EDGE 2017
New Format, High Value

EDGE 2017 covered tremendous ground. The discussion addressed topics as varied as patient care, technological advances, augmented intelligence, provider buy-in, and how past, present, and future health policies impact the evolution of the telemedicine industry.

EDGE 2017 THEMES

• The importance of communicating the value and return of telemedicine to different stakeholders

• The importance of using telemedicine to provide more high quality, “local choices” to patients and providers

• Development of practical strategies to scale telemedicine

• Ensuring that telemedicine is deployed in ways that support organizational and financial goals

• Establishing a unified voice for advocacy

Telemedicine’s Bright Future

Telemedicine has demonstrated returns in terms of cost, effectiveness, and acceptability in numerous use cases across the country, and there is strong valuation and investment in the industry. The breadth and depth of these investments are strong, with data showing that telemedicine was the third top-funded health IT technology in the first half of 2017.

Telemedicine offers significant advantages for patients, and the industry enjoys a high degree of innovation. In addition, data show that 30% of ACOs currently offer telemonitoring services, and 45% offer e-visits, statistics that reflect the penetration of these telemedicine service streams.

Other strengths that were highlighted included growth in the proportion of physicians who perceive that telemedicine helps in patient care, data showing that physicians who use telemedicine are favorably disposed toward these technologies, and data highlighting that consumers who choose to use telemedicine are making this choice for the right reasons, such as improved access and convenience.

Speakers also emphasized that the value of telemedicine is not limited to rural areas—many of the healthcare challenges that

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discussed extensively at EDGE 2017 concerned the limitations on widespread adoption of telemedicine that are linked to reimbursement policy. Speakers emphasized that demonstrating telemedicine’s value in ways that resonate with policy makers has emerged as the biggest challenge for the industry.

Challenges on the Road Ahead
There are still important challenges concerning physician adoption of telemedicine, and some EDGE participants expressed a belief that there is still a fundamental misunderstanding by and on behalf of physicians concerning how telemedicine is deployed and used on a routine basis. These concerns include how telemedicine technologies can or should be integrated into the workflow in various clinical settings. Data showing that most physicians still do not practice with telemedicine technologies supported these points.

Despite high satisfaction rates among patients utilizing telemedicine, adoption rates remain low due to financial challenges.

For example, hospitals want to share risk with other entities, and this impacts their willingness to invest and adopt telemedicine. On the investment side, because telemedicine continues to have a high valuation, there are correspondingly high expectations on return, with accompanying concerns about generating a sufficient return on investment.

Although physicians are beginning to become more favorably disposed toward telemedicine, their compensation is still not linked to these technologies. Other weaknesses concern the need for nationwide licensing so that providers can practice across state lines, the need to promote technological standardization, as well as building provider trust.

Speakers pointed out considerable state-to-state variation in telemedicine overall, and how these technologies are used to care for specific populations, such as individuals who are served by Medicaid.

Another source of variation is linked to the large number of independent companies with unique solutions, and the resulting potential for “decision-paralysis” among purchasers.

Finally, an overarching weakness that was...
EDGE speakers also highlighted a number of opportunities concerning CMS and development of reimbursement policies. They indicated that the Medicare Payment Advisory Commission “is listening” to the telemedicine community, and that it wants to receive information that is easily understood, and that comes from a united voice, rather than from individual organizations or companies.

Speakers emphasized that the telemedicine industry is poised to “tell the TM story” in order to ensure that the telemedicine community has a seat at the table in an ever-shifting policy environment. Among the many things that could be conveyed in these efforts are the considerable opportunities for cost savings with telemedicine, a topic that is likely to be of great interest to payers.

Speakers also emphasized that in pushing out many different payment models, CMS has demonstrated that it is open to discussions about innovation in this area, including the role telemedicine can play in this changing landscape. As Medicare continues to reform, there will continue to be a movement away from fee-for-service payment models, a shift that could provide the telemedicine community with significant opportunities to address critical needs.

It was also noted that 32 states have now passed parity laws, a trend that suggests significant forward movement toward broader access and adoption of telemedicine technologies.

Additional opportunities include the availability of considerable capital for telemedicine research and development, and how this capital can increase research and development in the industry. Speakers also pointed to increased numbers of contracts that are tied to value and quality—including commercial insurers that are following the example of Medicare Managed Care—and increased availability of private-sector risk-bearers.

Finally, there was extensive discussion of the tremendous potential of augmented intelligence and “big data” to enhance the value of telemedicine to both patients and providers.

Potential Roadblocks

As EDGE 2017 participants considered how to take advantage of current opportunities to grow telemedicine offerings, speakers cautioned about threats that could derail these efforts.

One speaker explained that the industry could be pushed toward consolidation while another explained that the diffuse and fragmented consumer environment could be a long-term liability for the industry. Several speakers and Learning Lab contributors described “opportunity fatigue” and the associated difficulty of staying focused at a time when so many possibilities are presenting themselves in the field.

Other threats for future expansion of telemedicine included the potential for burn-out on the part of key stakeholders, and unfavorable perceptions of “big data” and the role of augmented and artificial intelligence in healthcare provision. The meeting also highlighted the potential for the uncertain policy environment to slow the pace of transition, and that the breadth of models could put a strain on smaller telemedicine businesses.

A final threat that was discussed by several speakers involved the potential that conflicting voices would dilute key messaging for
policy makers, creating additional, unnecessary challenges at a time when a unified advocacy voice is needed to move new policies forward.

Shaping the Future

Important questions remain concerning where and how telemedicine will ultimately fit into America’s existing healthcare ecosystem. Understanding where America’s healthcare future lies, how care will be accessed, and how telemedicine can move from its historical focus on information technology to a future that focuses on quality and efficiency are all questions that need to be addressed as the industry moves forward.

Implicit in these questions is the need to address how telemedicine will be scaled and sustained over the long term, how to align incentives and interests in a shifting healthcare landscape in ways that will promote access to, and adoption of telemedicine technologies. Against this backdrop, speakers emphasized that for telemedicine to be fully embraced in the future, the industry must remain focused on simplicity for both patients and providers.

With some of these challenges in mind, an EDGE 2017 session focused on current work by the National Quality Forum (NQF) aimed at developing quality measures for telemedicine. NQF received support from the Department of Health and Human Services to develop a measurement framework that would identify measure concepts to serve as the foundation for future measure developers, researchers, analysts and others to advance quality measurement for telehealth.

Among the goals are efforts to facilitate the identification of the most appropriate way to ensure clinical measures are applied to telehealth encounters in order to measure quality of care and to guide the future development of telehealth related measures.

NQF Established Domains for Future Telemedicine Quality Measures

NQF identified four major domains that will provide a framework for future quality measures: Access to care, financial impact/cost, experience, and effectiveness. This work will continue to focus on measurement development with several key considerations that are high priorities for patients, providers, and payers:

- The use of various telehealth modalities must demonstrate a positive effect on quality health outcomes, processes, and costs.
- Existing quality measures to evaluate the effectiveness and benefits of telehealth must be widely accepted and impactful.
- The need to develop consistent definitions through proposed measure concepts and existing measures.

ATA would like to thank all who attended EDGE 2017 and contributed to the findings detailed in this monograph.

Click the hyperlinks below to view photos and view all EDGE 2017 participants.

View all EDGE 2017 attendees and photos here.