

## Report on PEHP's Coverage of Telemedicine

Public Utilities Interim Committee

Health Reform Task Force

October 2019

Dear Chairs,

We are required under Utah Code Ann. § 49-20-414 to update the Public Utilities Interim Committee and the Health Reform Task Force on PEHP's coverage of Telemedicine.

We believe Technology has an important role to play in enabling medical services to be provided remotely. We provide coverage for the following.

- **Urgent Care.** Telemedicine is particularly well-suited for urgent care. Telemedicine gives a patient immediate, convenient, and low-cost video access to a healthcare provider for minor injuries and illnesses such as sore throats and low-grade infections. PEHP has been offering Telemedicine for urgent care since December 2015. Our current vendor partner is Intermountain's ConnectCare for all networks. Last year, PEHP paid for a total of 1168 e-visits at rate of \$49.50 per visit. This is much less than the average cost of an urgent care visit of about \$180 and an ER Visit of about \$1500. Connectcare does not charge a fee if care at an urgent care clinic or hospital ER is recommended. The University of Utah also provides Telemedicine for urgent care visits for Summit Network members.
- **Psychiatric Care.** We believe Telemedicine can play an important role in helping to relieve severe shortages in certain medical specialties, psychiatry being the prime example. Unfortunately, Telemedicine for psychiatric services has developed slowly. Still, PEHP encourages member use of these services by reimbursing any valid telemedicine provider who provides it.
- **High-end Specialty Care.** Telemedicine is a well-established method for extending high-end specialty care to patients in rural areas. Both the University of Utah Healthcare System and Intermountain Healthcare have developed clinical programs for treating rural patients remotely through Telemedicine.
- **Azova Network.** Providers are developing ways to use Telemedicine to treat patients with whom they have an ongoing relationship. An example is the Azova Network, a small group of providers who use the same technology platform to give patients direct video access to their own providers. PEHP pays 90% of its regular physician rates in these situations.

- ***Upon Request.*** Under the law, PEHP is required to cover telemedicine with any contracted provider who requests it, accepts 90% of our normal rates, and uses security protections. The uptake has been limited to a few mental health providers, together with interest expressed by a couple of primary care physicians.

In sum, while the use of Telemedicine remains fairly small, it has a useful role to play in a number of important areas that should increase overtime.

Please let us know if we can be of further assistance on this or any other topic.

Respectfully Submitted,

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