



617 Riverside Avenue

Burlington, VT 05401

Phone: (802) 864-6309

Fax: (802) 860-4325

www.chcb.org

CHCB Support of Audio-Only Telehealth Reimbursement February 2021

Jacob Shaw, MD:

“Audio-only visits have really been a lifeline for older Vermonters and for Vermonters from vulnerable communities during this pandemic. I have several patients who have struggled to use traditional telehealth programs due to lack of having a computer, smartphone or reliable internet service. While this does not replace a traditional office visit, I can review medications in real time with audio only, give advice about when and how to access COVID-19 testing, and discuss the safety and efficacy of vaccines.

Anxiety and depression have been “co-pandemics” during the past year, and by using audio-only visits, I am able to adjust medications and provide mental health resources. Of course I prefer to see all of my patients in person, but these visits have been very important to meet the mental health needs of our community and I am greatly concerned about not being able to continue this.

If we are serious that our goal is the health and safety of all Vermonters including the elderly and non-English speaking, it seems unconscionable to limit the access of these patients to their health care providers.”

Adam Greenlee, MD, CHCB Medical Director of Behavioral Health and Psychiatry:

“The practice of medicine involves the clinician constantly interacting with the questions of what data is known, what data one can obtain immediately, and what needs to be done to gain the necessary data until a diagnosis and treatment plan can be developed. The shift to telehealth, including audio-only visits, does not change the interplay of those questions. Whether treating a person with a substance use disorder, a rash, or diabetes, one of my roles as a clinician is to determine when I have all the information that I need to make a safe and informed assessment and treatment plan or when I need additional data. Over the past year, the use of audio-only telehealth has allowed me to continue the assessment and treatment of individuals, including those in the medication-assisted treatment program, who would have otherwise been unable to come into the office for care. I am sure that this continuity of care has saved lives and continued to support recovery when that may not otherwise have been possible. The history of Vermont’s success in responding to the opioid crisis, in particular, has been predicated upon expanding access, reducing barriers, and building connections, while relying on clinicians to provide care with sound judgment. Telephone services expand access, reduce barriers, build connections, and continue to rely on sound clinical judgment.”

Zack Schwartz, MS, NP-C:

“The ability for our patients and clinicians to schedule audio-only visits has created an avenue for increased access and improved communication to address all aspects of medical care including advanced care planning, disease management and prognosis education, general health concerns, chronic disease management, and so much more. With audio-only visits now being scheduled and recognized as true visits, certain populations of patients who would otherwise be overburdened by physically coming to the office can now receive timely and effective medical care.

Audio-only visits have already demonstrated to be an efficient, safe, and valuable mechanism to improve health and wellness. Since communication is the foundation that patient-provider relationships is built on, the adoption of reimbursable audio-only visits only helps solidify this foundation and provides a new opportunity to improve upon a tool (the phone) that has been the backbone of communication for years.”

Kristen Gray, NP:

“I believe audio-only visits have allowed us to stay in contact with a larger portion of our patient population. We are able to connect with patients who aren’t technologically savvy, those who might not have computer or internet access, and also patients who require interpreter services. I have also had patients maintain their appointments more effectively. If they have forgotten about their appointment and we call to start the appointment, they are able to have the appointment wherever they are so it doesn’t become a missed opportunity for connection. Lastly, I believe it has played a role in keeping our staff safe. We have been able to triage and care for patients with illnesses concerning for COVID-19 without bringing them into the clinic to potentially expose health care workers, while also meeting the needs of the patients.”