

Telehealth Study A Progress Update

JULY 28, 2022

Background

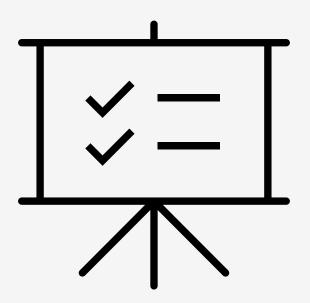


- Chapter 70 (House Bill 123) and Chapter 71 (Senate Bill 3), *Preserve Telehealth Access Act of 2021*, requires MHCC to study the impact of telehealth services as it relates to use of audio-only and audio-visual technologies in somatic and behavioral health care
- In June 2021, MHCC issued an Emergency Request for Proposals
 - The National Opinion Research Center (NORC) at the University of Chicago was competitively selected to complete study activities in September
- ▶ Recommendations on telehealth coverage and payment levels relative to in-person care are due to the Senate Finance Committee and the House Health and Government Operations (HGO) Committee by December 1, 2022





- Conduct quantitative and qualitative research and analyses of telehealth with a focus on use of audio-only and audio-visual technologies for somatic and behavioral health interventions
- Develop a Final Report with recommendations based on evidence from study findings and cross-referenced as with appropriate to the section(s) in the technical portion





Study Activities at a Glance

- Literature Review Identify and compile peer-reviewed and gray literature to examine existing evidence on the effectiveness of telehealth, and new and emerging trends and policies
 - Areas of focus include telehealth utilization patterns, optimal integration of telehealth into care models, and the impact of telehealth on disparities in access, care quality, and patient safety
- Claims Analysis Explore telehealth trends since 2018 using Medicare, Medicaid, and commercial health care claims data from Maryland's All-Payer Claims Database
 - A comparison of cost and service utilization for telehealth and in-person visits and uptake of telehealth before and after the public health emergency by patient characteristics (e.g., age, race and ethnicity, geography, and area-level broadband access)

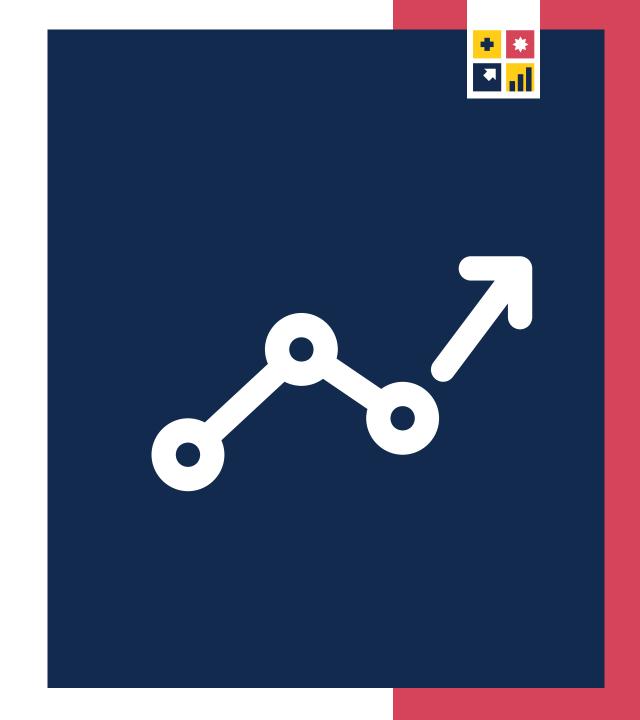


Study Activities at a Glance (Continued...)

- Provider Survey Inquire about use of telehealth for the delivery of care in both rural and urban areas of the State, including technologies used (audio-only and audio-visual)
 - Includes primary care and specialty physicians, nurse practitioners, and behavioral health providers (psychiatrists, psychologists, licensed certified social workers, and other licensed professional counselors)
- **▶ Consumer Engagement** Conduct telephone interviews with telehealth users and non-users across Maryland*
 - An assessment of patient experiences and perceptions regarding access to and use of audioonly and audio-visual technologies
- ▶ Behavioral Health Focus Groups Convene two focus groups consisting of 8-10 participants each (including providers and consumers) to gain additional insights about the delivery of mental health and substance use disorder services using telehealth

^{*} Regional-level consumer representation across key demographic characteristics, including age, sex, race and ethnicity, income, education level, insurance coverage, and language spoken (English and Spanish)

Progress Update





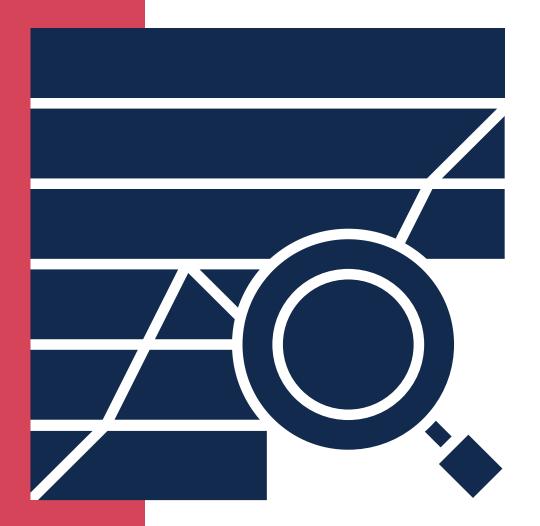
Literature Review



- Developed a research framework to structure key concepts that need to be studied
- Identified and compiled research
- Completed an environmental scan of peer-reviewed and gray literature







- Developed an analytical plan for conducting statistical analyses of Medicaid and commercial claims data, and an abbreviated analysis of Medicare claims to serve as baseline data
- Conducting an analyses looking at demographic information, utilization, and cost and reimbursement

Provider Survey





- Developed a telehealth survey and pilot tested the questions with select primary care, specialty, and behavioral health providers
- Engaged various provider organizations to help promote completion of the survey
- Opened the survey to providers, including primary care (general practice, internal medicine, pediatrics), specialists engaged in primary care, nurse practitioners, and behavioral health providers (psychiatrists, psychologists, licensed certified social workers, and licensed professional counselors)

Consumer Engagement



- Developed a screening questionnaire and recruited telehealth users and non-users representative of four regions in the State* across key demographic characteristics including age, sex, race and ethnicity, income, education level, insurance status, and language spoken
- Conducted interviews inquiring about consumers' telehealth experiences and perceptions

^{*} Regions include Baltimore City, Eastern Shore, Montgomery County and Prince George's County, and Western Maryland



Behavioral Health Focus Groups





- Completed a Contract Modification for two behavioral health focus groups in response to stakeholder requests for MHCC to consider additional ways to collect qualitative data on use of audio-only and audio-visual technologies for the delivery of mental health and substance use disorder services
- Completed three interviews with behavioral health subject matter experts to inform the structure and approach for the behavioral health focus groups.
- Convened two focus groups with consumer advocates and representatives from provider organizations



Key Accomplishments

- Over 1,000 responses received to a provider telehealth survey
- Structured interviews with 78 English and Spanish speaking consumers
- Comprehensive payer claims analysis, government and private
- Convened two focus groups with subject matter experts in behavioral health
- Conducted a literature review identifying nearly 4,000 abstracts examining the impact of telehealth
- Convened provider and payer town halls
- ▶ Prepared a preliminary outline for the Final Report



Stakeholder Communications

► A dedicated MHCC web page about the study featuring periodic updates:

mhcc.maryland.gov/mhcc/Pages/hit/hit telemedicine/hit t elemedicine legislative update.aspx

Interstate Telehealth Study

- On the Horizon

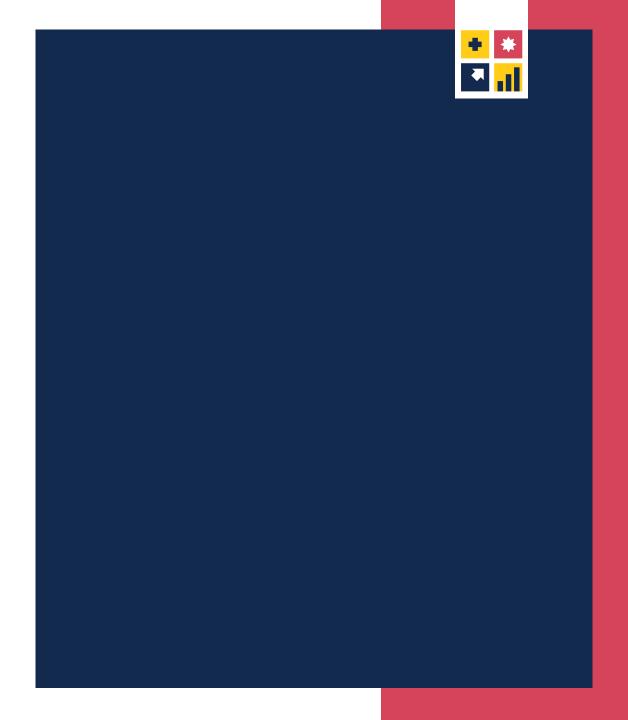
- Request from the Maryland House Health and Government Operations Committee
- Objective: Study key considerations for expanding interstate telehealth (e.g., insurance implications, interstate compacts, licensure, etc.) and develop recommendations, including proposed policy or legislation, for expanding interstate telehealth to allow Maryland residents to receive telehealth services from out-of-state practitioners
- Westat was competitively selected to complete the study





The End







Appendix





- ► Uncertainty whether the expansion of telehealth coverage and reimbursement policies would expire at the conclusion of the COVID-19 Public Health Emergency (PHE)
 - Audio-only provided access to mental health services (evaluation, diagnosis, and treatment) for patients who could not use real-time video technology due to a variety of factors (e.g., technical capacity, comfort-level w/ modality, etc.)
- The Centers for Medicare & Medicaid Services continues to reimburse codes that were added to the telehealth services list on a temporary basis due to the PHE through the end of CY 2023
- Private payers bound by new Maryland law continue their PHE telehealth policies; self-insured plans appear to be following suit

Study Components in Law



- Analyze the impact of telehealth on disparities in access; take-up rates among different communities and patient populations; and the comparative effectiveness and efficiency of telehealth and in-person visits on the total costs of care and patient outcomes of care
- ▶ Study alignment of telehealth with new models of care that addresses opportunities to improve patient—centered care; services for which telehealth can substitute for in—person care while maintaining the standard of care; and the impact of alternative care delivery models on telehealth utilization, coverage, and reimbursement
- Assess the efficiency and effectiveness of telehealth and in–person visits, including the impact of different communication technologies on patient health; a survey of health care providers; and resources required to sustainably provide telehealth services for the continuum of health care providers



Study Components (Continued...)



- Assess patient awareness and satisfaction with telehealth; privacy risks, benefits of telehealth services; and barriers to care and levels of patient engagement addressed by audio-only and audio-visual telehealth
- ▶ Conduct a review of the appropriateness of telehealth across the continuum of care; inclusion of clinic hospital facility fees in reimbursement for hospital provided telehealth; and the use of telehealth to satisfy network access standards