

Health 2.0: Insurance Coverage and Broadband Expansion For Telemedicine Services.

Whether or not an insurance company will provide coverage for telemedicine services or not is generally controlled by the company's interpretation of its policies. Many insurance companies do voluntarily provide telemedicine coverage. Some insurance policies require "face to face" provision of services or specifically exclude telemedicine coverage. In most states the issue of telemedicine coverage is left to the discretion of the insurance companies in their plan designs.

Recently, Virginia passed Senate Bill 675, now signed by the governor, which mandates insurance coverage for telemedicine services, which it defines as the "use of interactive audio video or other electronic media used for the purpose of diagnosis consultation, or treatment." It excludes audio only telephone, email and fax transmissions. Virginia thus joins 11 other states that have passed some form of mandatory insurance coverage for telemedicine. Virginia, like most of the others, does not require reimbursement for the technical cost of telemedicine services, but does require payment comparable to that for face to face delivery of medical services. Deductibles and co-pays may be applied, but at no higher rates than face to face services. The Virginia bill also proscribes lifetime caps on telemedicine services.

Some states like Colorado limit mandatory coverage for telemedicine to rural counties with population census under 150,000 people. Most of the 11 states require telemedicine services to be in real time "synchronus") or near real time ("asynchronus"). (I have been looking for an opportunity to use those two words).

There is likely to be a dramatic growth in telemedicine services in the coming decade as the federal government pursues the expansion of broadband capability as part of the FCC's National Broadband Plan. The FCC recommends the establishment of a Healthcare Broadband Infrastructure Fund to help cover the cost of telemedicine in medically underserved rural areas. It proposes allocating at least \$29 Million Dollars annually to the Indian Health Service to improve its broadband capability and extending broadband grants to nursing homes, healthcare administrative offices, health care data centers and other health care locations. It supports increasing federal reimbursements for telemedicine services and eliminating regulatory barriers to the expansion of telemedicine technology.

The visit to the doctor's office may soon be an experience of the past, with physicians making virtual home calls.