

ACP recommends new telemedicine guidelines

The American College of Physicians (ACP) released a paper – entitled <u>"A Guide to the Use of Telemedicine in Primary Care</u> <u>Settings: An American College of Physicians Position Paper</u>" – setting forth their recommended guidelines for the developme the telemedicine industry.

Published in Annals of Internal Medicine, the paper focuses on the use of <u>telehealth technology</u> in primary care, and outlines a dozen policy statements and guidelines for reimbursement and utilization.

Challenges and risks

Telemedicine offers great promise for expanding healthcare access to rural and under-served areas, but also great risks if cle guidelines are not implemented.

Increased oversight of the rapidly changing telehealth industry is necessary to prevent breaches of security while allowing the telemedicine landscape to develop.

There are many types of telehealth services used by physicians, which each present unique regulatory challenges. Asynchron communication is the transmitting of medical information not used in real time, whereas synchronous communication entails 2 audiovisual communication between a doctor and patient. Remote patient monitoring is the use of a monitoring tool, such as a digital stethoscope or blood pressure monitor, from the home. Mobile healthcare services include mobile applications and tex messages used to track and monitor patients' health regimens.

Various challenges have hindered the widespread adoption of telemedicine, despite the increasingly ubiquitous nature of technology in our society. Variations in state and federal law, reimbursement and logistical issues, and quality of care and sec concerns are among these challenges.

Position statements

The following are some of the recommendations issued by the ACP:

• Telemedicine will provide the most benefit when used between physicians and patients with an established rapport and an ongoing relationship.

• If a physician does not have a relationship with a patient that requires telemedicine services, the physician should use synchronous audiovisual communication tools to establish a relationship following the standards of an in-office visit, or consul another doctor who does have a relationship with the patient.

• Telehealth can provide a strong care alternative for people whose geographic location limits their access to medical expertis

• All telehealth materials and services should avoid disenfranchising low-income populations by considering the literacy level ousers, adopting an accessible interface design, and being available on affordable hardware.

• Physicians can reduce costs by recognizing that certain conditions previously requiring office visits may now be managed ar treated from afar using technology.

• Physicians' use of telemedicine must be compliant with state and federal privacy and security laws.

• Physicians should ensure that their medical liability coverage covers care delivered via telehealth technology.



• The federal government should allot funds for research on the safety, efficacy and cost of telemedicine technology.

• There should exist a streamlined process for physicians to obtain multiple licenses in order to provide care across state lines without compromising states' licensing and regulatory authority.

• Physicians should use their best judgment about whether telemedicine is appropriate for a patient on a case-by-case basis. Physicians "should not compromise their ethical obligation to deliver clinically appropriate care for the sake of new technology adoption."

Experimenting with telemedicine

Hancock County, Indiana is experimenting with a new telehealth platform designed to serve people living half an hour or more Mercer University's School of Medicine.

"The Hancock initiative is an effort to re-establish primary healthcare services to people in Hancock County," Dr. Jean Sumne Mercer University School of Medicine, told a 41NBC reporter. "It is the ability that is now available through good technology to examine people from a distance."

Throughout the country, physicians and hospitals are beginning to incorporate telehealth services into their healthcare deliver models. "By establishing a balanced and thoughtful framework for the practice, use, and reimbursement of telemedicine in pri care," the ACP's paper concludes, "patients, physicians, and the health care system will realize the full potential of telemedici

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