Telehealth: Connecting People-Centered Care

Trinity Health is one of the largest multi-institutional Catholic health care delivery systems in the nation, serving diverse communities that include more than 30 million people across 22 states. We are building a People-Centered Health System to put the people we serve at the center of every behavior, action and decision. This brings to life our commitment to be a compassionate, transforming and healing presence in our communities. We advocate for public policies that support better health, better care and lower costs to ensure affordable, high quality, people-centered care for all.

Telehealth is critical to Trinity Health’s commitment to build a People-Centered Health System that puts the people we serve at the center of every behavior, action and decision we make. Building a People-Centered Health System requires providing the communities we serve with the highest level of access to care across the continuum, and telehealth is an important mechanism for reaching those in need when they need it.

What Can Telehealth Achieve?

Telehealth includes a wide range of technologies, including videoconferencing, internet-based applications, store-and-forward imaging, streaming media, and phone and wireless communications. Telehealth has demonstrated a wide-range of positive outcomes across settings of care and between providers and consumers, including:

- Better access—providing patients the opportunity to get care no matter where they are.
- Increased patient satisfaction, and improved patient engagement in community-based settings.
- Facilitation of communication with providers.
- Reduced costs by moving care to lower cost, more appropriate settings.

What Can Policymakers Do?

Use Telehealth to Build a People-Centered Health System and Achieve Population Health Goals

**Recommendations:**

- Encourage use of telehealth to promote health and well-being across outpatient, inpatient and community-based settings.
- Focus expansion of telehealth on high-need areas that are critical to managing population health in communities
  - Leverage telehealth to provide coordinated, team-based care, to address behavioral health workforce shortages, and to more effectively care for those with co-morbid behavioral health conditions.

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- Expand use of telepharmacy, which includes drug utilization review, prescription verification and patient counseling, to address access issues in rural areas, improve medication adherence and decrease medication-related errors.
- Permit providers to remain in each stage of Meaningful Use (MU) for at least three years.

Ensure Telehealth Provides High-Quality Care to Consumers

Recommendations:
- Apply quality measurement and standards to ensure adequate safeguards and protections for consumers; metrics could include:
  - Consumer/patient experience and satisfaction.
  - Changes in access to care.
  - Changes in utilization of acute services.
  - Impacts on medication adherence, compliance with care guidelines, and self-management of conditions.

Promote Continuity of Care by Facilitating Use of Telehealth within and Across State Lines

Recommendations:
- Update licensing regulations – especially for systems operating across state lines.
  - Eliminate requirements for out-of-state providers to have special licenses to provide telehealth care across state lines.
  - Create an all-purpose license that applies to all telehealth care across state lines in order to harmonize licensing and credentialing requirements.
- Support the Interstate Physician Licensure Compact to improve license portability and increase patient access to care.
- Promote use of telehealth in medically underserved areas – including both rural and urban geographies – to reduce health disparities.

Advance Adoption of Telehealth by Harmonizing Use and Payment Across Payers and Programs

Recommendations:
- Public and private payers should provide telehealth payment regardless of origination site.
- Include waivers for telehealth payment in value-based payment initiatives (e.g. accountable care organizations (ACOs), patient-centered medical homes (PCMHs), bundled payments) in Medicaid and Medicare, and in Medicare Advantage.
- Use consistent definitions for telemedicine and telehealth in Medicare and Medicaid.
- Align payment across settings of care, especially for remote monitoring technologies.
- Maintain continuity of care and provider choice by allowing for use of eVisits regardless of consumer’s location.
- Promote standardized documentation of telehealth encounters without narrow mandates on methods.

Ways Telehealth is Helping Build a People-Centered Health System across Trinity Health

- Improved access for those in rural areas.
- Better, more informed clinical decision making in a timely manner.
- Decreased readmissions for CHF, preventable admissions for chronic disease.
- Increased capacity to serve patients.
- Increased productivity from providers.
- Greater ability for patients to engage in self-management.
- Better ability to monitor patients remotely, make adjustments in nutrition, medication to prevent downstream problems.

Digital Access: http://advocacy.trinity-health.org/ • advocacy@Trinity-Health.org • #TeleHealth #TeleMedicine #PeopleCentered

Mission: We, Trinity Health, serve together in the spirit of the Gospel as a compassionate and transforming healing presence within our communities.

Core Values: Relevance • Commitment to Those Who Are Poor • Justice • Stewardship • Integrity