

# **TEXAS CHAPTERS**

# Texas HIMSS Advocacy Newsletter - October 2020

Health IT policy is complex. To make a real impact on public policy, health advocacy is vital and requires strong, respected and coordinated voices.

HIMSS Chapter advocates connect with and educate policymakers at state, provincial and local levels, amplify public policy priorities, research the issues, build coalitions and monitor legislation—all with the goal of influencing public policy. When successful, health advocacy has the power to:

- Guide health IT policy roadmaps
- Enact legislation
- Secure funding for strategic public policy support
- Share stories, data, information and public policy positions

This is the first of a series of newsletters to update you on Texas Health IT Advocacy.

### Meet your Texas HIMSS Advocacy Committee



Melinda Costin Retired CIO JPS Health Network



Elsie Gori Division Dir of Nursing Analytics St. David's



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Nasim Rezanejad
Physician Solution
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Mark Steiger Sr. Dir of Operations for Ascension Connect

## Mark your calendars!

- Early Voting continues until 10/30. Make sure your voice is heard!
- Virtual Health Information Technology (HIT) Day will be February 2nd from 9:30 am to 1:30 pm CST.

#### Virtual Health Information Technology (HIT) Day

Our focus for this year will be Telehealth and you won't want to miss our panel of leading experts from across the state.



Telehealth Texas -Nora Belcher, Executive Director at Texas e-Health Alliance



Reimbursement – Steve Love, President and CEO at DFW Hospital Council



Rural Health - Tamara Perry, Senior Director of Virtual Health Operations -Children's Health System of Texas



Telehealth National – Mei Kwong, Executive Director at Center for Connected Health Policy

The Covid-19 Pandemic has sparked a surge in telehealth services, resulting in an exponential increase in demand for telehealth services amongst Texas healthcare providers. These services include general well-care visits, specialty care visits, urgent care visits, and counseling, including mental and behavioral health services. In addition to providing continued access to health care providers for all Texans in a convenient method, telehealth has helped expand access to specialty providers, reduced costs by reducing emergency department visits, and help reduce patient readmissions with home monitoring services.

To meet all Texans' healthcare needs by providing telehealth services, multiple regulatory waivers were allowed by The Centers of Medicare & Medicaid Services (CMS) and our state legislature at the start of the Covid-19 pandemic. Some of these included:

- Allow providers to practice across state lines and expanded the list of eligible providers, i.e., physical therapists, nutritionists, speech therapists, etc.
- Medicare can pay for office visits furnished via telehealth in all areas of the country (not only rural areas) and in any setting, including in a patient's home;
- Texas may reimburse otherwise payable claims from out-of-state providers not enrolled in the Texas Medicaid program;
- Waiver for Telephonically Renewing Scheduled Narcotic Medications;
- Extend pre-existing authorizations for which a beneficiary has previously received prior authorization through the end of the public health emergency;
- Contracted or preferred physicians and other health care professionals will be eligible for payment from the Texas Department of Insurance regulated insurance plans for medical visits they conduct over the phone instead of in person at the same rate they would receive for in-person visits.

<u>Source: https://www.medicaid.gov/state-resource-center/disaster-response-toolkit/federal-disaster-resources/entry/54093; https://www.tha.org/COVID-19)</u>

These waivers helped facilitate the telehealth outreach for the Texas Medicare and Medicaid patients. These changes allowed Texas Providers to respond quickly to the needs of all Texans by providing healthcare while stay-at-home orders were in place, and hospitals were required to suspend non-urgent in-person visits and voluntary procedures. Even though most of the waivers are temporary, there is support through professional organizations such as the American Hospital Association (AHA), Texas Hospital Association, Texas Medical Board, and a CMS proposal to make some of the waivers permanent. This is where the Texas Legislature has the opportunity to align with the proposed federal changes in expanding telehealth services to its citizens.

According to The National Telehealth Policy Resource Center, the State of Texas rates very well for its efforts to support the use of Telehealth Services. There are still areas where the Texas Legislature can provide improvements. As cited in the report, Texas does well in these areas:

- Texas Medicaid reimburses for various live virtual interactions from eligible distant site providers, including consultation, psychiatric diagnostic interview, and pharmacologic management; reimbursement must be the same as in-person services;
- Private payers must provide equal coverage for telehealth services relative to inperson encounters, subject to contract terms and conditions;
- The regional resource centers pilot project provides emergency medical services instruction and prehospital care instruction through telemedicine to providers in rural area trauma facilities and emergency medical services;
- Out-of-state physicians may apply for a telemedicine permit in lieu of a full license.

#### Areas where Texas can improve:

- Texas Medicaid does not reimburse for store-and-forward services. Store-and-forward technologies allow for the electronic transmission of medical information, such as digital images, documents, and pre-recorded videos through secure email communication.
- Texas Medicaid reimburses for remote patient monitoring services for eligible patients under select providers, but frequency limitations and prior authorization requirements apply.
- Medicare does not reimburse for store-and-forward services, except for CMS demonstration programs.

(Sources: Thomas L & Capistrant G, "State Telemedicine Gaps Analysis: Coverage & Reimbursement," ATA, February 2017; Center for Connected Health Policy, "State Laws and Reimbursement Policies," available at <a href="http://cchpca.org/state-laws-and-reimbursement-policies">http://cchpca.org/state-laws-and-reimbursement-policies</a>)

Underlying all of this is the technology required to support telehealth services for all Texans, including our most rural population that experiences more barriers to access healthcare providers due to limited local providers and greater distances to travel to see a provider face to face.

As the Texas HIMSS Advocacy team, we would like to extend our services to provide you and your office staff assistance with navigating the technologies of Telehealth. Through the HIMSS organization, we have access to expert knowledge and resources to assist you and your staff in understanding the barriers and solutions to an effective telehealth infrastructure.

Please keep our contact information and feel free to reach out to us in this upcoming legislative session as telehealth and other health information technology legislation will surely be a priority.

#### Sincerely,

#### YOUR TEXAS HIMSS ADVOCACY COMMITTEE

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