

# Issue Brief: State telehealth policies to ensure access to high-quality care

## Background

The COVID-19 pandemic has accelerated the rapid advancement of telehealth, made possible by the swift implementation by physicians and other health care professionals and action by state and federal lawmakers to adopt policies expanding coverage, payment, and access to telehealth. Over the last two years, the AMA has studied this changing landscape, including partnering with other organizations to perform multiple surveys and research projects designed to help stakeholders understand the utilization and effectiveness of care provided via telehealth. Findings from this work provide clear guidance on the best course forward to support continued advancement of high-quality telehealth. As policymakers move forward with telehealth reforms, it is important to keep in mind:

- Patients, including those with disabilities, chronic conditions, and mental health care needs, should have assurances that care will be available in a safe and convenient manner, including through telehealth.
- Patients like receiving care via telehealth. A patient survey by the [COVID-19 Healthcare Coalition](#) found patients overwhelmingly support telehealth, with 79% of respondents reporting being satisfied with their telehealth visit and 73% expecting to continue to receive health care services virtually beyond the pandemic. These scores are consistent regardless of age, insurance type, and whether the patient lives in a rural, suburban, or urban community.
- When barriers to coverage are lifted and lawmakers support fair payment for all services in formats most accessible to and appropriate for patients (including two-way audio-video and audio-only), patients are more likely to go to their own physician for care via telehealth.
- Data has shown most physicians are providing telehealth to their existing patients and most patients (78%) are seeking and receiving care via telehealth from their regular physician.
- Physicians support telehealth and have found telehealth increased both the quality of and access to care of their patients. In a survey conducted by the [COVID-19 Healthcare Coalition](#), of which the AMA partnered, physicians and other health care professionals indicated that telehealth enabled them to provide quality care and improved the timeliness of care to patients, and 60% indicated that telehealth improved the health of their patients.
- Telehealth has the potential to be an important tool for addressing long-standing health inequities among historically marginalized and minoritized communities. However, drivers impacting inequitable access to telehealth need to be addressed, including gaps in broadband infrastructure, lack of affordable internet connectivity, lack of access to devices and other necessary technologies, and gaps in digital literacy among patients.
- A new report developed by the AMA in partnership with Manatt Health, [Return on Health: Moving Beyond the Dollars and Cents in Realizing the Value of Virtual Care](#), found virtual care, including telehealth, can result in cost savings, improved patient outcomes, increased patient satisfaction and real dollar savings in time and travel for patients, increased physician satisfaction, increased access to care, and improved financial and operational efficiencies for the health care system.

## Policy Opportunities

Legislators and regulators have an important opportunity to codify coverage, access and payment policies that support many of the telehealth advancements throughout the pandemic and beyond, knowing that patients will greatly benefit.

### Coverage, access, and payment recommendations

**Coverage of services provided via telehealth should be on the same basis as comparable services provided in-person.** Telehealth can and should be integrated seamlessly into the delivery of health care – when clinically appropriate, telehealth is just one of the ways physicians can provide care to their patients. Therefore, coverage of services provided via telehealth should be on the same basis as comparable services provided in-person. Similarly, all unnecessary barriers to accessing telehealth, such as originating site and geographic restrictions should be removed. In addition, state laws should provide for the use of accessible devices and technologies, with appropriate privacy and security protections, for connecting physicians and patients.

**Insurers should allow all contracted physicians to provide care via telehealth.** Prior to the pandemic, many insurers established a separate network for telehealth or select telehealth providers which did not always include contracted physicians who provided in-person services. With many states adopting coverage and fair payment laws during the pandemic, more physicians have implemented telehealth in their practices and patients are more likely to seek care via telehealth from their regular physician who also provides care in-person. As telehealth has become integrated into physician practices, the perpetuation of separate telehealth networks is no longer justified. In addition, it's confusing for patients and threatens continuity of care and the patient-physician relationship.

**Cost-sharing should not be used to incent care from certain providers.** Cost-sharing for services provided via telehealth should not vary based on the telehealth provider. Reducing cost-sharing for select telehealth providers who do not also provide in-person care inappropriately steers patients away from their current physicians, fragmenting the health care system and threatening patients' continuity of care. In addition, telehealth is not appropriate for all types of care or all patients, offering lower cost-sharing for telehealth could disincentivize patients from seeking care in-person when needed, which could exacerbate inequities in access to in-person care and create inefficiencies in the health care system.

**Telehealth should be a supplement to, not a replacement for, in-person provider networks.** Patients should always have the opportunity to access care in-person if they choose. Moreover, it is often impossible for a physician to know whether a telehealth visit may necessitate in-person care. As such, telehealth-only providers should not be used to meet network adequacy requirements.

**Transparency of coverage is important.** Health insurers should ensure transparency in coverage and patient cost-sharing of services provided via telehealth, and health care professionals should effectively communicate information about the scope of telehealth visits to patients.

**Fair payments support advancements and investments in telehealth.** There are many benefits and potential cost-saving opportunities associated with telehealth, but those cost savings should not come from payment reductions to physicians who are simultaneously investing in telehealth expansion. As stakeholders promote and expect access to care via telehealth, payment should be fair and equitable regardless of whether the service is performed via audio-only, two-way audio-video, or in-person.

**Flexibility in how a patient-physician relationship is established may be appropriate.** A patient-physician relationship should ideally be established before the provision of services via telehealth. However, for new patients, a relationship can be established via telehealth if it meets the standard of care, including via real-time audio/video and audio-only communication.

**Ensure equitable access to telehealth.** While telehealth holds the promise of increasing access to health care for historically minoritized and marginalized communities, research suggests patients in these communities continue to face obstacles and barriers due to lack of access to the digital technologies required for telehealth, lack of broadband or internet

access, and inequitable design to meet the need for varying levels of patient digital literacy to use the technologies. We encourage lawmakers to take proactive steps to promote equitable access to telehealth services, especially for historically minoritized and marginalized communities, including ensuring access to broadband and recognizing such access as a social determinant of health, supporting initiatives to strengthen digital literacy, improving telehealth solution design, ensuring continuity of care, and supporting fair and equitable payment of services provided via telehealth.

## Licensure

**State licensure requirements remain important patient protections, however flexibilities are warranted to promote continuity of care.** To protect patients, physicians and other health care professionals providing care via telehealth must be licensed or otherwise authorized to practice in the state where the patient is receiving care. This ensures the state practice acts, informed consent and scope of practice laws apply, and the state has oversight of the health care professional. Alternatives raise serious enforcement issues as states do not have interstate policing authority and cannot investigate crimes that happen in another state.

Given the technological advancements and mobility of our society, however, there are times when a patient may seek care from their physician while the patient is in another state for school, work, or an extended vacation. As such, we encourage lawmakers to support allowances within their licensure framework, by exemption or other means, for out-of-state physicians providing continuity of care to patients if there is an established ongoing patient-physician relationship and previous in-person visit, and the care is incident to an ongoing care plan or one that is being modified. We also encourage states to provide flexibility, such as exemptions from licensure for physician-to-physician consultations across state lines and in the event of an urgent and emergent circumstance. Finally, we continue to support states in their efforts to expand licensure recognition across state lines, through reciprocity or other means, as long, as states adhere to the telehealth standards and safeguards outlined in AMA policy.

## Next Steps

The AMA stands ready to work with state legislators and regulators to advance telehealth policy reforms that promote patient access to quality care and capitalize on the important investments and advancements that have been made by physicians and other providers during the pandemic. The AMA offers model state legislation, toolkits, and other important resources to aid in such policy work.

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