

# Maryland House Health & Government Operation Committee

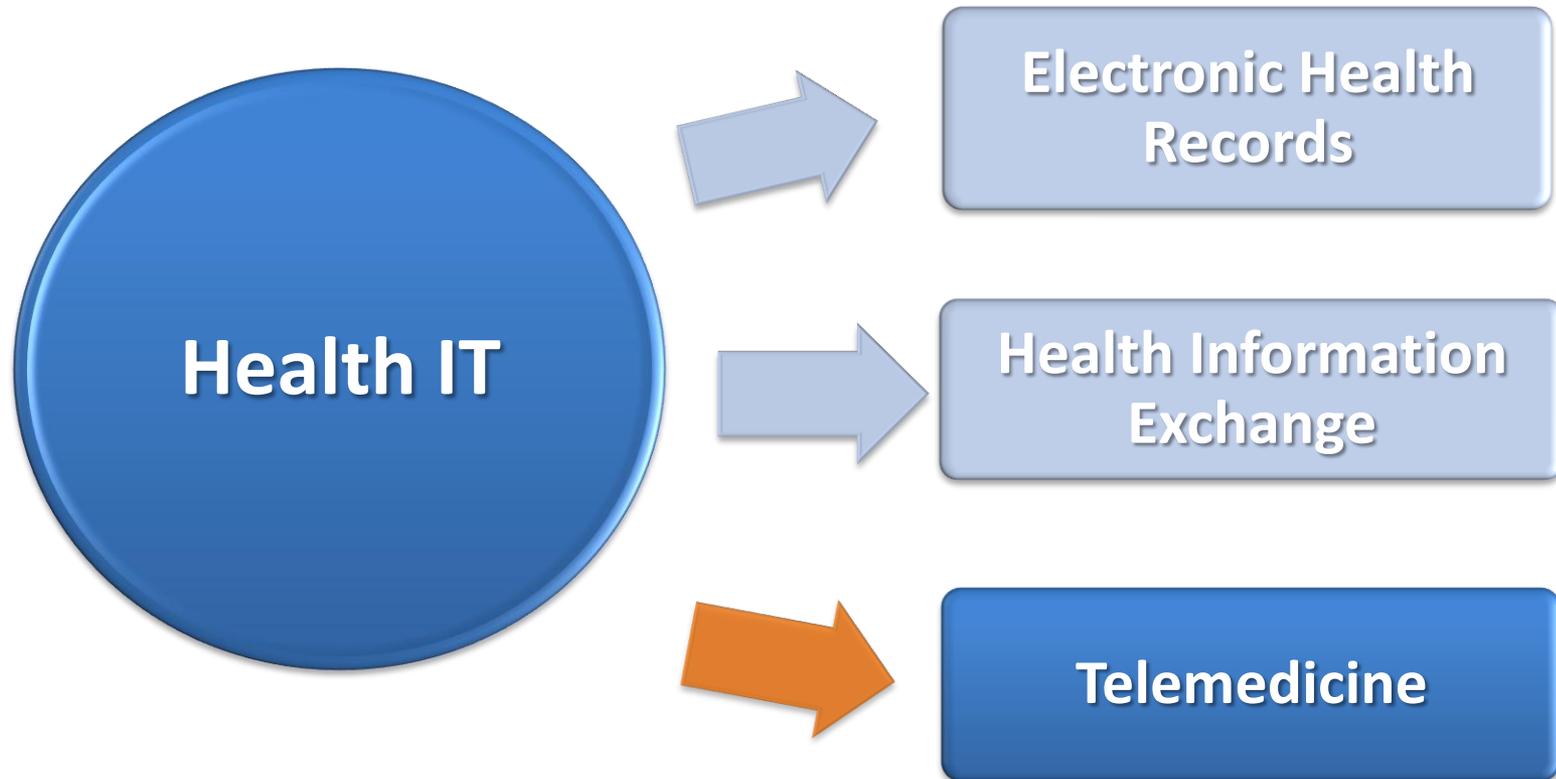
## *Telemedicine Update*

January 24, 2013



The MARYLAND  
HEALTH CARE COMMISSION

# Discussion – Telemedicine Diffusion



# Advancing Health IT

- **MHCC has an ambitious plan for advancing health IT adoption and integration that balances the need for information sharing with the need for strong privacy and security policies:**
  - **Promote and facilitate the adoption and optimal use of health IT for the purposes of improving the quality and safety of health care**
  - **Identify challenges to health IT adoption and use, and formulate solutions and best practices that address these challenges**
  - **Increase the availability and use of standards-based health IT through consultative, educational, and outreach activities**
  - **Plan and implement a statewide health information exchange (HIE)**
  - **Harmonize service area HIE efforts throughout the State**
  - **Designate management service organizations (MSOs) to promote the adoption and advanced use of electronic health records (EHRs)**

# Telemedicine Overview

- Telemedicine is the practice of medicine from a distance using audio and video technology to connect the patient and provider
- Use of telemedicine offers an efficient and potentially cost effective alternative to the traditional method of care delivery, particularly when access to specialty consultation is limited
- Evidence of the value of telemedicine is wide-ranging; telemedicine has improved time-to-diagnosis, facilitated care for patients in remote regions, and increased patient satisfaction
  - Some research has found that telemedicine reduces health costs by deferring use of hospital emergency departments and ambulance services
- The effective use of telemedicine can increase access to health care and reduce health disparities, eliminating distance and time barriers, and creating efficiencies in health care delivery

# Care Coordination – An Example

- Primary care physician seeks input from the specialist

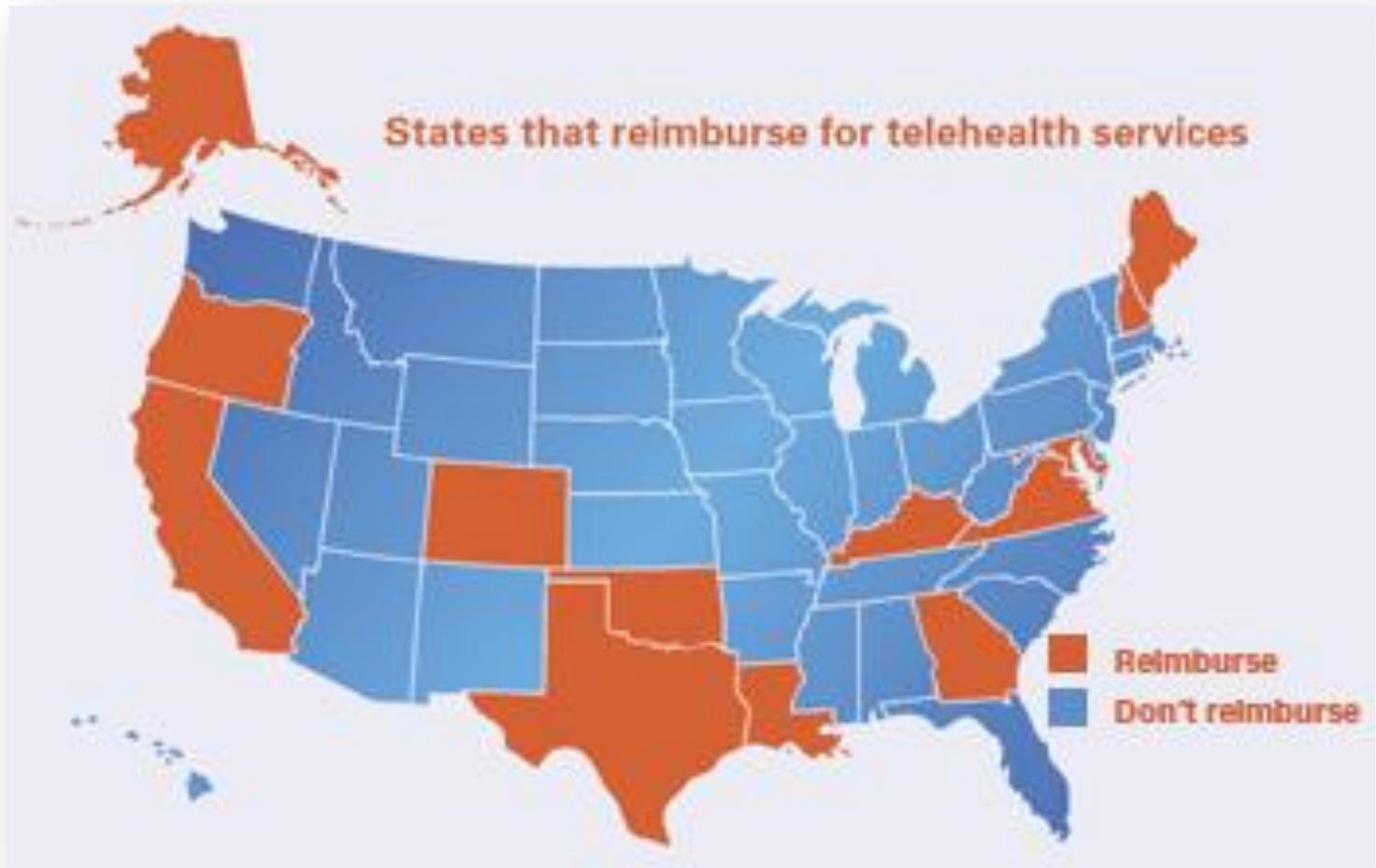


# Key Policy Activities

- In November 2010, former Secretary of the Department of Health and Mental Hygiene, John Colmers, requested the Maryland Institute of Emergency Medicine Services Systems and MHCC make recommendations on advancing telemedicine in the State
- Three committees were established to formulate the recommendations: Clinical Advisory Group; Technology Solutions Standards Group (Technology Advisory Group); and Financial and Business Model Advisory Group
- The final report, with recommendations from each committee, was released in December 2011
  - Recommendations resulted in a law that was enacted in 2012 requiring State-regulated payers to provide coverage for services provided appropriately using telemedicine technology as of October 1, 2012

# Reimbursement

- Maryland is the 13<sup>th</sup> State to require State-regulated payers to pay for telemedicine services



# Technology Adoption

- The adoption of telemedicine is somewhat sparse, with fragmented networks
  - Existing telemedicine networks in Maryland generally support a few clinical services
- Telemedicine networks are not readily capable of communicating with other networks or electronic health record systems
- In 2011, about 57 percent of Maryland acute care hospitals reported using some telemedicine technology
  - Approximately 25 percent of hospitals are in the planning stages to implement telemedicine technology within the next two years

# Establishing Network Standards

- **The Technology Advisory Group recommended that telemedicine networks in Maryland be built on a defined range of existing industry standards**
  - **Discussions are underway for the State Designated HIE and select State-Designated MSOs to explore adopting technology consistent with the Technology Advisory Group's recommendation**
- **The value of telemedicine increases when coupled with access to a patient's electronic health record**
  - **Integrating telemedicine networks with the State-Designated HIE will enable broad provider participation and integration with electronic health record systems**

# Next Steps

- **Identify select telemedicine solutions that are interoperable and capable of connecting to the State-Designated HIE**
  - Over the next couple of months, staff plans to convene an evaluation panel, a subset of the Technology Advisory Group, consisting of the State-Designated HIE and select State-Designated MSOs to review various telemedicine solutions
- **Collaborate with the Technology Advisory Group in indentifying a preferred range of network standards**
  - Equipment, connectivity, transmission, etc.
- **Complete a technical standards guide to assist providers in implementing telemedicine technology**

*Thank You!*



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