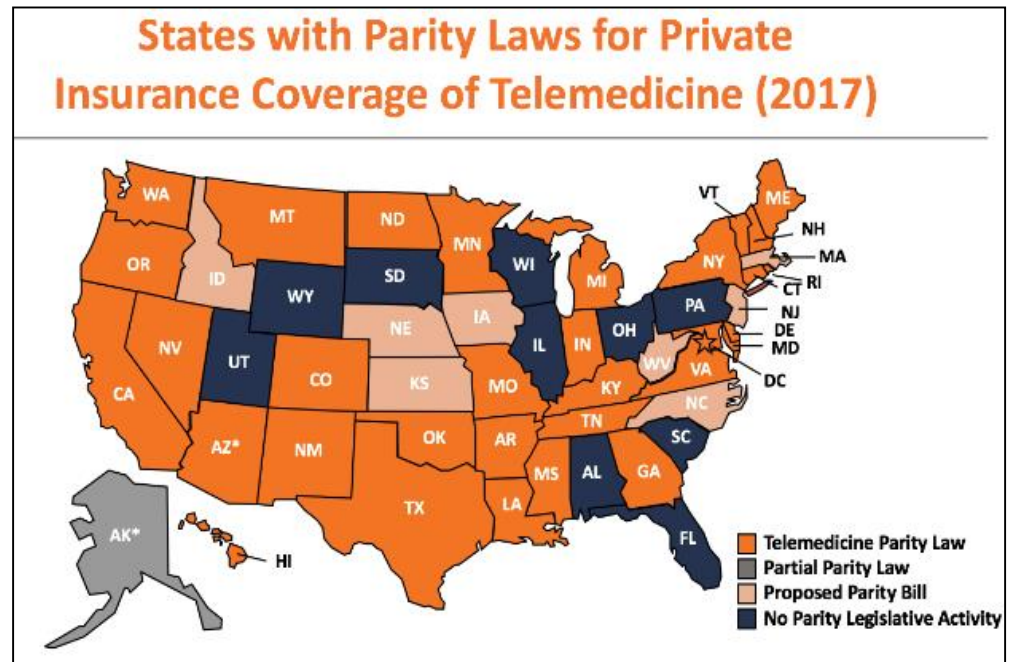

American Telemedicine Association (ATA) treats "telemedicine" and "telehealth" as synonyms and uses the terms interchangeably. In both cases, they are referring to the use of remote health care technology to deliver clinical services.

State landscape for telemedicine

Government regulations, particularly at the state level, can be a hindrance to telemedicine. However, the playing field is starting to open up.

- 34 states and DC have **coverage parity**, requiring covered face-to-face visits also be covered as telemedicine
- 18 states have **benefit parity,** requiring telemedicine benefit levels to be equal or better than face-to-face
- 9 states have **reimbursement parity**, requiring the same reimbursement as an in-person visit

States with Parity Laws for Private Insurance Coverage of Telemedicine (2017)

Legend:
- Telemedicine Parity Law
- Partial Parity Law
- Proposed Parity Bill
- No Parity Legislative Activity

- Many states are expanding the types of services they allow under telemedicine, but mandates are inconsistent, and always changing.
- As part of our approach, we are in constant contact with Aetna medical policy to stay up-to-date on state telemedicine guidelines and evaluation of regulations

Source: http://www.americantelemed.org/policy-page/state-policy-resource-center

MACRA, federal policies in relation to telemedicine

With the passage of the Medicare and CHIP Access and Re-authorization Act (MACRA) and a slew of new rules, the federal government is opening the door in a new way to telemedicine.

- MACRA. This rule is expected to be the biggest change to how providers are paid in Medicare in decades, allows providers to use telemedicine to fulfill clinical practice improvement activities – one of the areas on which providers will be measured.

Telemedicine-friendly features of MACRA:

- CMS proposed including telemedicine in the definition of "patient-facing encounters."

- It is mentioned explicitly as a way to expand practice access.

- It can also be used to meet practice improvement activities in population management, patient engagement and care coordination categories.

"MACRA essentially lifts all restrictions that would otherwise exist under fee-for-service and allows doctors to utilize telemedicine and remote patient monitoring services where appropriate — offering a green field opportunity to rethink care delivery in a way that's patient-centered and promotes care coordination and communication." – "Telemedicine and alternative payment models: An apt fit." Healthcare Dive. March 24, 2016. Read more here.

"From MACRA to the states, telemedicine is ramping up." Greenway Health. July 15, 2016. http://www.greenwayhealth.com/blog/telemedicine-ramping/.
"Finally, a Chance for Telemedicine to Shine in Medicare and Medicaid." Alliance for Connected Care. May 2, 2016. http://www.connectwithcare.org/chance-for-telemedicine-to-shine-medicare-medicaid/.

Telemedicine – Aetna's current position

Aetna's policy supports the following:

- The use of real-time two-way, interactive video teleconferencing that involves communication between the patient and a distant provider (sight and sound) in the delivery of health care to the extent it improves quality and/or increases access to medical services.

    - All electronic communication must use secure Health Insurance Portability and Accountability Act (HIPAA) compliant telecommunications equipment.

- Charges from participating providers that are specifically contracted (using 95 or GT modifiers) to provide internet-based services to our members.

Aetna <u>commercial group business does not have a specific telemedicine benefit</u>, but we offer telemedicine services through Teladoc, our nationally contracted vendor for telemedicine

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Helpful external resources:
- Codes eligible for Telemedicine https://www.aetna.com/contentMgt/pws/policies/PDF/telemedicine.pdf
- Physician Participation Criteria (page 44): http://www.aetna.com/healthcare-professionals/documents-forms/provider-facility-participation-criteria.pdf

2017 Telemedicine Strategy

Enable providers to use telemedicine services in their daily workflow

- Allow members to receive local and convenient access to care with ones own provider

- Accelerate appropriate adoption and use of technology and workflow services (EMR capabilities or third party solutions)

Drive patient engagement through focused tools and programs

- Programs for virtual acute care, behavioral health comorbid chronic disease and behavioral health

- Remote monitoring of members for targeted disease states to improve self management and outcomes

Engage with industry leading telemedicine partners

- In multiple markets to provide an innovative and differentiated member experience

- Expanded 24/7 physician network options (in addition to existing Teladoc relationship)

We are piloting different strategies and use cases with key partners where incentives are aligned to test the appropriate use of effective telemedicine programs.

Questions?