



Modern Healthcare

This copy is for your personal, noncommercial use only. You can order presentation-ready copies for distribution to your colleagues, clients or customers [here](#) or use the "Reprints" link that appears next to any article. Visit modernhealthcare.com/reprints for additional information. [Back to article](#).

Article published April 28, 2014

Newly approved telehealth guideline causes a stir



DePhillips

By [Joseph Conn](#)

The Federation of State Medical Boards approved a model [telehealth](#) policy this weekend that's made some providers of these services happy and others, well, not so much, because of its emphasis on using video rather than audio technology for a first patient visit.

"This policy is a bold step toward a reality where all patients can access quality care irrespective of time, place and location," said Dr. Roy Schoenberg, CEO of American Well, a Boston-based telemedicine technology and service provider that relies of video technology favored in the policy, in a [news release](#). "Now that the federation has done its job as leaders, we look to states to do the same—embrace this model policy, and thereby ensure that only safe, secure and appropriate care can be delivered through today's telehealth technologies." The

policy was approved with no changes, despite protests registered Friday during a committee hearing to gain public input, said Dr. Henry DePhillips, chief medical officer of Teladoc, which protested the policy's seeming restrictions on telephone-based physician-patient first encounters.

Several representatives from patient advocacy groups and from Kaiser Permanente also spoke against the telephone restrictions in the policy, DePhillips said.

"Not everybody has a video device or has access to the bandwidth" to make it useful, DePhillips said. And, based on the company's experience, even those consumers who are in an urban setting, "over 95% of the time, will chose the telephone, even if they have the device and the bandwidth." So, consumer choice "was obviously excluded" in drafting the policy, he said.

The 11-page "Model Policy on the Appropriate Use of Telemedicine Technologies in the Practice of Medicine" was adopted Saturday by the organization during its annual meeting in Denver. A work group of the non-regulatory not-for-profit organization developed the policy to provide a non-binding guide to its 70 member boards on a consistent, national approach to using telehealth technology in the practice of medicine.

The policy insists that a physician-patient relationship needs to be established for physicians to engage in telemedicine. Then, in a nod to new technologies, it says such a relationship can be created "whether

or not there has been an encounter in person between the physician (or other appropriately supervised healthcare practitioner) and patient.”

It adds that a relationship “may be established using telemedicine technologies provided the standard of care is met.”

But in defining telemedicine, the policy says that to establish the essential patient-physician relationship on a first visit, “Generally, telemedicine is not an audio-only, telephone conversation, e-mail/instant messaging conversation or fax. It typically involves the application of secure video conferencing or store-and-forward technology to provide or support healthcare delivery by replicating the interaction of a traditional encounter in person between a provider and a patient.”

Dr. Humayun J. Chaudhry, the foundation's president and CEO, said in a release that the new guidelines allow flexibility that would include telephone and email interactions, which seems to contradict policy language that generally limits telephone communications.

“It is my sense that they're putting a great amount of weight on the word 'general,' but that's not going to be helpful,” said Amy Comstock Rick, CEO of the Parkinson's Action Network, a Washington patient advocacy group, which protested the handling of telephone conferencing and the fact there were no patients or patient-advocacy groups that participated in the study leading up to the drafting of the policy. “You can't adopt a written policy that says one thing and you say, no, no, we meant something else,” Comstock Rick said. “We would call on FSMB to reopen this issue with patients as part of the conversation.”

Follow Joseph Conn on Twitter: [@MHJConn](#)

Modern Healthcare is the industry's most trusted, credible and relied-upon news source. In print and online, *Modern Healthcare* examines the most pressing healthcare issues and provides executives with the information they need to make the most informed business decisions and lead their organizations to success. It's for this reason *Modern Healthcare* is deemed a "must-read publication" by the who's who in healthcare.

For more healthcare business news, visit <http://www.ModernHealthcare.com>.