

Silver Lining Lesson: COVID-19 Proves the Value of Telemedicine



September 2020
Survey Summary



Illinois State Medical Society

www.isms.org

“Telemedicine is safer, cheaper and more convenient for patients and clinicians. I can’t imagine going back to in-office only patient care!”

– Illinois physician responding to growth of telemedicine use during COVID-19



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Introduction

For more than four decades, physicians have turned to an ever-growing array of telemedicine technologies to increase access to care for their patients. Despite usage growth in recent years, as the Illinois State Medical Society notes in our [Telemedicine Principles](#) resource, issues surrounding telemedicine are complex, and many impediments have limited the full potential for telemedicine in healthcare delivery. These impediments – including state and federal regulation, health insurer reimbursement policies, technology limitations and hesitance by both patients and some health professionals – have diminished the potential for telemedicine to increase access to care.

The COVID-19 pandemic unleashed a wave of emergency actions to break down barriers to telemedicine use, which in turn resulted in its widespread adoption. A key driver of growth was emergency rules enabling payment parity for healthcare services via telemedicine that weren't previously covered. ISMS surveyed Illinois physicians for feedback on how the telemedicine surge has impacted medical practices and patient access to care; the results are presented below.

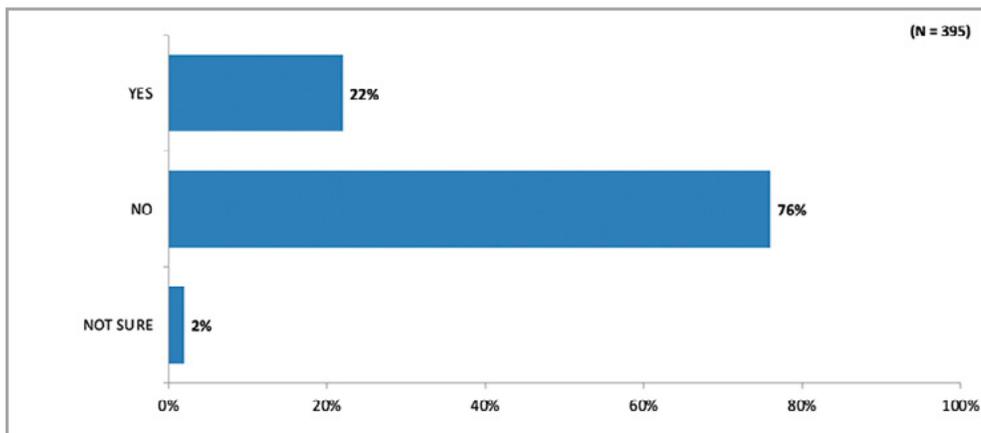
“I think that telemedicine improves care, empowers primary care and reduces costs by improving access to care.”

Survey Key Findings

More than four out of five physicians who responded (81%) indicated that they have used telemedicine to treat a patient at some point. Among those who have:

- **Three out of four (76%) indicated that prior to the pandemic they had not offered any telemedicine services.** This reflects the effectiveness of the emergency actions taken at the state and federal levels to reduce barriers to use of telemedicine. Historic barriers include technology requirements and unfair reimbursement practices.

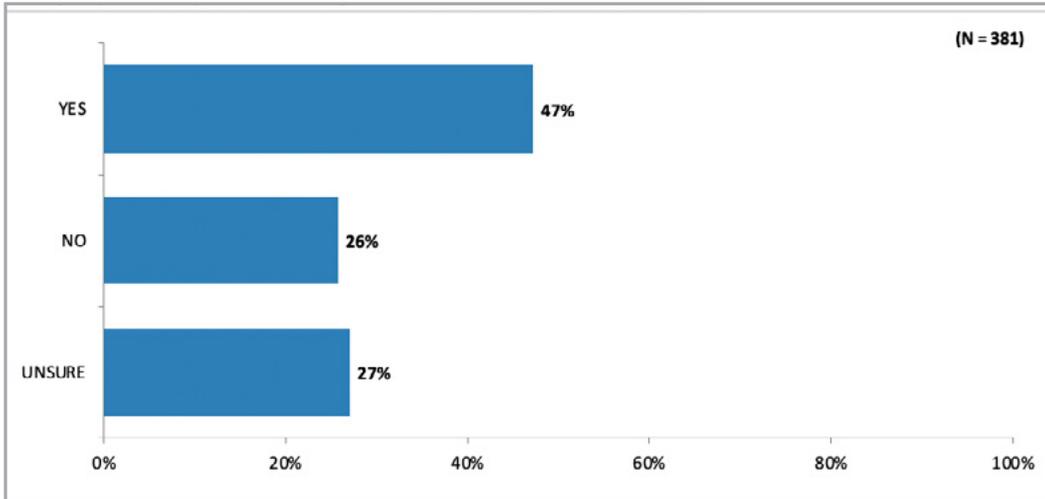
Did your practice offer any services via telemedicine prior to the start of the COVID-19 public health emergency declared in March?



“I hope this new dimension of patient care is here to stay. My patients would be glad to have safe and accessible care.”

- **Half indicated that telemedicine proved particularly beneficial for their patients in underserved areas, and for providing preventive care (47% and 51%, respectively).** Patients living in rural and underserved areas often have challenges accessing in-person care, and experience poorer health outcomes as a result¹ – but use of telemedicine tools may help them manage their health more effectively.²

**Have you found that making telemedicine services available to your patients has been particularly helpful for any of the following?:
RESIDENTS OF UNDERSERVED AREAS**



“ A hybrid telemedicine model (audio only, video and audio, and in person combined) depending on need and abilities would be feasible and effective. ”

Physicians’ comments reflect the need for continued availability of audio-only communication tools for telemedicine, since many patients, particularly the elderly or those in rural areas without broadband networks, lack access to audio-video capabilities. They also note that increased access to telemedicine is particularly beneficial for Medicaid patients, since telemedicine eliminates many barriers to receiving care such as the need to arrange for childcare, identify transportation and take time off from work.

- **Three out of four (73%) found telemedicine especially helpful for chronic care management. The same percentage found it very helpful for treating frail and elderly patients.** These patients account for a disproportionate share of health care spending in the U.S.³, highlighting opportunities to bring down costs for these patients through the use of telemedicine.
- **Two thirds (65%) found telemedicine very helpful for handling urgent care issues.** Telemedicine has enormous potential to aid in triage and improve patient satisfaction in urgent care environments,⁴ and may help patients with low-acuity complaints choose more appropriate settings to seek care.⁵

“ Elderly patients sometimes have trouble getting transportation. Telemedicine allows me to care for this population more efficiently and conveniently. ”

1 <https://www.aamc.org/news-insights/health-disparities-affect-millions-rural-us-communities>

2 <https://www.liebertpub.com/doi/abs/10.1089/tmj.2011.0028>

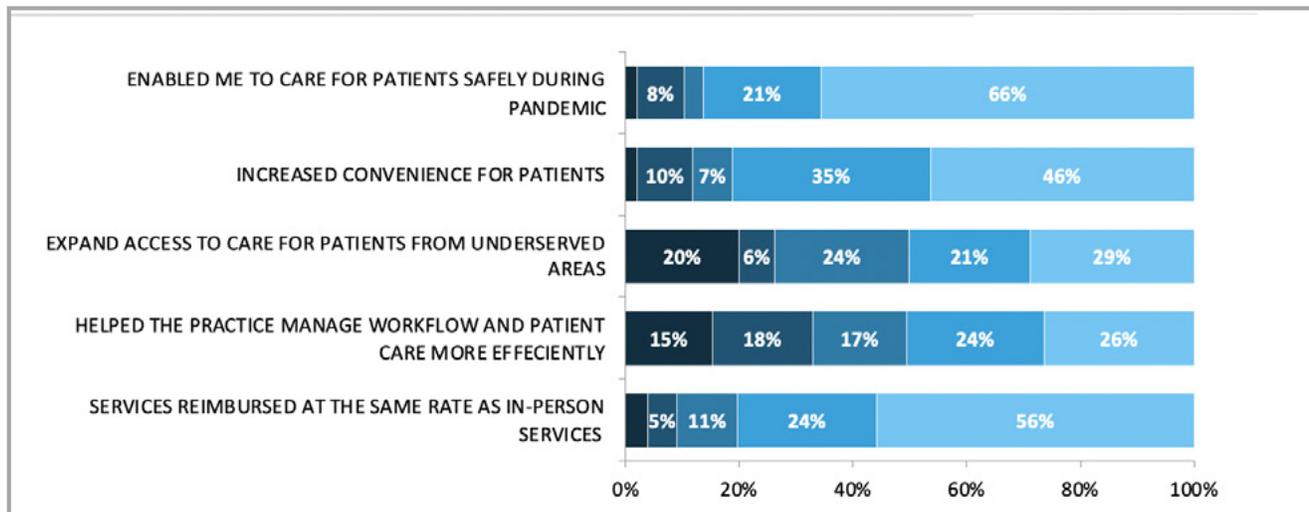
3 https://meps.ahrq.gov/data_files/publications/st497/stat497.pdf

4 https://journals.lww.com/jaanp/Abstract/2019/03000/Can_telemedicine_improve_triage_and_patient.5.aspx

5 <https://westjem.com/articles/potential-of-mobile-health-technology-to-reduce-health-disparities-in-underserved-communities.html>

Physicians' comments show that for many, telemedicine expansion started as a COVID-19 necessity, then turned into a valuable option for almost all types of practice. They also show that physicians are clear-eyed about the benefits and limitations of telemedicine. While telemedicine is widely embraced as a convenient option for patients and physicians, physicians understand that it will not be appropriate for all forms of patient interaction and care delivery, and they will continue to be guided by their professional judgment regarding the care each patient needs and how to deliver it.

How important were the following reasons for offering telemedicine services in your practice?



Not Important
 Somewhat Important
 Unsure/Neutral
 Important
 Very Important

The most important thing is that physicians and patients continue to have a choice – and that means continuing to provide coverage and reimbursement parity for telemedicine services.

“Telehealth has been terrific for our patients. It has decreased our no-show rates and enabled patients to spend more direct time with their physician. It is effective and efficient and should be continued in all practices to some degree.”

— Illinois physician

“If insurance continue[s] to cover telemedicine, this will be an excellent alternative for patients to care for their chronic conditions and for non-urgent conditions.”

— Illinois physician

“Pre-COVID I made decisions based on the patient’s needs and circumstances. We all got a crash course in working remotely with patients who didn’t need it the way those pre-COVID patients might have. Having gotten that experience, it would be byzantine (or worse) not to apply it. Unless constrained by outside forces I’m likely to increase substantially the percentage of my remote work.”

— Illinois physician

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