

e-Health Entities

Proposed Definition

August 18, 2021

Robert Rawlins, MD, Specialty Care Policy Specialist

Betsy Holt, Policy Development Stakeholder Engagement Specialist

Purpose

The purpose of today's meeting is to present a proposed definition for telemedicine entities and gather feedback on the definition and its alignment with functional business models.

Agenda

- Setting Expectations
- Presentation
- Facilitated Discussion

Telemedicine Policy Goals

The Department is committed to developing a comprehensive telemedicine policy that:

- improves access to high-quality services
- promotes health equity
- integrates with medical home & neighborhood
- encourages innovation through aligned payment policy
- ensures value for the taxpayer dollar

Policy Challenge

How do we realize the potential of telemedicine while avoiding unintended consequences such as:

- Negative impacts to the medical home
- Potential to replace in-person care in rural areas
- High-volume, low-value services
- Potential risks to patient safety and quality

Background

HB21-1256, signed by Gov. Polis on May 27, 2021, gives the Department the authority to set rules designed to guide provider entities that operate exclusively or predominately via telemedicine.

Background

- The Department will define, identify, and set policy for these Electronic Health Entities (E-Health Entities)
- The intention is that this policy will:
 - Provide a method for alignment among providers
 - Track utilization
 - Ensure telemedicine visits become part of the patient's medical record

3 Typical Business Models



Brick-and-mortar clinic/organization with telemedicine completely integrated



Brick-and-mortar clinic/organization with separate telemedicine division with a telemedicine provider service



No brick-and-mortar clinic, only telemedicine service

Draft Definition

Legislative authorization:

- Entities that deliver services exclusively or predominately through telemedicine

Electronic Health (e-Health) Entity:

- Practice that provides services only through telemedicine and does not provide in-person services to Colorado Medicaid members.

Today's Questions

- Are there other business models we should consider?
- What are distinguishing characteristics between business models? Where do the lines start to get fuzzy?
- How do you understand the definition?
- Which provider types/groups do you want to see included in this definition?
- What questions does this definition or approach to the definition raise for you?

Next steps

- Proposed policy/rule development
- Additional stakeholder engagement
- Planned timeline
 - Draft rule to MSB in November
 - First reading at MSB in December
 - Second reading at MSB in January
 - Effective date: March 30

Resources

- [Telemedicine Stakeholder webpage](#)
- [Telemedicine Evaluation Report](#)
- [Utilization data](#)
- [HB21-1256](#)

Contact

Robert Rawlins, MD, Specialty Care Policy Specialist
Robert.Rawlins@state.co.us

Betsy Holt, Policy Development Stakeholder
Engagement Specialist
Betsy.Holt@state.co.us

Thank you!