Telehealth in the Era of Health Delivery System Reform

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The Office of the National Coordinator for Health Information Technology (ONC) is charged with:

- Formulating the federal government's health IT strategy
- Coordinating federal health IT policies, standards, programs, and investments, and
- Advancing Health IT priorities related to a variety of initiatives, including:
  - HITECH Programs
  - Health IT Certification
  - National Quality Strategy
  - Delivery System Reform
  - Interoperability

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Better Care. Smarter Spending. Healthier People

In three words, our vision for improving health delivery is about **better, smarter, healthier**.

If we find better ways to pay providers, deliver care, and distribute information:

- ✓ We can receive better care.
- ✓ We can spend our health dollars more wisely.
- ✓ We can have healthier communities, a healthier economy, and a healthier country.

Focus Areas	Description
Incentives	- Promote value-based payment systems - Test new alternative payment models - Increase linkage of Medicaid, Medicare FFS, and other payments to value - Bring proven payment models to scale
Care Delivery	- Encourage the integration and coordination of clinical care services - Improve population health - Promote patient engagement through shared decision making
Information	- Create transparency on cost and quality information - Bring electronic health information to the point of care for meaningful use

Managing Integrated, Whole Health Across the Care Continuum

There's a potential to scale new care models that rely increasingly on care coordination, integrated health information and delivery of care across settings including Alternative Payment Models (APMs) and State Innovation Models (SIM) developing and testing multi-payer payment and health care delivery system reforms.

HHS has set a goal focused on sending, receiving, finding, and using priority data domains, so that we can have an immediate impact on the care and health of individuals. *-Connecting Health and Care for the Nation: A 10-Year Vision to Achieve an Interoperable Health IT Infrastructure (ONC 2015)*

MACRA is part of a broader push towards value and quality.

Work will be guided by several principles that promote better care for Medicare beneficiaries:

- reward for outcomes technology enables

- provide flexibility to customize health IT

- promote innovation / unlock electronic health information

- prioritize interoperability

Telehealth & Health IT Opportunities for Engagement

Further telehealth adoption and interoperability

Incorporate telehealth in emerging/advanced health models

Expand access to health and care and improve health equity

Ensure privacy/ security protections and usability

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Learning Health System Requirement

- *Individuals are empowered to be active managers of their health:* A learning health system is person-centered, enabling individuals to become active partners in their health by not only accessing their electronic health information, but also providing and managing electronic health information through mobile health, wearable devices and online services.

Federal Health IT Strategic Plan Objectives Supported

- Improve health care quality, access and experience through safe, timely, effective, efficient, equitable and patient-centered care
- Improve clinical and community services and population health
- Empower individual, family and caregiver health management and engagement

Consumer-Centered Telehealth

Designing The Consumer-Centered Telehealth & eVisit Experience – Considerations for the Future of Consumer Healthcare. ONC held a Consumer Centered Design Workshop (April 2015) to develop an informed perspective on the design and behavioral considerations for consumer-centered telehealth

- Focused on the key considerations for designing and enabling consumer-centered telehealth experiences.

- Identified challenges in the current state environment including payment for telehealth services; physician licensure; and, care fragmentation.

- Identified design principles for use cases as part of the future of telehealth.

1. Reduce Friction for Consumers	6. Converge data for interactions to be safe & meaningful
2. Team-based care must include smart triggers	7. Expanded role for the care team based on new data triggers
3. Real world and online world must converge	8. Integrate technology & human interaction in the physical world
4. We must be sensitive to data overload	9. Increase focus on patient data security
5. Consumers are the hubs of their own healthcare data	

Telehealth: Additional Policy Developments to Highlight

Reimbursement:

- CMS 2014 Physician Fee Schedule Final Rule- new CPT code for remote patient monitoring of chronic conditions and for additional telehealth services.

- CMS coverage for telemedicine services as part of Next Generation ACO Model.

- CMS new Medicare payment model for hip and knee replacements that grants more flexibility in the use of telehealth services.

Evidence:

- AHRQ Draft Technical Brief- Telehealth: An Evidence Map for Decision Making

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Budget:

President's 2017 HHS Budget Proposal- would expand the ability of Medicare Advantage plans to deliver services via telehealth

Congress:

Bipartisan Chronic Care Working Group (Policy Options Document)

Introduction of bi-partisan legislation

President's Council of Advisors on Science and Technology:

Report to the President : *Independence, Technology, and Connection in Older Age* (March 2016)

Telehealth Landscape: A Look Ahead

- Continued drivers of rapid growth and adoption
- Known challenges- stakeholder solutions
- ONC will:
  - Support implementation of Federal Health IT Strategic Plan and Interoperability Roadmap
  - Develop white paper from Telehealth Round Table and Federal Compendium
  - Advance telehealth as part of Delivery System Reform
  - Coordinate with federal stakeholders

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