What I want to cover

Describe telehealth use during pandemic

Lay out issues in ongoing debate about future of telehealth
What the heck is telehealth?

- No consistency in terminology used in literature
- For purposes of today:
  - Telemedicine = live “video or phone” visit
  - Telehealth = any form of interaction between clinician and patient via information technology
Use of telemedicine surged though has slowly waned from its initial peak.
Substantial variation by clinical specialty

Telemedicine visits as a percentage of baseline

- Behavioral health: 56%
- Endocrinology: 25%
- Neurology: 17%
- Rheumatology: 17%
- Gastroenterology: 14%
- Anesthesiology: 14%
- Pulmonology: 13%
- Adult primary care: 12%
- Pediatrics: 8%
- Allergy/Immunology: 7%
- Oncology: 6%
- Urgent care: 6%
- Cardiology: 5%
- Urology: 4%
- Physical medicine & rehab: 3%
- Dermatology: 3%
- Surgery: 3%
- Obstetrics/Gynecology: 3%
- Orthopedics: 2%
- Otolaryngology: 1%
- Podiatry: 1%
- Ophthalmology: 0%

Other forms of telemedicine also surged

- 8x increase in eConsults
- Almost ½ of emergency depts have telemedicine
- 6x increase telepsychiatry in emergency depts
Six-fold increase in remote patient monitoring

Tang, JAMA Internal Medicine, 2022
Portal messaging common way to receive care
Key issues in clinical and policy debate
Impact on spending
Telemedicine’s ability to improve convenience and accessibility may also be its Achilles’ heel

A difficult balancing act

Potential to improve access to care

Risk of increased spending
Impact on quality
Three generations of research

- Is telemedicine feasible?
- Is telemedicine comparable to standard care?
- Does addition of telemedicine improve outcomes?

**Replacement:**
RCT telemedicine vs. in-person

**Complement:**
RCT (telemedicine + in-person) vs. in-person
Impact on disparities
A key tension remains over who uses telemedicine

Disadvantaged, lack access, poor disease control

Higher income, already have access, good disease control
Licensure
During pandemic, a different licensure paradigm ... at least temporarily

• Flurry of temporary regulatory changes to ensure access to care

• Licensure changes implemented (to some degree) automatic reciprocity

• In other words, a physician licensed in one state could care for a patient in any state

• By mid-2021 many of these expired
Fraction of Telemedicine Visits That Are Out of State, by County, January to June 2021