



Technology and COVID-19:

Digital Health and Telemedicine



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Moderator



Rachael Cooper Senior Program Manager National Safety Council

SAFER Safe Actions For Employee Returns



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Guest Speakers







Rene Quashie VP, Policy & Regulatory Affairs Consumer Technology Association Anas Al-Hamwi Senior Director, Health & Safety Walgreens Dr. Matt Lambert Lead ER Physician and CMIO HCI Group



Consumer Technology AssociationTM

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NSC: Digital Health and Telemedicine Webinar September 17, 2020

CTA.tech

"Telehealth" and "Telemedicine" Often Used Interchangeably

American Medical Association

"Telemedicine" is using electronic communications services that connect a clinician in one location with a patient in another location

Medicare

"Telehealth" focuses on two-way, real-time interactive communication between the originating site and distant site physicians to deliver health services

Medicaid

"Telemedicine" seeks to improve a patient's health by permitting twoway, real time interactive communication between the patient, and the physician or practitioner at the distant site (Medicaid.gov)

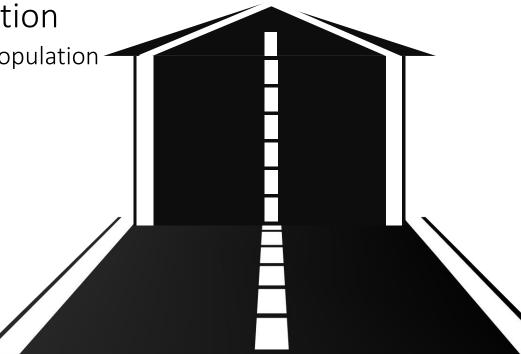
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"Telehealth" is the delivery of health care services, where patients and providers are separated by distance



Telehealth Drivers

- Increasing aging population
 - By 2030, 65+ will be 20% of population -
- Clinician shortage
- Technology
- Insurance coverage
- Pandemic





Telehealth Surge Snapshot

Less that 1% of visits via telehealth before pandemic

Telehealth claim lines increased over 4,000% nationally (from 0.16% of medical claim in June 2019 to 6.85% in June 2020 (FAIR Health)

50% used telehealth during pandemic (Doctor.com)

• 71% have considered using telehealth

Dep't of Veterans Affairs

• Veterans used telehealth more than 120,000/week during the height of pandemic

• Usually 10,000/week



PUBLIC HEALTH EMERGENCY

Allows HHS to exercise authority to temporarily waive or modify certain requirements of the Medicare, Medicaid, CHIP programs and HIPAA through duration of the PHE

Also HHS broad authority to provide grants and enter into contracts, as well as use funds to immediately respond to the PHE



Before the public health emergency, approximately 13,000 beneficiaries in fee-for-service Medicare received telemedicine in a week



In the last week of April, nearly 1.7 million beneficiaries received telehealth services In total, over 9 million beneficiaries have received a telehealth service during the public health emergency, mid-March through mid-June



- About 0.1% of primary care visits by telehealth before pandemic
- Increased to about 48% of primary care visits at the height of pandemic (April)





No significant differences by race or ethnicity among beneficiaries who received telemedicine services

1 out of 3 beneficiaries received telehealth using audio-only telephone 26 percent of beneficiaries who received nursing home visits did so by telehealth



30 percent of female beneficiaries and 25 percent of male beneficiaries have received telemedicine services

34 percent of beneficiaries below the age of 65 have received a telemedicine service

- 25 percent among beneficiaries ages 65-74
- Almost 30% for ages 75-84



Telehealth Issues

Broadband/Digital divide

Service/payment parity

Licensure (other legal/regulatory issues)

Training

Equipment



Going Forward

- Post-pandemic telehealth use
- Legislative efforts
- Clinician/consumer buy-in
- Technology
- Insurance reimbursement approach





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Discussion



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Technology and COVID-19 Digital Health and Telemedicine

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How has the health industry utilized technology and digital innovations in their response to COVID-19?



How has digital health/telemedicine supported patients that would normally be seen in person? How has it fallen short?



How can employers support their employees when it comes to telehealth?

AUDIENCE QUESTIONS?



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What do you expect the "new normal" to look like in your organization?



Relating the noted increase of mental health distress, illness, and substance use over the past six months in correlation to the COVID-19 pandemic, what has worked well? What needs refining?



What kind of supports (training, standardization of care, guidelines, etc.) will the medical workforce need to continue to provide and improve the quality of telehealth support?



Do you have privacy concerns related to the increased use of telehealth? How would you respond to those who do have these concerns?



Are there unexpected side effects (positive or negative) for increased telehealth utilization?



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