The Business Aspects of Telemedicine & Telehealth

Gail Barker
Arizona Telemedicine Program
Phoenix, Arizona

What We Will Be Covering

- Telehealth Business/Sustainability Planning
- Telehealth Usage and Trends
  - Medicare
  - Medicaid
  - Private Insurance
  - New Players
- Telehealth Satisfaction
- Telehealth Practice Considerations

Arizona Telemedicine Program

Southwest Telehealth Resource Center TRC

Contracts & Grant Funding

- There are many government and private contract and grant funding opportunities

- Usually the candidate needs to submit a sustainability plan to obtain funding

- This ensures the project will continue at the end of the contract or grant period

- Gov: https://www.grants.gov/web/grants/learn-grants/grant-programs.html
- Priv: https://proposalcentral.com/ (you must create a login)

Parent Organization

- Some organizations or donors will fund the initiation of a new telehealth program

- Plan must <u>align with organization's mission</u> and must answer the question for your funder: WIIFM

- The support could be time-limited and a sustainability plan will be needed

Sustainability/Business Plans

- Introduces discipline into the process and determine viability

- There are many formats available to produce business plans

- 15 Steps to Writing a Telehealth Business Plan (National Consortium of TRCs)
  - https://www.umtrc.org/clientuploads/Resources/Getting_Started_Guides/15_Step_Business_Model_June_2018.pdf

1. EXECUTIVE SUMMARY

Concise overview (1-2 paragraphs max) of key elements:

a. Usually written after all the other steps completed
   i. Why is telemedicine needed at this time & for this institution?
   ii. Who is initial target stakeholders (provider & patient groups)?
   iii. What is the main goal that will be achieved (outcomes)?
   iv. What will it cost & what will expected ROI be?

2. INTRODUCTION & BACKGROUND

a. Why does your institution need telemedicine now? Discuss gaps in patient care that can be addressed with telemedicine.

b. Identify key players/stakeholders – providers, patients, finance, technical, admin, legal etc.

c. Goals & metrics – what do you hope to accomplish if telemedicine implemented?

3. NEED & DEMAND ASSESSMENT

a. All stakeholders – who needs &/or wants telemedicine & why?

b. Surveys, focus groups can be used to capture this information.

c. Buy-in is critical from all stakeholders – need commitment to change current processes.

5. SERVICE PLAN ASSESSMENT

a. Delivery mode(s) – store-forward, real-time, remote monitoring, ECHO, hybrid

b. Reimbursement – who are your payors & do/will they reimburse for telemedicine? Will you choose a direct-to-consumer model where patient pays directly?

c. Technology platform – depending on your delivery model(s) what technology will be required? What are you willing to invest? Who will maintain? Will you invest in a commercial platform or build in-house? Consider both sides of the connection – provider & patient/other client.

d. Champions – not just providers, but patients, C-suite, IT, finance, administrative, legal etc.

6. MARKETING

a. Market segmentation, targeting, positioning, share availability, growth – are there others in your area providing similar services that will compete for your clients? Do you currently have enough clients that are likely candi dates for telemedicine? Will they be enough to generate needed ROI or will you need to grow your client base?

b. Brand name – what will you call your program to set it apart from everyone else? Will it convey what you want to the audience you hope to capture? Think about a name, logo, hashtag, tag line.
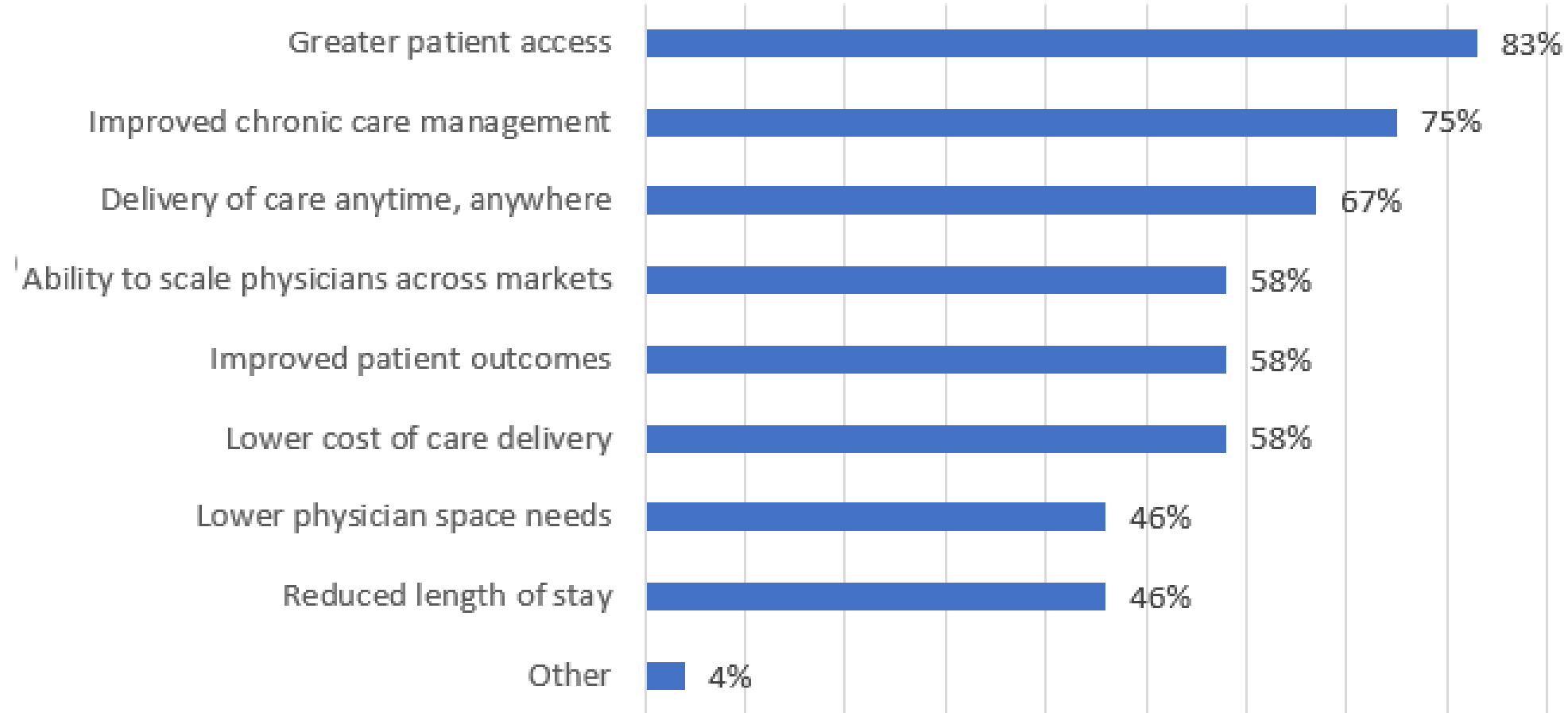
c. Promotion – how will you advertise your program &

Building a Sustainable Telehealth Program

Step 1	Understand your health care system and patient population
Step 2	Identify your patient care needs and challenges
Step 3	Identify your resources
Step 4	Build a model to suit your needs and address your challenges, within the constraints of your resources
Step 5	Identify the parties who are critical to success
Step 6	Sell the model(s) to these change drivers
Step 7	Identify and adapt to postimplementation learning points

Source: Curfman A, McSwain SD, Chuo J, et al. Pediatric Telehealth in the COVID-19 Pandemic Era and Beyond. *Pediatrics*. 2021;148(3):e2020047795. doi:10.1542/peds.2020-047795

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SOUTHWEST TELEHEALTH RESOURCE · CENTER TRC

Health system executive virtual care goals*
Considering all possible use cases, in which areas do you expect the greatest impact from virtual care?

Goal	Percentage
Greater patient access	83%
Improved chronic care management	75%
Delivery of care anytime, anywhere	67%
Ability to scale physicians across markets	58%
Improved patient outcomes	58%
Lower cost of care delivery	58%
Lower physician space needs	46%
Reduced length of stay	46%
Other	4%

Between Nov. 1 & Dec. 31, 2021 the AMA presented 1,545 physicians with a list of potential barriers to Telehealth

1. Rollback of COVID-19 waivers, coverage and payment policies (77 percent)

2. Lack of insurer coverage of telehealth services (76 percent)

3. Low or no reimbursement (64 percent)

4. Technology challenges for my patient population (54 percent)

5. Licensure in additional states (40 percent)

6. Liability (29 percent)

7. Integration with the EHR (22 percent)

8. Lack of technical support (21 percent)

9. Telehealth-specific workflows (18 percent)

10. Integration of additional technologies (18 percent)

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Telehealth Usage and Trends
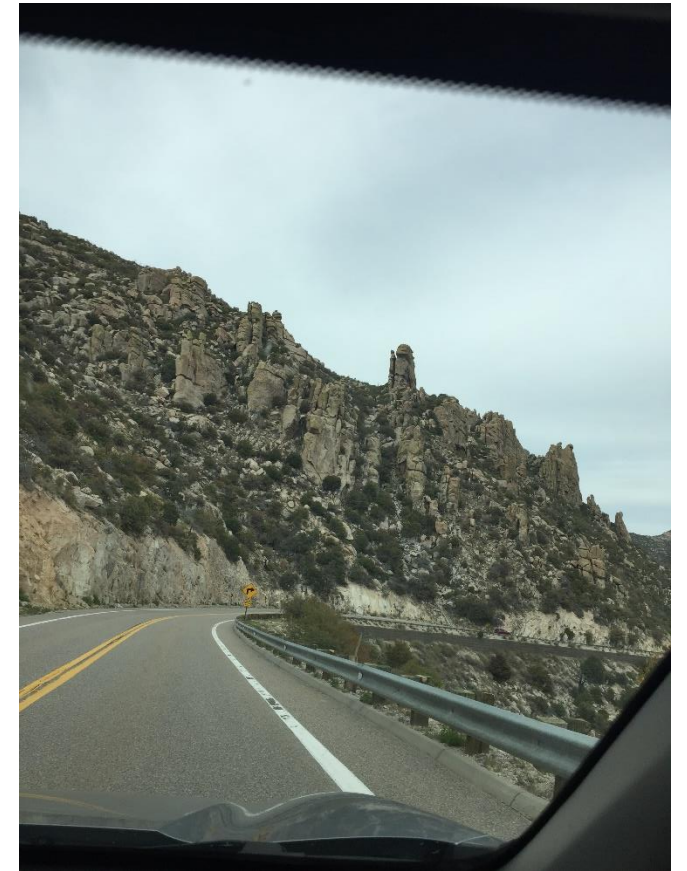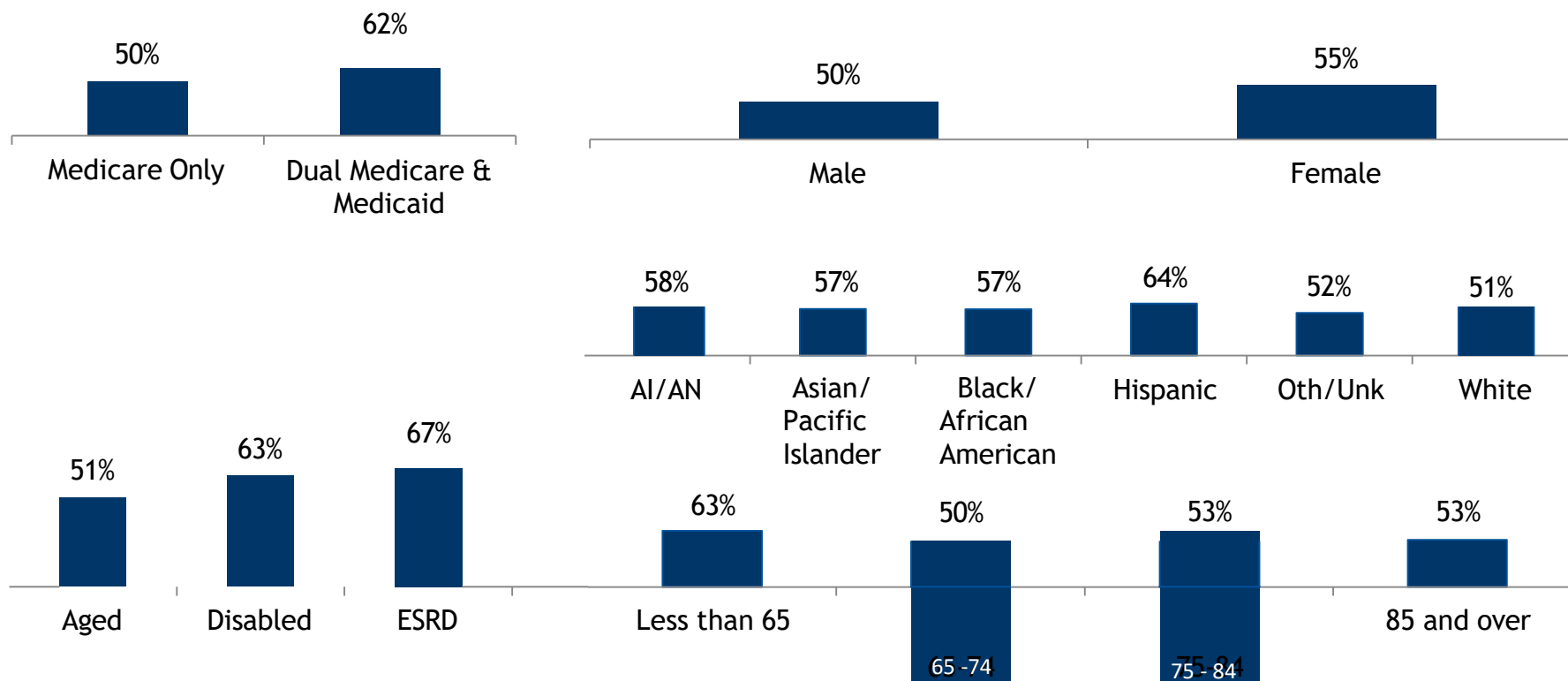
Medicare

Image: Road to Mt. Lemmon, AZ
(personal photo)

Medicare Telemedicine Snapshot

Medicare Claims and Encounter Data: March 1, 2019 to February 28, 2021, Received by September 9, 2021

Telemedicine Users: Pre-Pandemic and Pandemic Period

|	Total	Telehealth	E-visit[1]	Virtual Check-In
Pre-pandemic (March 1, 2019 - Feb 29, 2020)	910,490	892,121	5,220	14,088
Pandemic (March 1, 2020 - Feb 28, 2021)	28,255,180	27,691,878	367,467	1,601,033

Two Year Trend - Telehealth
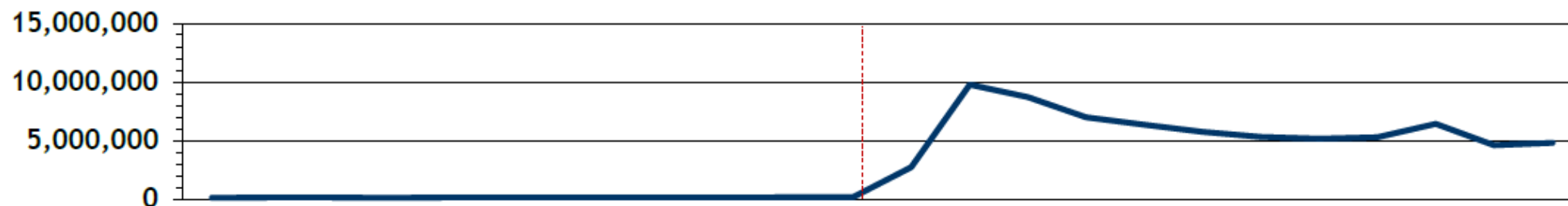
Medicare Telemedicine Snapshot

Medicare Claims and Encounter Data: March 1, 2020 to February 28, 2021, Received by September 9, 2021

28,255,180 Unique Telemedicine Users

53% of Medicare Users

Percentage of Medicare Users with a Telemedicine Service[1] by Beneficiary Characteristics

Characteristic	Percentage
Medicare Only	50%
Dual Medicare & Medicaid	62%
Male	50%
Female	55%
AI/AN	58%
Asian/Pacific Islander	57%
Black/African American	57%
Hispanic	64%
Oth/Unk	52%
White	51%
Aged	51%
Disabled	63%
ESRD	67%
Less than 65	63%
65 - 74	50%
75 - 84	53%
85 and over	53%

Note: AI/AN = American Indian/Alaska Native

[1]Only beneficiaries with at least one telemedicine-eligible service are included in the denominator.

CMS CENTERS FOR MEDICARE & MEDICAID SERVICES

28,255,180 Unique Telemedicine Users   **53%** of Medicare Users

Percentage of Medicare Users with a Telemedicine Service[1] by Geography

Rural Areas: **44%**

Urban Areas: **55%**

Map Scale: Percentage (%)

27	39	40	47	48	54	55	60	61	71
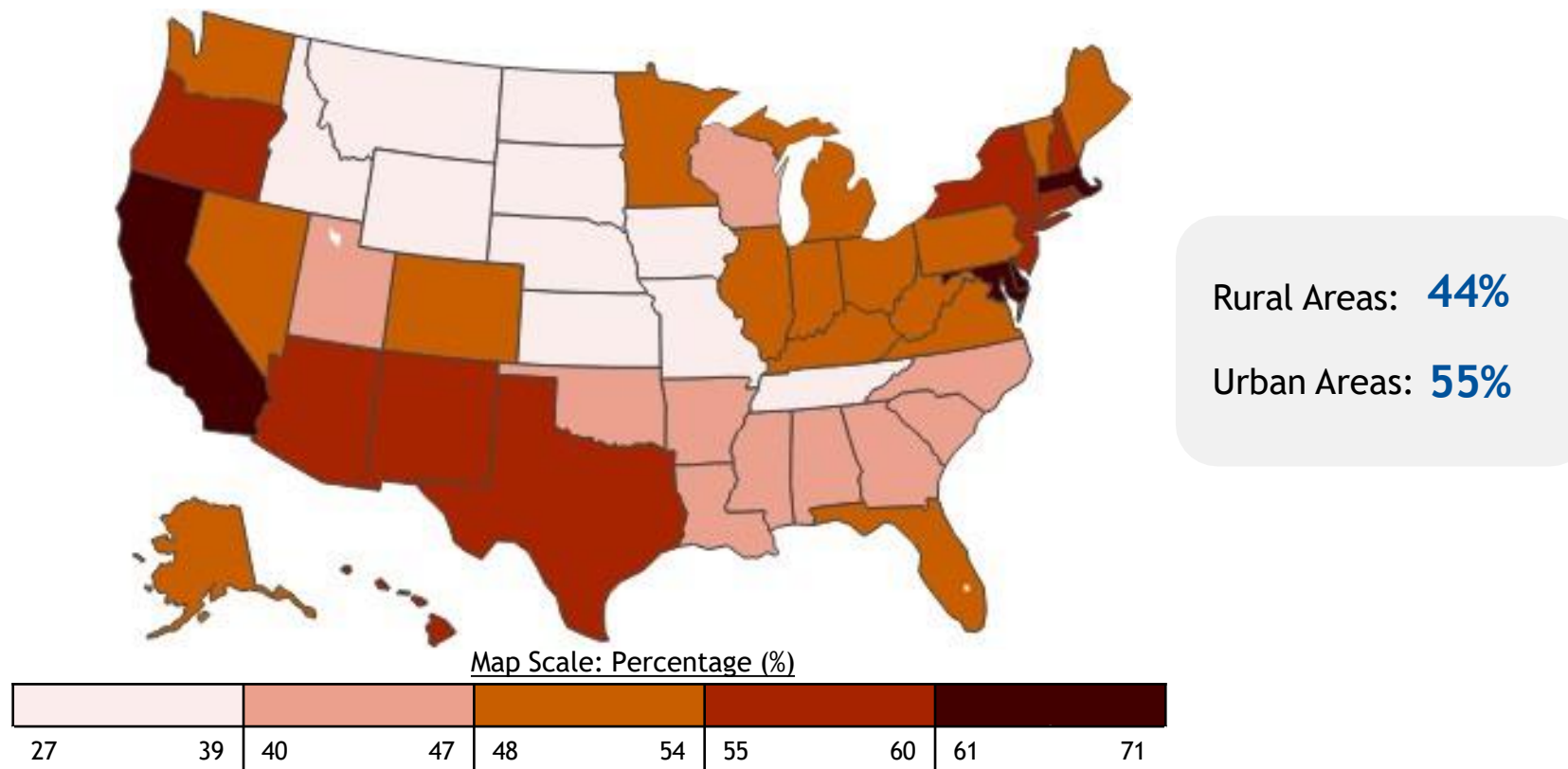
<u>Disclaimer</u>: All data presented in this update are preliminary and will continue to change as CMS processes additional claims and encounters for the reporting period. Please see page 4 and view the methodology document available <u>here</u>.

[1]Only beneficiaries with at least one telemedicine-eligible service are included in the denominator.

Telehealth Usage and Trends
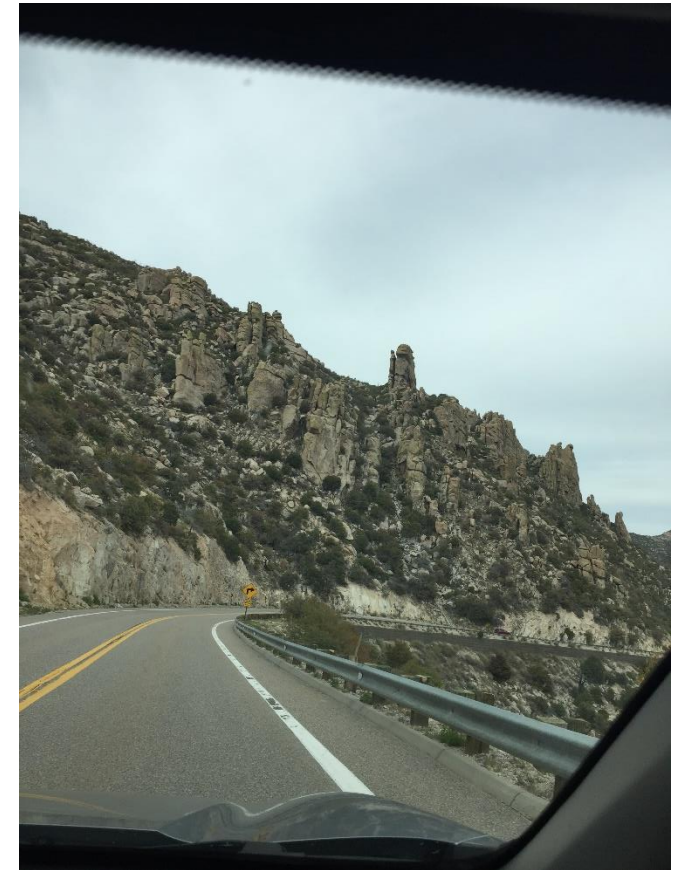
Medicaid

Image: Road to Mt. Lemmon, AZ
(*personal photo*)

Patient Services Reimbursement: Medicaid

Medicaid – significant variability, determined state by state
  - All 50 states & DC have some type of TH coverage

During PHE: Medicaid programs were given broad authority to utilize telehealth

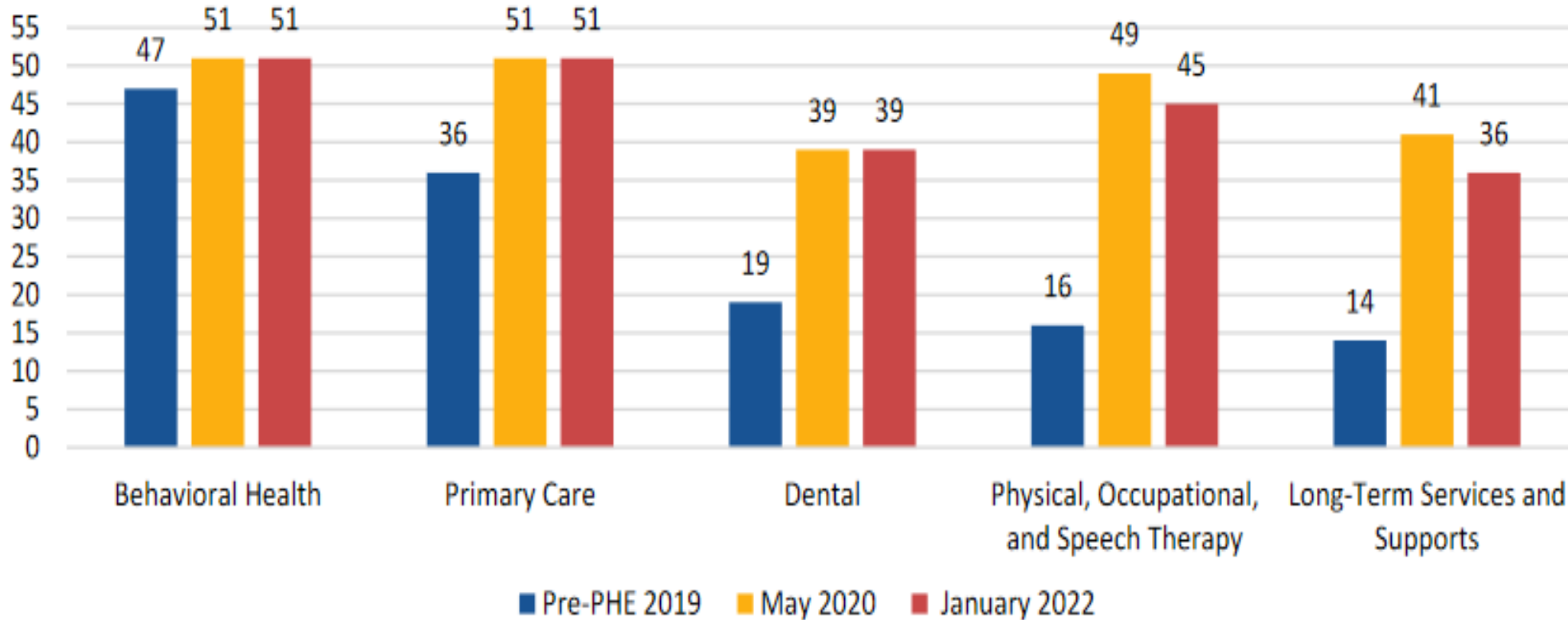Some states are now starting to pull back PHE waivers.

Status of Medicaid Services Delivered Via Telehealth as of January 2022

"As of January 2022, the status of state Medicaid telehealth flexibilities related to the COVID-19 pandemic was mixed.

Some states had rescinded all or some of their telehealth flexibilities, while others were ongoing but contingent on either state or federal PHE

Still others have been made permanent via state legislation or guidance." (ASPE Office of Health Policy, 2023)

Figure 1. Number of States: Medicaid Telehealth Services and Providers

Legend: Pre-PHE 2019 (blue), May 2020 (yellow), January 2022 (red)

Category	Pre-PHE 2019	May 2020	January 2022
Behavioral Health	47	51	51
Primary Care	36	51	51
Dental	19	39	39
Physical, Occupational, and Speech Therapy	16	49	45
Long-Term Services and Supports	14	41	36

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Preliminary data suggest that services delivered through telehealth increased for beneficiaries of all age groups during the PHE, but were highest among the 19 to 64 age group
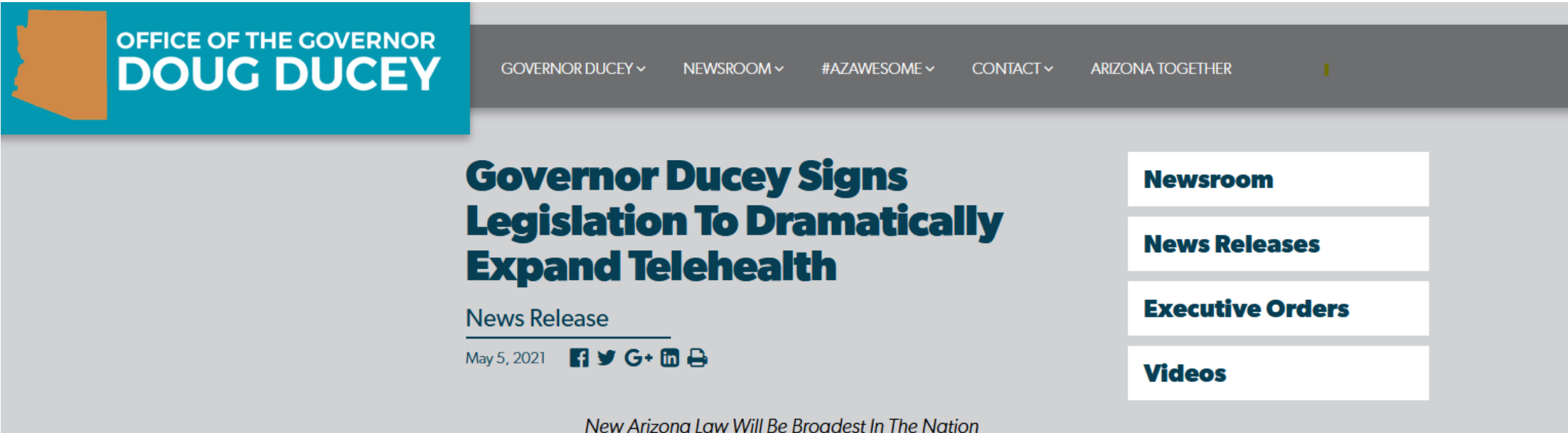
Services delivered via telehealth per 1,000 beneficiaries during the PHE (March 2020 – January 2022)

■ Age <19 ■ Age 19–64 ■ Age 65+
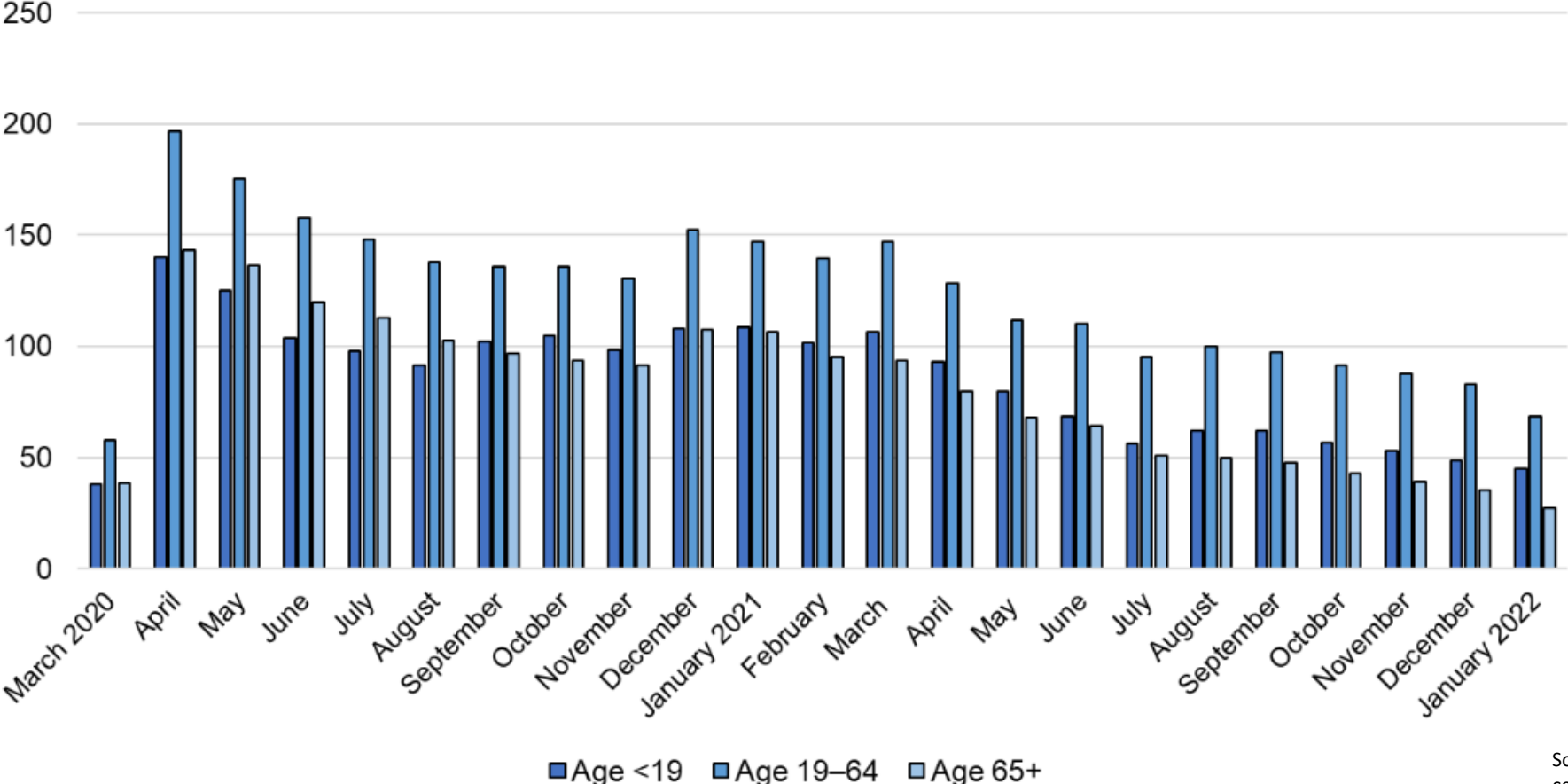
Note: Data for recent months are likely to be adjusted upward due to claims lag. These results are for Medicaid and CHIP only. Therefore, they do not represent the full set of services received by dually eligible beneficiaries. Many beneficiaries age 65 and older are likely to be dually eligible for both Medicare and Medicaid and the results for this age group likely underestimate telehealth utilization among older adults.

Telehealth in Arizona

In 2020 Four TH Executive Orders were Passed in AZ

1. **3/11/2020 E.O. 2020-07**: *Proactive Measures to Protect Against COVID-19*
   - Required insurers to cover TM payments at same rate as in-person

2. **3/25/2020 E.O. 2020-15**: *Expansion of Telemedicine*
   - Required insurers to fully cover TM services, patient home was an approved location and expanded types of healthcare providers able to use TM

3. **3/25/2020 E.O. 2020-19**: *Telemedicine for Pets and Animals*
   - Ensured individuals had access to TM to treat their pets and animals

4. **4/11/2020 E.O. 2020-29**: *Increased Telemedicine Access for Workers Comp*
   - Ensured injured workers could utilize TM within WC system

In May 2021: AZ House Bill 2454

- One of many bills introduced in states throughout the country this year to continue TH coverage allowed in the post PHE

- HB 2454 permanently sustains the emergency measures put into place in response to the PHE in March 2020

- The Term Telehealth is now uniformly used in AZ

In March 2023: AZ Senate Bill 1218

- AZ SB 1218 permits physicians to establish a doctor-patient relationship through "telehealth."

- This includes asynchronous store-and-forward technologies, remote patient monitoring services and audio-only telephone encounters. This bill would expand the current law, which only permits real-time audio-visual services to establish a doctor-patient relationship.

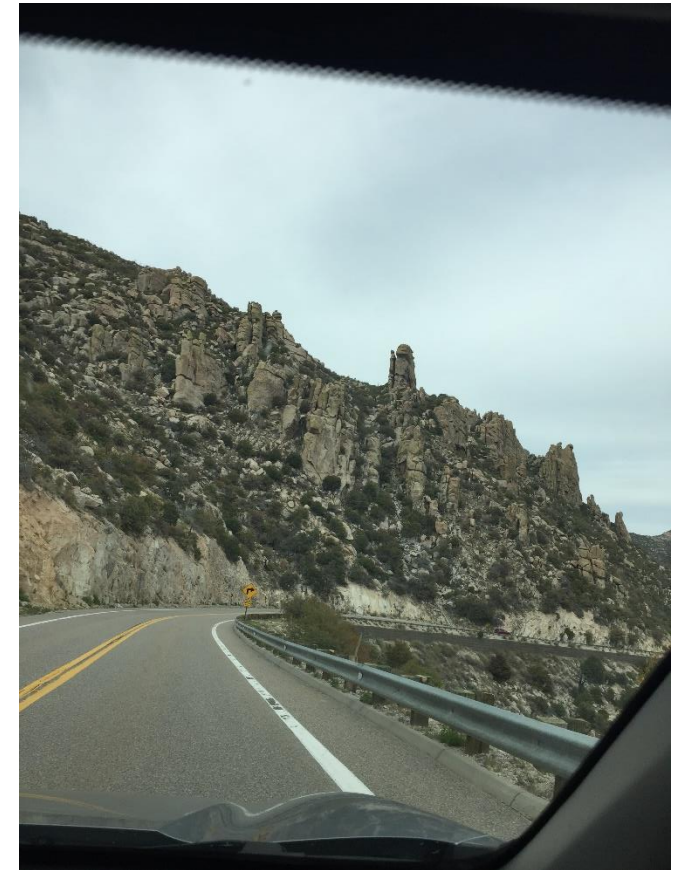# Telehealth Usage and Trends

Other Payers

Image: Road to Mt. Lemmon, AZ *(personal photo)*

Private Insurance

Private Insurance

- PHE billing guidelines are "fluid"
    - Some Priv Ins are starting to roll back some TH services; moving dates
    - Check what is going on in your state!

Direct to Consumer/Self Pay

- Pre-PHE largest growing TH sector
- Private payers (e.g. Blues, Aetna, Cigna, United) started partnering with national direct-to-consumer telehealth companies
- Convenient for patients
- But shuts out local providers and could disrupt continuum of care

When you can stay in bed for your appointment, it's your kind of care

Feeling sick? Skip the walk-in clinic and access same-day quality care from home through 24/7 Virtual Visits. Qualified providers are available around the clock to diagnosis and treat common sicknesses like the flu, pinkeye, sinus infections and more.

Urgent care, made virtual

24/7 access to qualified care providers

Consider for a range of issues like sinus infections, UTIs, migraines and more

Virtual providers can help with prescriptions or offer referrals to in-person care if needed*

Care is available to individuals of all ages

Designed with affordability in mind, with visits costing $49 or less**

An urgent-care visit from home. That's your kind of care.

Get seen today

New Players

- **Amazon**
- **Apple**
- **Best Buy**
- **CVS**
- **Google/Alphabet**
- **United Healthcare Group**
- **Walgreens**
- **Walmart**

New Players

Services

Pharmacy Operations
Primary Care
Behavioral Health
Home Health
Women's Health
Diagnostics/Therapeutics
Disease Mgt
Dental/Vision
Promoting Healthy Lifestyles

Leveraging

Convenience
AI
Partnerships w/Big Tech
Partnerships with Other HC Systems
Medicare Advantage Plans
Value Based Care
Research

The doctor's office, reimagined

Amazon and One Medical are teaming up to make healthcare more convenient and membership more affordable. Most insurance accepted.
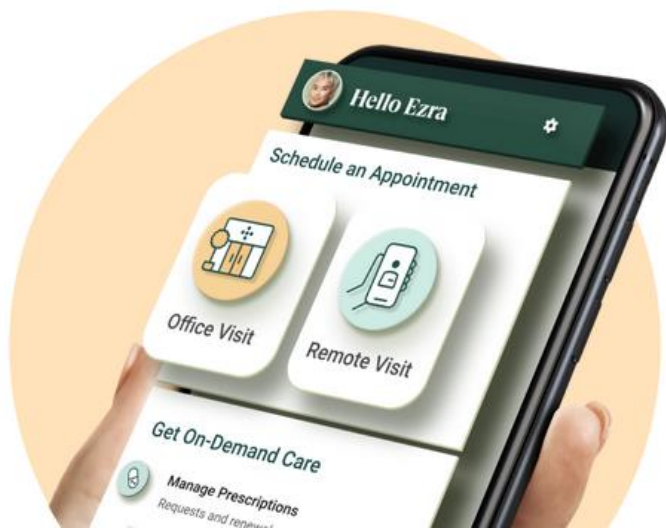
Limited time offer

$**144** for your first year*

~~$199~~ (equivalent to $12/month) for new One Medical members

Join now on One Medical ☐

Terms apply.

One Medical membership benefits you'll enjoy:

- 24/7 virtual care via messaging or video
- Online appointment booking
- On-demand video chat
- In-app prescription requests and renewals

Learn about One Medical services ☐

IMPACT
Virtual First Care (V1C) Directory

Welcome to IMPACT's Virtual Care V1C Directory!

You'll find information on key players across the ecosystem who are committed to a virtual-first approach to healthcare — one that will allow us to provide care for people centered on their needs rather than the needs of the healthcare system.

Browse to learn more about these leaders, what they are working on, and how they are advancing the promise of V1C. Then, learn more about V1C and what you can do to advance this promising approach in today's healthcare.

	Company Name	Yea...	Logo	Company Description	URL	V1C Ecosystem Segment	Clir
1	9amHealth	2021	9am	Provides on-demand expert medical support for prediabetes, diabetes, hig...	https://join9am.com	V1C Provider	Ca M
2	98Point6	2015	98point6	98point6 is pioneering a new approach to primary care. By pairing AI and ...	https://www.98point6.com/	V1C Provider	Pr Be
3	Accolade	2007	Accolade	Accolade is a confidential, third party health advocacy service that can assist ...	https://www.accolade.com	V1C Enabler/Infrastructure V1C Provider	Pr Inf
4	Alpha	2017	alpha	Alpha is a virtual primary care platform for women. Alpha's platform connects ...	https://helloalpha.com/	V1C Provider	Be De
5	Amazon Clinic	2022	amazon clinic	Amazon Clinic will operate in 32 states and provide virtual care for more than ...	https://clinic.amazon.com/	V1C Provider	De W
6	Amwell	2006	amwell	Amwell is a leading digital care delivery platform connecting and enabling all o...	https://business.amwell.com/	V1C Provider V1C Enabler/Infrastructure	Be De
7	Anytime Pediatrics	2016	ANYTIME pediatrics	Anytime Pediatrics is a complete pediatric virtual care solution ...	https://anytimepediatrics.com	V1C Enabler/Infrastructure	Pe

Telehealth and in-person payment amounts were similar among most providers offering both virtual and in-person care in 2020

Among providers offering both telehealth and in-person care, comparison of telehealth and in-person claims payment, among privately insured, 2020
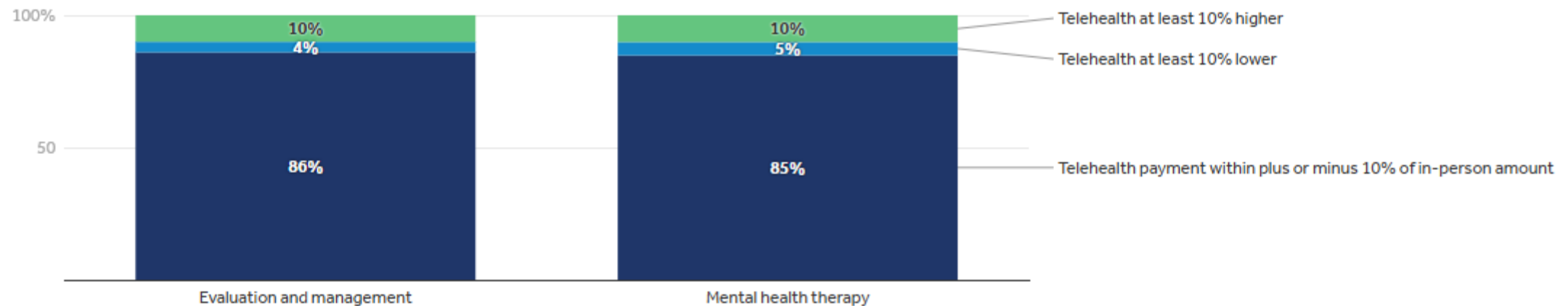
Notes: Average paid amounts were compared within provider offering both in-person and telehealth care for evaluation and management established patient severity level 3 (99213) and psychotherapy 60 minutes (90837) claims. Numbers may not add to 100% due to rounding.

Source: KFF analysis of HCCI data • Get the data • PNG

Peterson-KFF
Health System Tracker

Most employers do not expect telehealth to affect health spending

Among firms offering telemedicine health benefits, as a result of telemedicine how have the firm's costs changed, 2022

Increase   Decrease   Stay About the Same   Don't Know

	Increase	Decrease	Stay About the Same	Don't Know
Small Firms	5%	6%	62%	28%
Large Firms	3%	6%	66%	25%
All Firms	4%	6%	63%	27%

Note: Among firms offering health benefits, the plan with the largest enrollment at 87% of small firms (50-199 workers) and 96% of large firms (200 or more workers) cover telemedicine. Small firms have 50-199 workers and Large Firms have 200 or more workers. Percentages may not add up to 100% due to rounding.
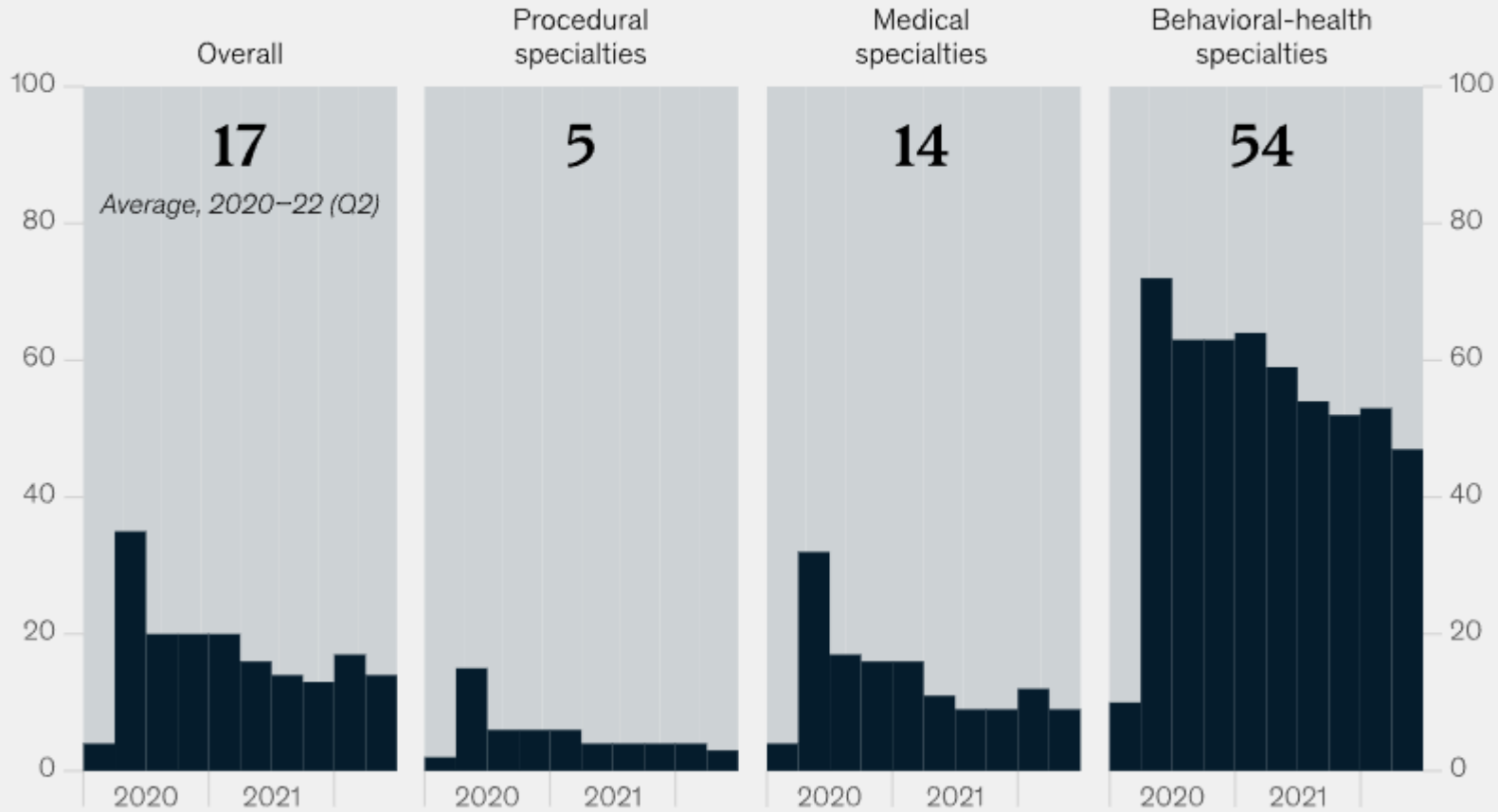
Source: 2022 KFF Employer Health Benefits Survey • Get the data • PNG

Peterson-KFF
Health System Tracker

90% of Employers also felt telehealth will be important from providing access for BH, PC and specialty care and in remote settings.

Peterson – KFF (2023) https://www.healthsystemtracker.org/brief/telehealth-payments-similar-early-in-the-pandemic/

Most healthcare specialties had an uptick in virtual-care adoption, but virtual visits for behavioral health stabilized at a higher level relative to its peak.

Share of healthcare visits in US that are virtual, by type, quarterly, %

Overall — 17 — Average, 2020–22 (Q2)

Procedural specialties — 5

Medical specialties — 14

Behavioral-health specialties — 54
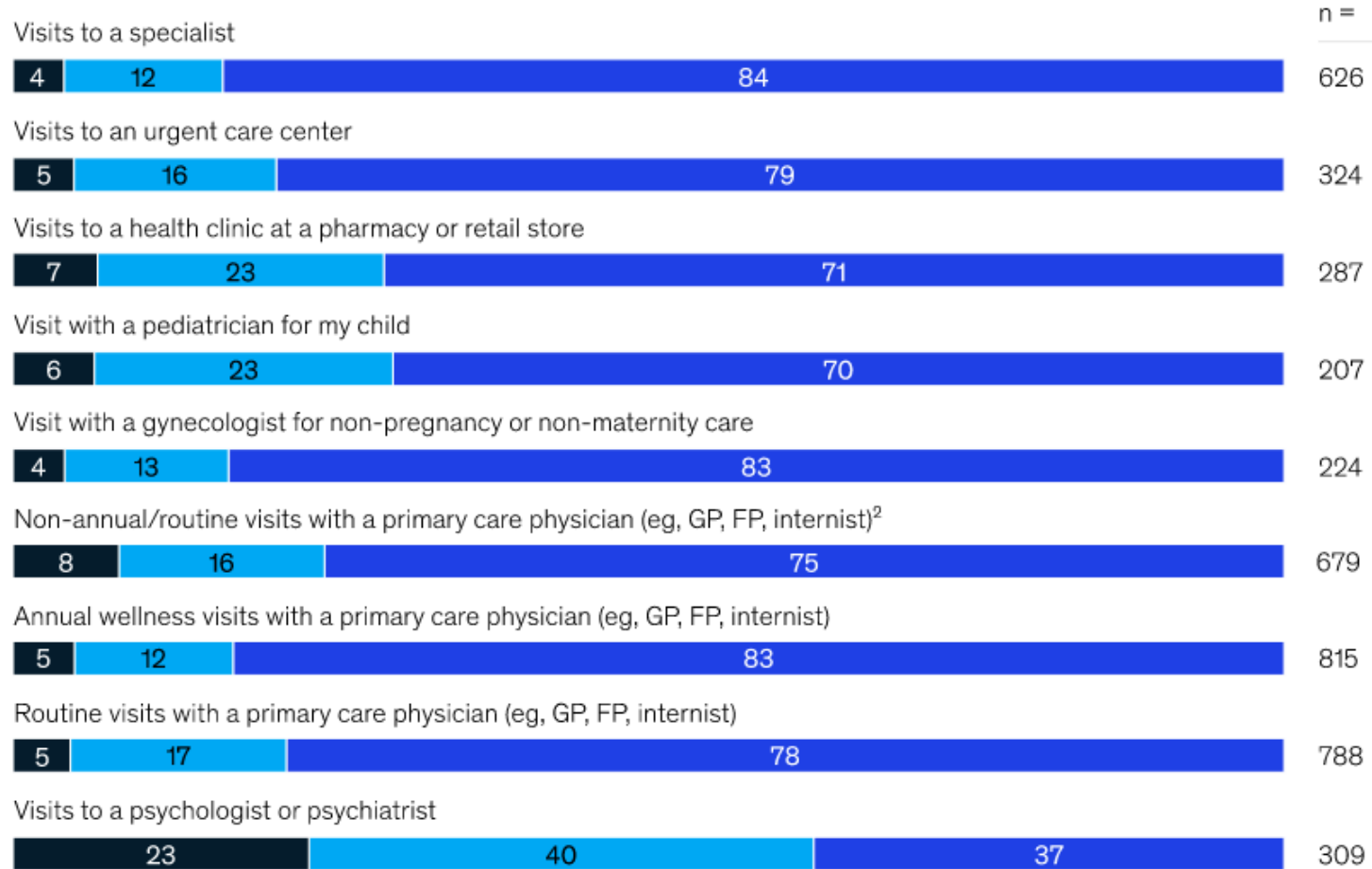
Source: Compile; McKinsey analysis

McKinsey & Company

Most recent care received utilized telemedicine, with some moderate increases since January.

Modality of most recent appointment by setting, current as of June 14, 2021

Respondents who reported receiving care in the specified setting (sample size varies by row),[1] %

■ Telephone ■ Telemedicine ■ In-person

n =

Visits to a specialist

| 4 | 12 | 84 | 626 |

Visits to an urgent care center

| 5 | 16 | 79 | 324 |

Visits to a health clinic at a pharmacy or retail store

| 7 | 23 | 71 | 287 |

Visit with a pediatrician for my child

| 6 | 23 | 70 | 207 |

Visit with a gynecologist for non-pregnancy or non-maternity care

| 4 | 13 | 83 | 224 |

Non-annual/routine visits with a primary care physician (eg, GP, FP, internist)[2]

| 8 | 16 | 75 | 679 |

Annual wellness visits with a primary care physician (eg, GP, FP, internist)

| 5 | 12 | 83 | 815 |

Routine visits with a primary care physician (eg, GP, FP, internist)

| 5 | 17 | 78 | 788 |

Visits to a psychologist or psychiatrist

| 23 | 40 | 37 | 309 |

APPT1. For each of the following types of care below, indicate whether your most recent appointment was either at an in-person appointment, or an online/video visit with a physician (eg, Doctor on Demand, Skype, FaceTime); also called telemedicine, or a telephone (voice call) appointment.
[1] Figures may not sum to 100%, because of rounding.
[2] FP, family physician; GP, general practitioner.
Source: McKinsey COVID-19 Consumer Survey 1/15/2021, 6/14/2021

Telehealth Usage and Trends

Apr 14, 2021- Aug 8, 2022

ASPE Issue Brief: Updated Nationals Survey Trends in Telehealth Utilization & Modality (2021-2022)
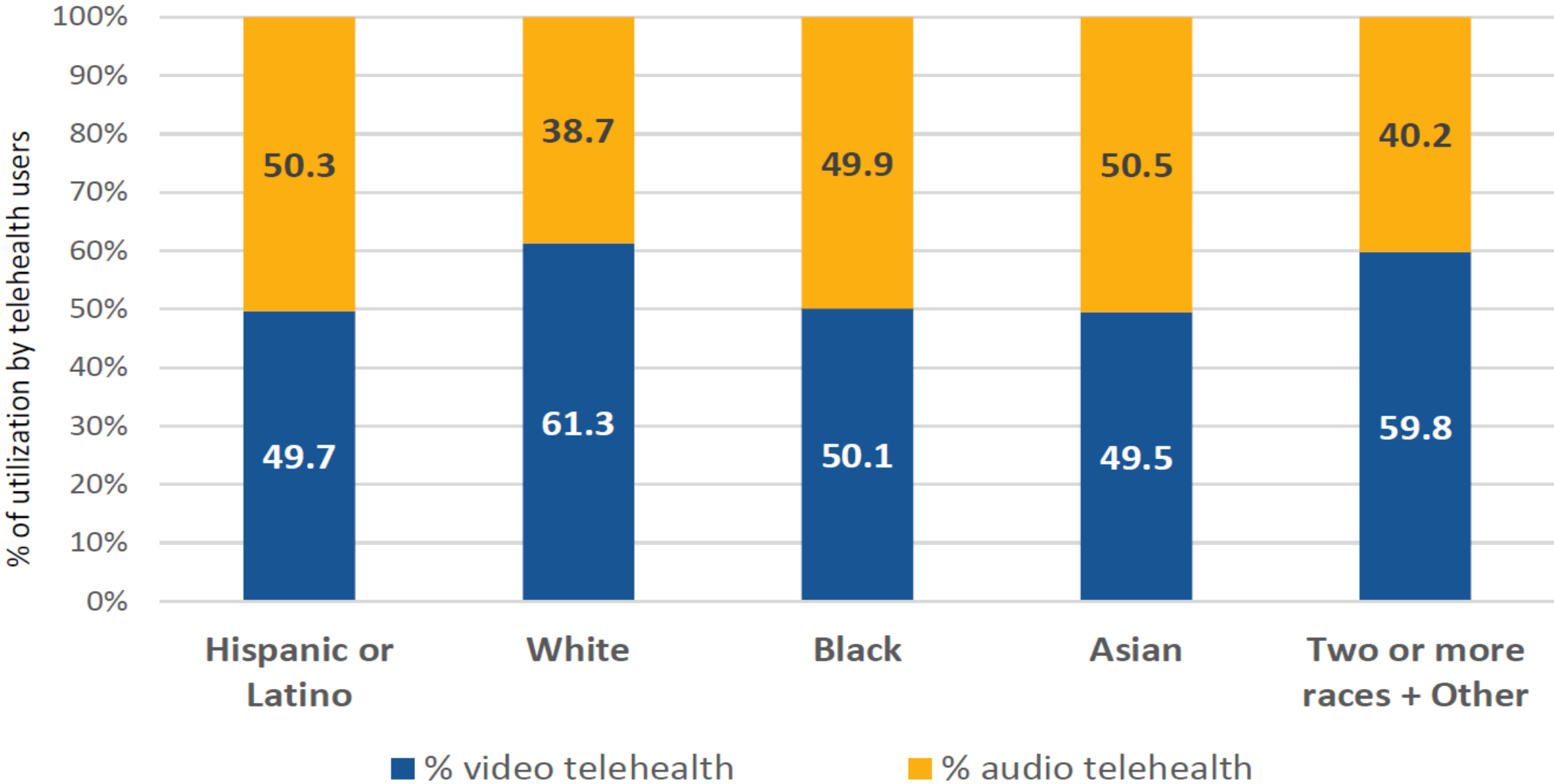
Image: Road to Mt. Lemmon, AZ
(personal photo)

Telehealth Usage & Trends: Apr 2021- Aug 2022

- Usage varied between 20.5% and 24.2%; TH use > 20% for all groups

- Usage lowest among uninsured (9.4%), ages 18-24 (17.6%), Midwest (18.7%)

- Usage highest among
  - M-Caid (28.3%) and M-Care (26.8%) beneficiaries
  - Black individuals (26.1%)
  - Those with incomes < $25,000 (26.4%)

- Hispanic or Latino, Black and Asian individuals were more likely to use TH, but used audio more often

  than White individuals (disparities among subgroups)

- Needed: Further study on disparities regarding access, resource/technology availability (ex: video vs audio), technical literacy training

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Telehealth Use by Modality

% of utilization by telehealth users

	Hispanic or Latino	White	Black	Asian	Two or more races + Other
% audio telehealth	50.3	38.7	49.9	50.5	40.2
% video telehealth	49.7	61.3	50.1	49.5	59.8

■ % video telehealth   ■ % audio telehealth
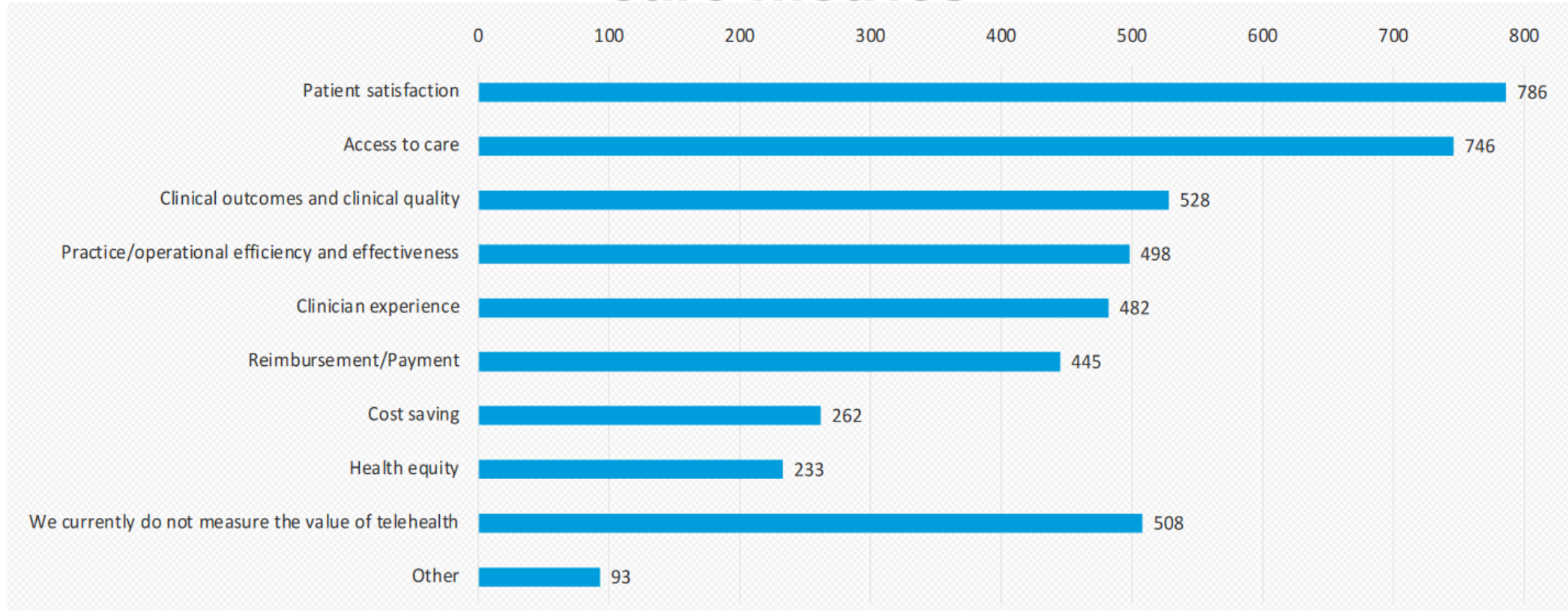
Telehealth Satisfaction
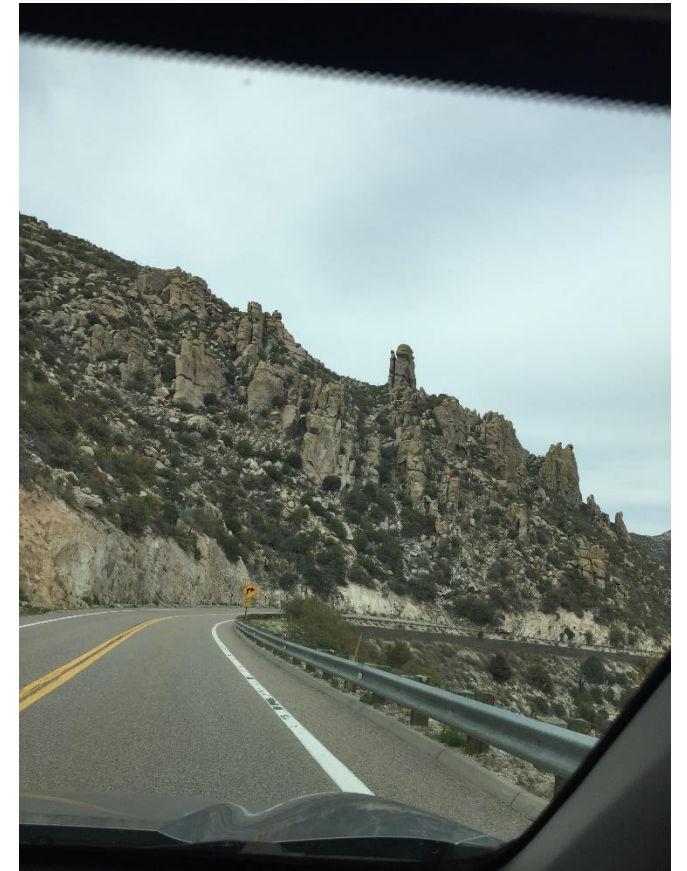
Image: Road to Mt. Lemmon, AZ
(personal photo)

Most practices are measuring the value of telehealth via patient satisfaction and access to care metrics

Metric	Value
Patient satisfaction	786
Access to care	746
Clinical outcomes and clinical quality	528
Practice/operational efficiency and effectiveness	498
Clinician experience	482
Reimbursement/Payment	445
Cost saving	262
Health equity	233
We currently do not measure the value of telehealth	508
Other	93

How do you currently measure the value of telehealth in your practice or organization? N=1,558

AMA | Physicians' powerful ally in patient care
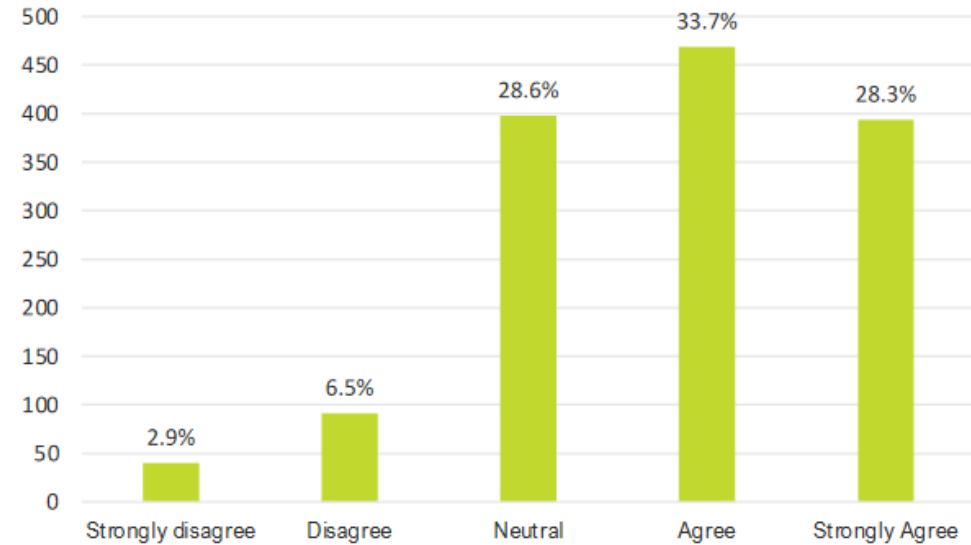
Telehealth offers *access to care* and convenience that contributes to *improved patient satisfaction*

>80% agree or strongly agree patients have better access to care since they began using telehealth

Bar chart (y-axis 0 to 600):
- Strongly disagree: 3.1%
- Disagree: 4.5%
- Neutral: 12.3%
- Agree: 38.5%
- Strongly Agree: 41.7%
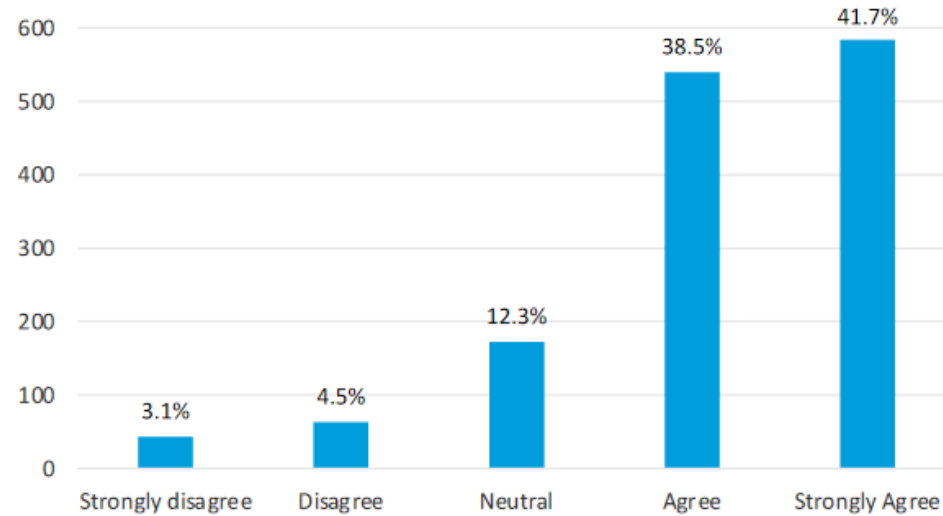
> "Telehealth increased access for our specialty care. Reducing first visits to under 4-5 days compared to 4-5 months."

62% of physicians agree or strongly agree their patients are more satisfied since using telehealth

Bar chart (y-axis 0 to 500):
- Strongly disagree: 2.9%
- Disagree: 6.5%
- Neutral: 28.6%
- Agree: 33.7%
- Strongly Agree: 28.3%

> "Telehealth has been great for my patients with disabilities that impact their mobility. Transportation is a challenge for them, and I can see how they interact with their home environment, which is crucial for my job."

To what extent do you agree or disagree with the following statements? Patients have better access to care since our practice began using telehealth. N=1,402
To what extent do you agree or disagree with the following statements? Patients have higher satisfaction since our practice began using telehealth. N= 1,392
Is there any additional insight or thoughts you would like to share regarding the impact of telehealth on you, your practice, or your organization?

AMA | Physicians' powerful ally in patient care

Source: https://www.ama-assn.org/system/files/telehealth-survey-report.pdf

Most physicians feel telehealth allows them to provide *more comprehensive quality care*

Telehealth has allowed our practice to provide more comprehensive quality care for patients
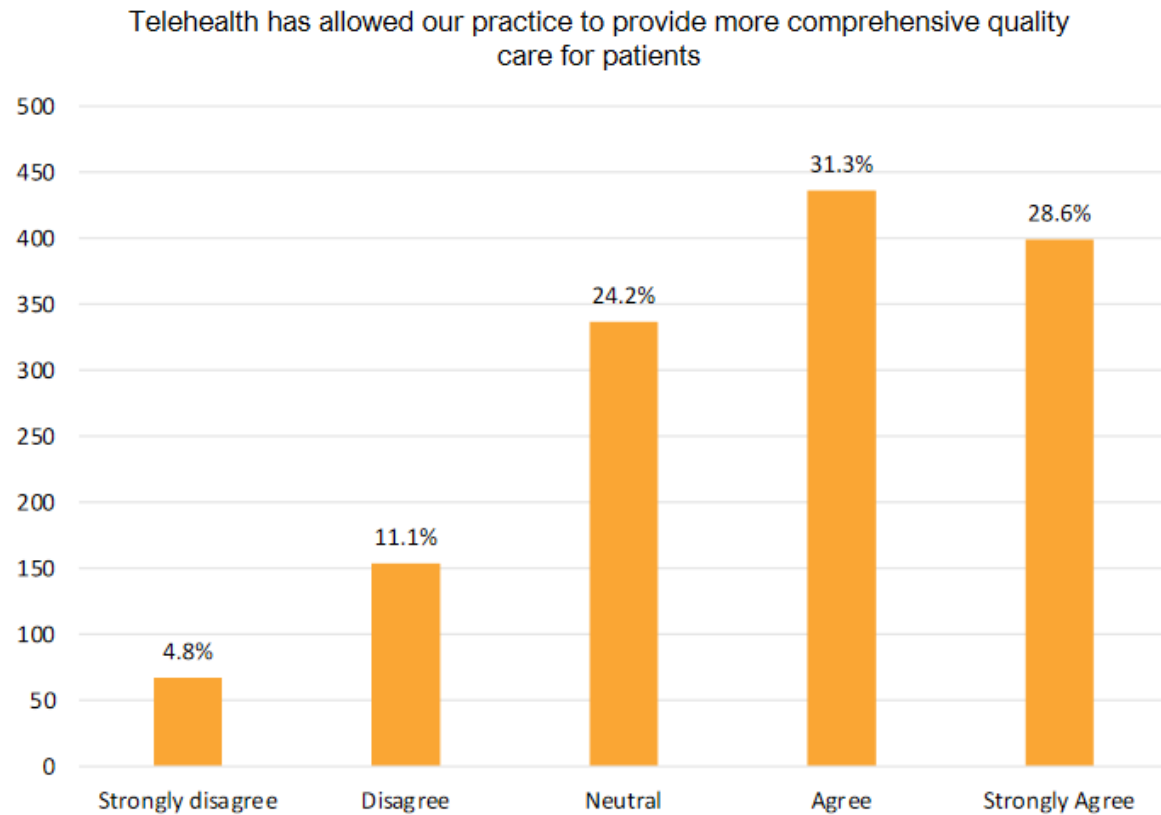
"As a pediatrician, it gives me an opportunity to see children and their families in a setting (home) in which they feel comfortable, and this sometimes reveals strengths of the family."

"At-home blood pressure monitoring has enabled us to diagnose more white coat and masked hypertension"

To what extent do you agree or disagree with the following statements? Telehealth has allowed our practice to provide more comprehensive quality care for patients. N=1,393
Is there any additional insight or thoughts you would like to share regarding the impact of telehealth on you, your practice, or your organization?

AMA | Physicians' powerful ally in patient care

Telehealth Practice Considerations

Image: Road to Mt. Lemmon, AZ
(personal photo)

Continuing Challenges

- Telehealth adoption is still not uniform
  - Disparity in clinical conditions, demographic groups, geographic locations, income, resources/technology availability, tech literacy

- No nationwide uniform quality technical infrastructure

- Estimate >50 million in-person visits could be converted to telehealth if adoption was uniform across all segments.

Considerations for Practices

- Watch Payment Models
  - Value-Based Care

- Evolving Focus
  - Reducing Costs
  - Efficiency
  - Improved Access

- Integrate TH into care delivery
  - Digitally Enabled Care

Considerations for Practices

- Patient-Engaged Care:
  - Convenience, Access, Transparency
  - Create efficiencies for providers and patients (Keep it Simple)
  - Assist with set up services at in-person visit
  - Offer lower tech options (audio, check in texts)
  - Expand asynchronous options
  - Small outpost clinics (kiosks) for services

Considerations for Practices

- Evidence-based research
  - Quality Outcomes

- Convergence of IT, retail, providers, consumers
  - Amazon, Walmart, Pharmacies, Payers **– Competitors or Partners?**

- Work with your Marketing Team
  - Identify Strengths/Specialties that differentiate your practice
  - Identify/Build a loyal customer base and use for marketing
  - Strategic partnerships

Considerations for Practices

- Changes in Health Care Delivery
  - Comfort with all things technical (providers & consumers)

- Smaller, quicker, cheaper technology

- Mobility

- Increased demand

- Two areas of continued growth
  - Telemental Health
  - RPM/RTM

In Other News…..

What is The Future of Telehealth?

It is still under construction!

Image: https://pixabay.com/images/search/construction/

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Thank you!

Questions?

Gail Barker

barkerg@arizona.edu