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Telehealth changes

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be made permanent

By Julie Grace



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Executive Summary

In a seven-month period in 2020, Wisconsin approved licenses for 556 out-of-state health care professionals. These doctors, nurses, physician assistants and others served Wisconsin patients through telehealth, a form of virtual health care that has exploded in popularity and usage during the COVID-19 pandemic.

Through separate emergency orders, Gov. Tony Evers allowed for qualified health care providers licensed in other states to serve Wisconsinites through telehealth without obtaining a Wisconsin license. This means providers licensed throughout the country could administer health care through audio or video communication to Badger State residents without either party having to leave their office or home.

The Badger Institute was interested in determining how the policies contained in the emergency orders were working in practice and submitted an open records request to the Department of Safety and Professional Services (DSPS) for information on all out-of-state telehealth providers who practiced in Wisconsin from March 27 to Oct. 31.

The results were impressive and suggest that the policy should be made permanent. None of the 556 applications received by DSPS was denied for malpractice or disciplinary issues.

As Wisconsin continues to battle the COVID-19 crisis, we must ensure that the state has a robust and qualified health care workforce. Allowing out-of-state providers to more easily serve patients in Wisconsin through telehealth is a common-sense and, as indicated by the data, proven way of bolstering our workforce and ensuring that patients can safely receive quality care.

The increased practice of telehealth visits likely will continue beyond the pandemic — and so should this now-temporary policy. Wisconsin should permanently allow qualified out-of-state health care providers to serve patients through telehealth and should also adopt full licensure recognition for all licensed professions. An occupational license should not be a barrier for qualified professionals looking to practice and serve in Wisconsin — whether in-person or virtually.

Telemedicine Policy Has Benefited Thousands of Patients

Since the start of the COVID-19 pandemic, Wisconsin has temporarily allowed hundreds of medical professionals from other states to practice telehealth without first obtaining a state license. This means that a qualified health care professional licensed in Illinois, Minnesota or any other state

can serve Wisconsinites through remote care — a dramatic policy change that likely has benefited thousands of Badger State patients.

Applicants must have a valid license in another state, cannot be under investigation and must stay within their scope of practice. The number of out-of-state health care workers who have taken advantage of the policy change shows that it

is working and should be made permanent.

Wisconsin received 556 requests from out-of-state medical providers to practice telehealth between March 27 and Oct. 31, according to the Department of Safety and Professional Services (DSPS), the state agency that receives and processes professional licensing applications. All 556 — which were submitted by 44 different medical employers as well as a handful of individual practitioners — were approved by DSPS.

More than 200 of these professionals were doctors, but mental health providers — including nearly 40 social workers, 44 psychologists and 14 therapists — were also among the applicants. Other medical professionals who have served Wisconsinites through telehealth under the temporary policy change include physical therapists, chiropractors and nurses.

Many were from neighboring Minnesota, but other providers were from Texas, Ohio, Illinois, Arizona and elsewhere across the country.

It is too early to definitively measure the impact that these professionals have had on Wisconsinites seeking health care, including patients battling COVID-19, those with underlying health conditions who can't visit a doctor in person or those struggling with mental health issues. But based on the data, it's clear that Wisconsin residents have been better served in recent months with the additional 556 medical professionals providing quality care to patients who don't have to leave their home.

Given advancements in technology and the likelihood that COVID-19 will continue to have a long-term impact on the health care system, state policymakers should make this now-temporary practice permanent.

A New Way of Thinking About Health Care Delivery

Telehealth has always had benefits. It increases accessibility for residents living in areas experiencing health care worker shortages. It provides greater access and convenience to people living in rural areas where hospitals and medical offices might be sparse. And it mitigates the spread of diseases by minimizing the number of sick people visiting a hospital, clinic or doctor's office.

But what was once a convenient option for health care providers prior to COVID-19 has become an entirely new way of thinking about health care delivery in the presence of a pandemic.

People are clearly taking advantage of the service. A poll from the University of Michigan indicated that the percentage of adults ages 50 to 80 who used the service rose from 4% in May 2019 to 30% in June 2020. Another poll found

that the percentage of consumers who used telehealth increased from 15% in early 2019 to 28% in April 2020.

According to a survey of 500 U.S. consumers in March, only 25% of respondents had used telehealth services, but 59% were now more likely to do so.

Prior to COVID-19, regulations primarily restricted telemedicine to patients who lived in rural areas or required patients to first establish a face-to-face relationship with a doctor.

State licensing boards also have tried to stymie the growth of the practice in recent years, mostly by requiring doctors to first see patients in person. A prominent example of this occurred in 2015 when the Texas Medical Board claimed that Teledoc, a company that facilitates virtual medical visits, was violating state law. The company filed an antitrust suit against the board and won.

Telehealth Reforms in Other States

Other states already have taken advantage of the opportunity to make permanent certain temporary provisions meant to combat COVID-19 and to examine other ways to expand the practice.

Ohio's General Assembly recently passed legislation that, among other things, expands the types of medical professionals who can be reimbursed for telehealth services, allows mental health and addiction providers to serve patients through telehealth and authorizes dentists to perform certain services electronically without obtaining a separate permit. The legislation just received its second hearing in Ohio's state Senate.

In Tennessee, lawmakers introduced bills that would eliminate restrictions on where telehealth can take place and would allow a patient's home to be the "originating location" where a doctor and patient can establish a relationship. Other changes were made in regard to reimbursement for services and expanded the telehealth services that can be covered by insurance. Colorado Gov. Jared Polis in July signed similar legislation that also expanded the type of technology allowed in telehealth visits.

Even prior to the COVID-19 crisis, states such as Arizona and Pennsylvania made it easier for health care professionals — and all licensed professions — to receive a license when they move from another state.

Recognizing telehealth's convenience, cost savings and quality of care, many other states are looking at ways to expand this practice, as are the Wisconsin Department of Health Services (specifically for Medicaid coverage) and the federal government.

Conclusion

Policy changes made by Gov. Tony Evers' administration during the state emergency have made telemedicine more accessible to Wisconsinites for mental health, COVID-19 screenings, post-op visits and other important medical services. But regulatory challenges remain — notably restrictions on providing telehealth across state lines.

Even if patients travel to Wisconsin from a neighboring state to receive in-person care from a Wisconsin health care professional, they can't do follow-up visits with their doctor via telehealth (at least through the state's non-COVID policy). Or if Wisconsinites are on vacation outside of the state and wish to do a virtual check-in with their doctor, they are unable to do so under current regulations.

Wisconsin lawmakers should permanently allow out-of-state medical providers to provide telehealth services here, and they should look at other ways to expand the service in a cost-effective, accessible way. Not only will this help health care providers continue to serve patients during COVID-19 and future pandemics, but it will increase access to health care for all Wisconsinites for years to come.



About the author

Julie Grace is a Badger Institute policy analyst.