

Physician and PA Member Survey Comments

Feedback from VMS members in response to the importance of continued coverage for telephone visits include:

- *Audio-only coverage works very well for two specific populations in my practice. The first is the elderly who often do not have internet access and the second is a large portion of my underserved population who either don't have broadband access at their home or do not have enough data time on their monthly cell phone to allow for MD visits. Finally, this also opens access to allow a quick telephone call for a follow-up on something such as blood pressure or diabetes without exposing patients to the clinic environment. Second finally, this modality should not be undervalued when it comes to winter in Vermont. I have many elderly patients who avoid seeking care from October to May because they don't drive in the dark or inclement weather.*
- *This is very important for our sick, elderly patients, with poor transportation in rural areas, some of whom are homebound, to contact us, and to develop ongoing healthcare plans and supervision.*
- *I use telehealth frequently with some of my HIV or HCV [Hepatitis C] patients who either can't get into the office or if they have agoraphobia and can't make it in. We also have a lot of people that don't have reliable internet access so can't do video visits.*
- *Such situations occur when a patient needs care but is not able to connect for telehealth and/or technical challenges make telehealth impossible at the time of the visit. This type of appointment is usually requested by the patient.*
- *This is critically important to our rural patient population. Many patients in our catchment area do not have sufficient internet bandwidth to participate in televideo consultation, yet may still benefit from telehealth encounters for symptom management and medication management, among other things. To deny access to telehealth services because of lack of availability of stable internet connection creates a health care disparity for our rural population of patients, as well as for patients who may not be able to use technological devices. Physician time and clinical space are both valuable resources. If a physician can take the time to appropriately address a patient problem through telephone encounters, this medical expertise should continue to be reimbursed.*
- *This is a very important advancement that arose during the pandemic. In my experience it particularly served the elderly, less internet savvy and more rural, internet access challenged populations.*
- *This is critical even outside pandemic as it saves patients time, gas mileage, need to find transportation, etc.*
- *I strongly support this. There is no reason a clinician's time and skill are less valuable on the phone than on a screen or in person. In fact, it takes more skill and effort to provide this service. Many patients do not have good internet but almost all have phone access.*