

525 Clinton Street
Bow, NH 03304
Voice: 603-228-2830
Fax: 603-228-2464



61 Elm Street
Montpelier, VT 05602
Voice: 802-229-0002
Fax: 802-223-2336

H. 723, eConsults, and Federally-Qualified Health Centers

Bi-State Primary Care Association, 2/4/2020

Federally-Qualified Health Centers (FQHCs) have an opportunity to benefit from many different telehealth platforms. These notes focus on the particular application of eConsults, which would be facilitated by passage of H. 723 and which are an area of particular interest for FQHCs across the country.

eConsults improve patient care by providing a convenient system for primary care providers to work with specialists offsite to determine which conditions require specialist treatment and which can be treated in the primary care setting. A provider who is unsure of treatment for a particular complaint will document the issue and engage a specialist to offer an opinion. That is true with or without a telehealth platform. Without a telehealth solution, the next step is scheduling a meeting between patient and specialist. These referrals often require patients to schedule weeks or months into the future, travel potentially long distances, deal with insurance coverage for the specialist, and take time off work, schedule childcare, or otherwise rearrange their daily lives for the visit. Our providers report that this time lag and patient burden often results in skipped appointments. It is not a small number of patients affected. For example, the 2019 VPR / Vermont PBS rural life survey found that 30% of Vermonters had experienced travel to their non-primary doctor as a significant problem in the last year. At the same time, the Green Mountain Care Board this summer reported that long wait times for specialist visits continue to present access to care issues across our hospital system. We need a new option.

With an eConsult telehealth system in place, the primary care provider documents a complaint, refers it to a specialist, and that specialist reviews the documentation without the patient present. This system allows for a quick referral and turn around (within 48 hours) in which the primary care provider receives next steps. Basic categories of reply include:

- Can be treated in the primary care setting, with a suggested treatment plan.
- Requires a specialty referral but to a different specialist, with the suggested referral.
- Requires a specialty care appointment, in which case the referral for an in-person visit is made.

Approximately 70-percent of the time the problems can be treated in the primary care setting. This percent changes depending on how long the eConsult system has been in place at the organization, as primary care providers learn how to better identify issues that require referral.

Connecticut was the first state to pilot eConsults with an emphasis on FQHCs. They have a list of 43 different specialties for whom they've determined it's an appropriate system. A recent study published in Health Affairs magazine found an average savings of \$82 / month for Connecticut Medicaid patients using the eConsult system.

Bi-State Primary Care Association has spoken with colleagues in New York, Connecticut, and Maine about these systems, in addition to reviewing materials from platform providers that emphasize work with FQHCs and other safety net providers. From these conversations, we believe that in addition to the straightforward measures of avoiding unnecessary specialist visits and saving money, eConsults offer several other general advantages for participants.

Patients have an extremely high acceptance of eConsults. Because the connection is provider-to-provider these platforms do not require any action on the patient's part or introduce new technology into the visit experience. They emphasize the primary care provider relationship and keeping the medical treatment close to home with that provider. Through reducing unnecessary specialist visits, they offer a convenient option to patients with a much faster turn around time. Patients retain a right to a specialist referral, so those patients who wish to see a specialist in person can still do so (satisfaction studies find this is a rare occurrence).

eConsults offer relative ease of implementation from a technology perspective. Broadband availability becomes less of a barrier – these systems do not require the bandwidth for live video feeds, and the communication is from one health care provider to another, not from site to a patient's home or other community location. Also, eConsult platforms integrate with existing specialist referral systems and EHRs so providers do not need to learn new technology skills. A PCP sends a referral out, the provider with specialized skills in the relevant area reviews and sends back a treatment plan directly into the EHR. This might be a workflow change, but not a technology change.

Our colleagues additionally report that these consulting systems are helpful learning tools for physicians reviewing conditions where they lack experience and for non-physician staff, such as PAs and NPs. Providers at all license levels have reported that they consider eConsults part of their professional development. As we search for ways to recruit primary care providers to rural locations, particularly younger providers, it is critical that they do not feel isolated or pressured to make medical decisions without the full support of other, experienced health care professionals. eConsults can facilitate these connections in a rural setting.

Bi-State Primary Care Association supports the work the Vermont Legislature has done in the past to expand our use of telemedicine. Previous initiatives have focused on real-time connections between providers and patients, essentially recreating an in-person visit. This work has been valuable, but it's only one piece of what is possible. It is important to adopt telehealth as its own suite of valuable tools that *augment* what we can accomplish in-person, not simply view it as a replacement for in-person patient-provider visits. By introducing a tool such as eConsults we can reduce unnecessary referrals, help our patients receive treatment sooner, lower patients' travel burden, reduce the risk of forgoing treatment, shorten wait times for patients who require specialist treatment, and save money for both the individual and the system overall. By doing business differently, everyone can benefit.

H. 723 will bring us a step closer to eConsults and other effective store and forward tools.