



The
Current State
of Telehealth
in Ambulatory Care



Nearly 50 million U.S. adults experienced a mental illness or struggled with a physical health battle, such as cancer or heart disease in 2019.¹ And COVID-19 made things more difficult for doctors and patients to interact. Since the pandemic, many healthcare industries have utilized telehealth for virtual appointments.

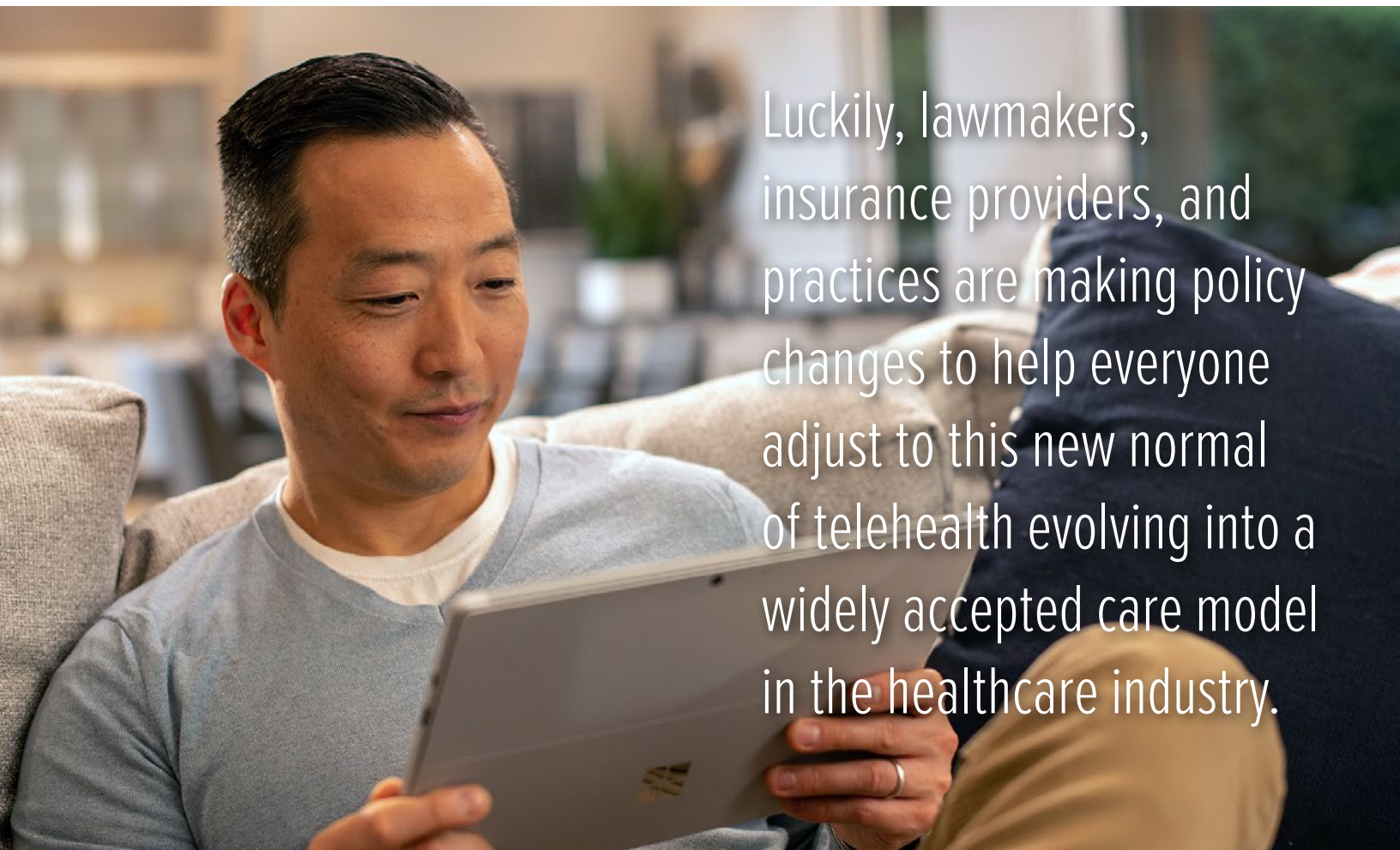
This innovative link between health and medicine, and electronic information and telecommunication technologies helps connect everyone from any location, providing them with comfort, convenience, and care. But how much will things shift now that these technologies have become mainstream with payors, practices, and patients? This eBook addresses both the current state and trends in action. We explore how current legislation, next-generation technologies, and industry-wide acceptance shifts supporting remote care.

Telehealth is Here to Stay and Current Challenges for Older Adults

Regardless of what you call the ability for doctors, staff, and patients to communicate electronically, you need to understand the current state of telehealth to stay abreast with the latest software and opportunities. For example, the younger generation prefers communication via text and apps. Tech-savvy patients appreciate the fast and easy way to request prescriptions, message physicians and staff, pay bills, and schedule appointments.

However, many older patients struggle with self-service technologies. Instead of offering processes that are

faster and easier, practices often run into trouble with bad telemedicine platforms and manual steps required to administer it. Patient phone calls to staff trying to log in, get links, pay their copay, adjust settings, and so on can radically impact staff productivity. That is the challenge the current state of telehealth practices are trying to overcome. Luckily, lawmakers, insurance providers, and practices are making policy changes to help everyone adjust to this new normal of telehealth evolving into a widely accepted care model in the healthcare industry.



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Modern and Streamlined Telehealth Software is the Answer

From 2019-2022, we saw a variety of telehealth platforms for meeting one-on-one with their patients, as well as platforms that allowed providers to meet in groups, such as meeting with remote family members or group therapy.

Doctors and staff can use an all-in-one medical office platform to easily manage the entire practice, including all locations. Everyone is connected under a secure platform. For example, AdvancedMD hosts and manages software on the Amazon Web Services (AWS) cloud-hosting platform for the highest security, reliability, and performance level. These changes allow doctors, nurses, and the entire staff

to stay connected and immediately access important information. Likewise, patients can view their charts, make appointments, pay bills, and get refills all online.

Helpful options like simple charting, flexible scheduling, fast billing, and accurate reporting are all available, along with user-friendly patient engagement tools to make everything easy and more convenient for everyone. AdvancedMD helps doctors and patients access information, make appointments, pay bills, and more from any device—even remotely at home.

Changes with Telehealth Legislation

The current state of telehealth is changing across clinics, the U.S. House, and Senate. Part of this is because some telehealth flexibilities will expire once COVID-19 is no longer declared a public health emergency. Fortunately, lawmakers, insurance companies, and healthcare professionals are doing what they can to ensure that telehealth services stay permanently.

Legislatures started to feel pressure from organizations, such as the American Hospital Association and healthcare professionals, to expand access to telehealth services, especially those related to mental health, because of the increase in mental illness due to COVID-19 and other national events. Some aspects of the COVID-19 public health emergency care will phase out while others stay permanent.

The Consolidated Appropriations Act of 2022 ensures a 151-day extension period before the policies in the COVID-19 public health emergency expire.² Policies that will be phased out and are set to include:

- ▶ No more increased flexibility when it comes to where patients receive Medicare

telehealth. Services will recover back to match the same restrictions prior to the pandemic.

- ▶ Mental health telehealth services will require in-person visits within six months of the initial assessment and yearly following for Medicare reimbursement.
- ▶ Medicare won't cover audio-only visits anymore for physical health encounters.
- ▶ Telehealth visits with physical therapists, occupational therapists, audiologists, and speech-language pathologists won't be reimbursed for Medicare.
- ▶ No reimbursement for FQHCs and RHCs as instant site telehealth providers for any non-mental health service.

Telehealth policies that will become permanent changes include:

- ▶ Telehealth services for Medicare patients for mental and behavioral healthcare in the home (with certain conditions).

- ▶ Continued coverage for video-based mental health visits for FQHCs and RHCs.

Insurance companies are also updating their policies to include virtual care within their plans, decreasing the issues with healthcare provider shortages and allowing healthcare professionals to spend more time with their patients.

The last year has shown a lot of changes within telehealth, such as how lawmakers and healthcare professionals are working together to decrease opioid-related overdoses.

Another advancement is the way and the amount of data being collected not only by agencies like the U.S. Department of Health and Human Services and the Center for Disease Control and Prevention (CDC) but also by local clinics. Healthcare providers and facilities are highly interested in how telehealth can provide services to individuals, especially people who live rurally or do not have transportation to the clinic.³ Another factor they consider is someone's mental health because individuals who live with anxiety, especially social anxiety, are less likely to seek professional support.⁴



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Healthcare Committees and Senators Play a Big Role in Telehealth and Telemedicine Changes

One of the key features of changes regarding telehealth is the many healthcare committees dedicated to ensuring patients receive the best experience and services possible.



These committees include the Senate Health, Education, Labor, and Pensions (HELP), House Energy and Commerce, Senate Finance, and the House Ways and Means. They have several bills they are creating, analyzing, and passing that focus on supporting individuals in need of telehealth services. For instance, the House passed H.R. 7666, Restoring Hope for Mental Health and Well-Being Act, on June 22, 2022. This bill not only provides crisis care, with a budget of five million for fiscal years 2023 to 2027, but it also requires the HHS Secretary to make a best practices booklet available for everyone. Furthermore, a \$24 million budget for fiscal years 2023 to 2028 focuses on screening and treatment for maternal mental health and substance use disorders.⁵

U.S. Senators Chris Murphy and Bill Cassidy, M.D., members of the U.S. Senate Health, Education, Labor and Pensions Committee, have worked on the Mental Health Reform and Reauthorization Act (S. 4170). This act is meant to strengthen coordination between Substance Abuse and Mental Health Services Administration (SAMHSA) and other programs by identifying best practices. This bill also includes \$21 million for each fiscal year through 2027 to assist outpatient treatment and a \$599 million fiscal year budget until 2027 to reauthorize mental health needs. Murphy and Cassidy's bill will also support the reauthorization of substance use and mental health policy laboratories with a budget of \$14 million per year through 2027.⁶

The Senate Finance Committee has pending legislation that focuses not only

on telehealth but specifically telehealth focusing on youth and the workforce. In June 2022, Senate Finance Committee Chair Ron Wyden, Mike Crapo, Senator Tom Carper, and Senator Bill Cassidy introduced a bill focusing on youth mental health policies that will strengthen access to mental health services for children on Medicaid.⁷ The legislators are focusing on assisting the schools, making managing mental health crises easier for school professionals, and creating more effective and efficient support for children.

In September 2022, Senate Finance Committee Chair Ron Wyden, Ranking Member Mike Crapo, Senator Debbie

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Stabenow, and Senator Steve Daines released a discussion draft of legislation focusing on mental health support for individuals in the workforce.⁸ This bill focuses on improving mental health services by increasing the number of mental and behavioral health providers and establishing more opportunities for organizations and their employees, not only with daily mental health needs but also with crisis care. For example, the policies of the draft include:

- ▶ Adding 400 new mental or behavioral health residency positions.

- ▶ Requiring Medicaid to provide new guidance to organizations to increase mental health in the workforce.
- ▶ Allowing better access to individuals in need of mental and behavioral health services.

In July 2022, Chairman Richard E. Neal of the House Ways and Means Committee released a statement discussing the importance of continuing to advance telehealth measures beyond COVID-19. He stated that house committee members understand that COVID-19 provided telehealth services that made it easier for individuals to receive assistance from healthcare professionals. Not only was this useful, but it is important to note because of the increase in mental and behavioral health problems flagging the United States. Chairman Neal stated that the House of Representatives passed H.R. 4040, Advancing Telehealth Beyond COVID-19 Act of 2022, to break down barriers that individuals, especially seniors with Medicaid, face regarding telehealth and telemedicine services. Prior to the passing of H.R. 4040, the COVID-19 public health emergency (PHE) would allow the CMS to suspend existing barriers to Medicare telehealth coverage. With H.R. 4040 in place, the new expiration date is December 31, 2024.⁹ Furthermore, H.R. 7573, a bill within the House of Representatives, discusses the importance of extended telehealth services covered by Medicare, amending titles XI and XVIII of the Social Security Act for at least two more years.¹⁰



Summing it up for Private Practice Administration

With all the advancements in telehealth in the past few years, it is no surprise that there are expected shifts to make telehealth permanent whilst helping you capture maximum revenue for the patients you treat. While many insurance providers and lawmakers make policy changes, another factor is the need for healthcare providers specializing in telehealth software and platforms like AdvancedMD. See what's included with our telehealth solution by getting a live demo.

Get a Free Demo from AdvancedMD

Call us today to talk about how we can help you further improve the lives of your patients by dedicating more of your time to patient care.

References

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(800) 825-0224
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