



Telehealth Coverage Survey Summary Report

Summary:

This summary report is based on the survey responses of 34 companies that write comprehensive health insurance policies in Wisconsin. The survey results in this report indicate that most companies (94%) expanded telehealth services in 2020 during the public health emergency (PHE). The greatest areas of expansion were behavioral health and Physical Therapy, Speech Therapy and Occupational Therapy (PT, ST, and OT respectively) where 88% of the companies reported expansion of these services. Some form of cost sharing was waived by 79% of the companies. Prior authorizations for telehealth were waived by 100% of the companies.

This survey also reveals that some technological impediments existed among the companies and that several experimented with creative measures in an attempt to bridge the technological divide between members and providers. The survey indicates that there are several state specific actions that the companies would either support or oppose in relation to expanded telehealth services. The survey also indicated that there is some sentiment not favoring reimbursement-related parity of telehealth. Eighteen of the 34 companies stated they were not seeking direct assistance from OCI.

The survey also indicates that the companies are evaluating and analyzing their experiences from 2020 before committing to and maintaining their expanded telehealth services beyond 2021.

A listing of “**Key Findings**” can be found in **Attachment 1** that accompanies this report.

Background and Survey Methodology

The main purpose of the survey was to establish a baseline understanding of the Wisconsin health plans' experiences and plans regarding the delivery of telehealth in the year 2020. The questions were designed to gauge and measure the degree of; services expanded, technological impediments, cost controls, access to providers, provider resources, intent to continue expanded telehealth services beyond 2021, state regulations and statutes perceived as barriers to the delivery of telehealth, state actions that a company would support or oppose in relation to telehealth, and any assistance the Wisconsin Office of the Commissioner of Insurance (OCI) could provide in relation to telehealth.

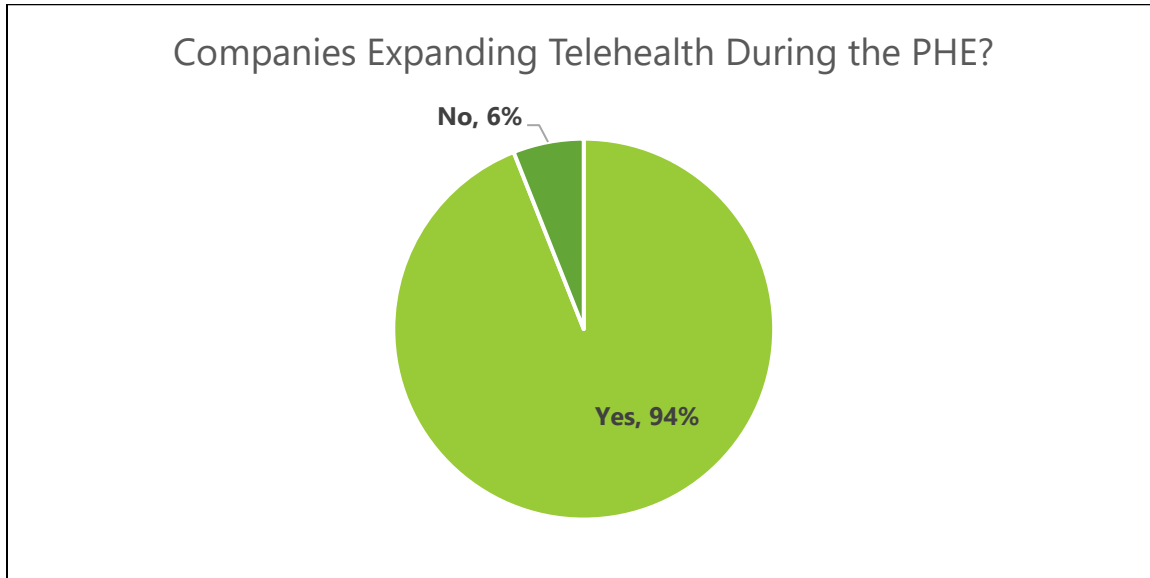
In late April 2021, a survey consisting of 18 questions that featured eight open-ended questions was sent to each of the 34 insurers offering comprehensive health plans in Wisconsin. The open-ended questions were optional responses and therefore, the results are not representative of all 34 companies. The 34 companies surveyed represent all insurers offering individual, small group or large group coverage or offering comprehensive health coverage in Wisconsin.

The OCI received 34 responses to the survey, and the analysis of the responses is contained within this report.

This survey represents the OCI's initial examination of telehealth services provided in Wisconsin.

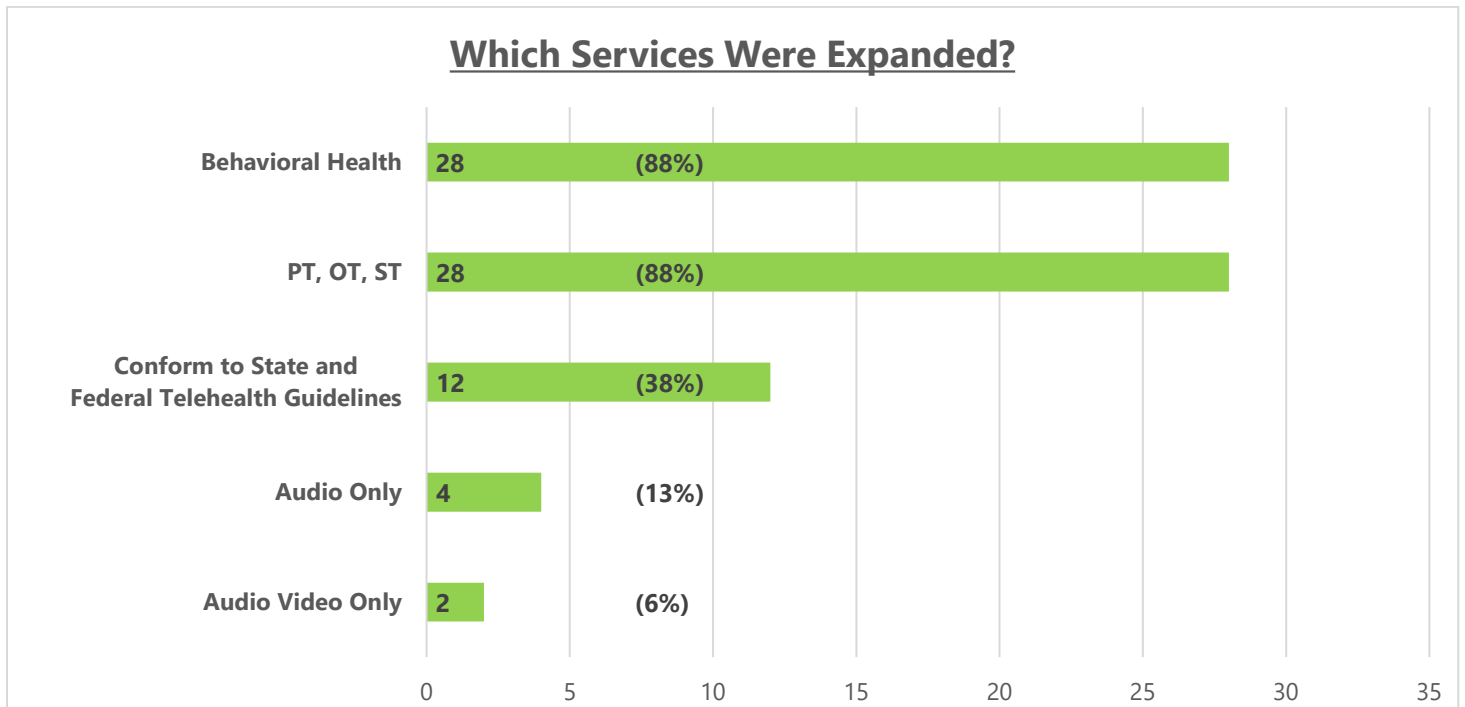
Part I. Expanded Telehealth Coverage

Did your company expand telehealth coverage during the public health emergency (PHE)? “Yes” or “No”



The number of companies that expanded telehealth services during the COVID-19, 2020 (PHE) were 32 (or 94%). While two companies (or 6%) indicated that they did not expand telehealth services during the same time period.

The companies that responded with “Yes” were then asked; Which Services were Expanded? *



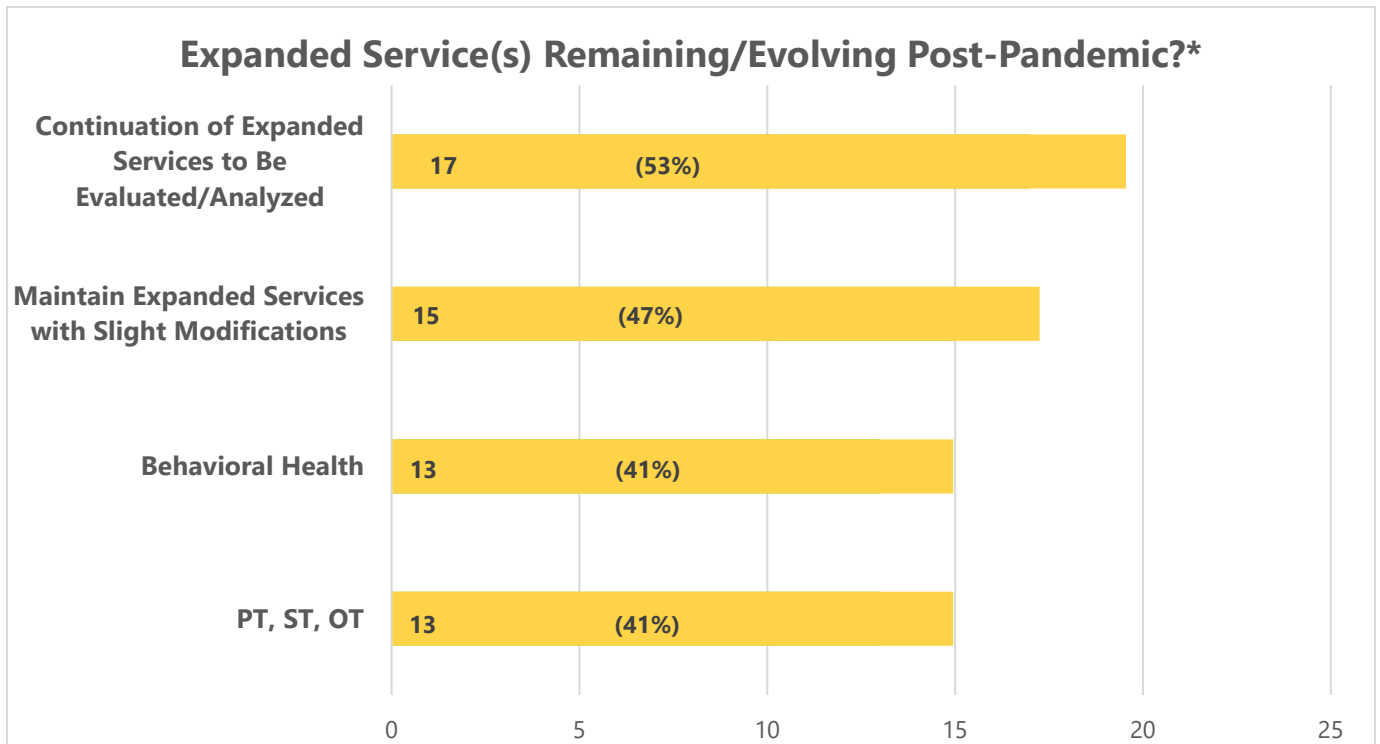
***Note:** The findings in above graph were based on “**optional comments**” offered by respondents of the surveyed companies. Companies could choose more than one category.

Twenty-eight companies (or 88%) expanded PT/OT/ST and Behavioral health services. Whereas 4 companies (or 13%) expanded audio-only while 2 companies (or 6%) expanded audio/video only services.

Additional types of expanded services as reported by select companies:

- Waived co-pays for telehealth services
- Home health, hospice, audiology services, virtual doula visits, and virtual autism skills training.
- Remote patient monitoring
- Detailed telehealth billing guidance

Which of the expanded service(s) will remain in place and/or further evolve post pandemic? *



***Note:** The findings in above graph were based on “**optional comments**” offered by respondents of the surveyed companies. Companies could choose more than one category.

Seventeen companies stated they will be evaluating and analyzing their operations to determine if continuation of expanded telehealth services will go beyond 2021.

Fifteen companies expect to maintain their expanded services with slight modifications.

The companies were asked, where does your company foresee the 2021 coverage of telehealth?

Response Options	Company Count	Company Percentage
Remaining About the Same	21	62%
Not Sure	6	15%
Increasing	5	15%
Decreasing	2	6%

Part II. Technology Related

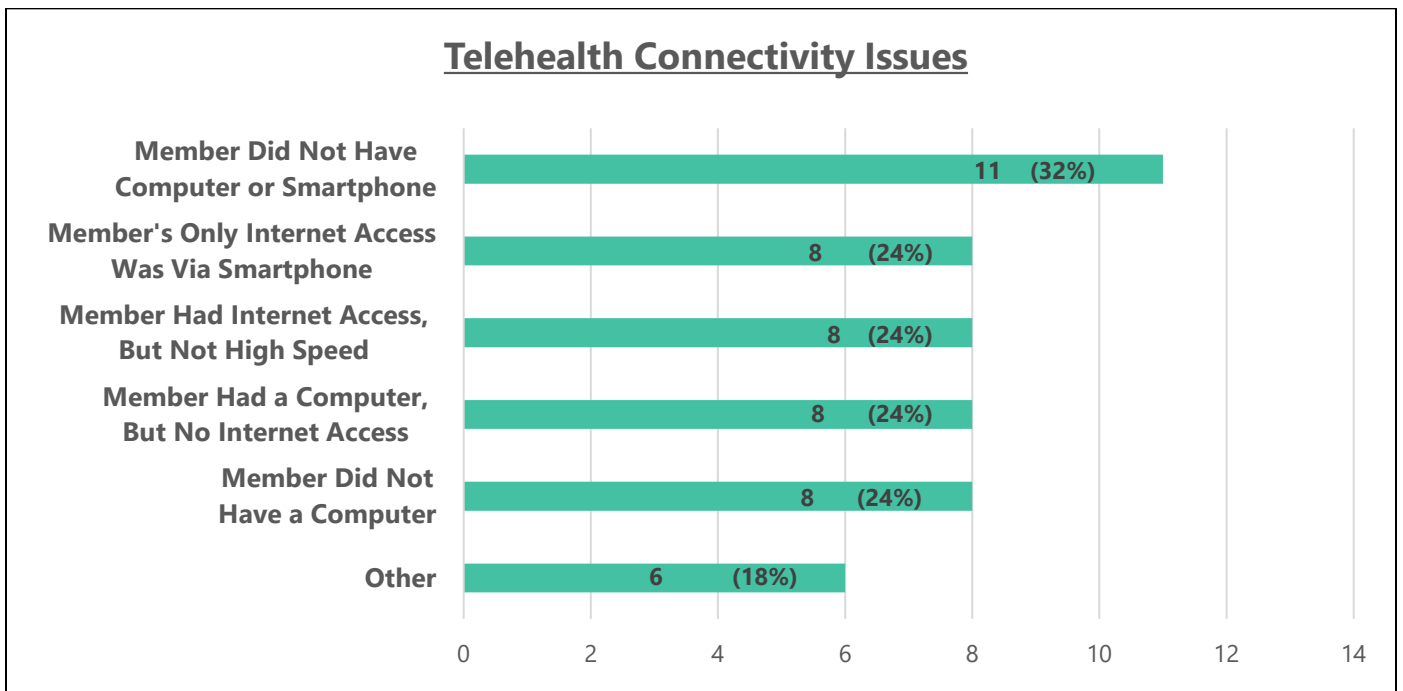
The companies were asked, does your company provide coverage for **"audio-only"*** telehealth services?

Response	Company Count	Company Percentage
Yes	31	91%
No	3	9%

***"Audio-Only"** refers to telephone calls, which are non-face-to-face evaluations by a Physician or other Qualified Health Professional.

The companies were asked if they could identify any telehealth connectivity issues during the public health emergency?

Response	Company Count	Company Percentage
Yes	15	44%
No	19	56%



Note: The findings in above graph were based on **"optional comments"** offered by respondents of the surveyed companies. Companies could choose more than one category.

Eleven companies (or 32%) found that some of their members did not have a computer or smartphone, 8 companies (or 24%) had members with internet access via smartphone, 8 companies (or 24%) found a member had internet access, but not high speed, 8 companies (or 24%) had members with a computer, but no internet access, and 8 companies (or 24%) had members who did not have access to a computer.

The “Other” category consisted of companies reporting members experiencing; loss of connectivity mid-appointment, telehealth provider syncing issues, and technology constraints such as no camera, etc.

Additionally, companies made these optional comments with respect to connectivity:

- ❖ “[company] supplied high volume clinics with smartphones that could be distributed to members in need. 150 smartphones with 90 days of free wireless coverage were deployed in this initiative.”
- ❖ “...members experienced...interrupted connectivity mid-appointment or failed connectivity preventing proceeding with a telehealth visit.”
- ❖ “Initially, patients struggled to navigate the technology supporting the telehealth visit itself and completing any pre-visit materials. However, this has improved as providers and clinics have improved the in-clinic workflows and updated technology to support telehealth visits.”

Part III. Reimbursement Related

Did your company waive cost-sharing for telehealth services during the public health emergency?

Response	Company Count	Company Percentage
Yes	27*	79%*
No	7	21%

***The companies reiterated that cost sharing was applied to COVID-19 related services and not to unrelated services normally covered by the health insurance policy.**

Did your company require prior authorization for telehealth during the public health emergency?

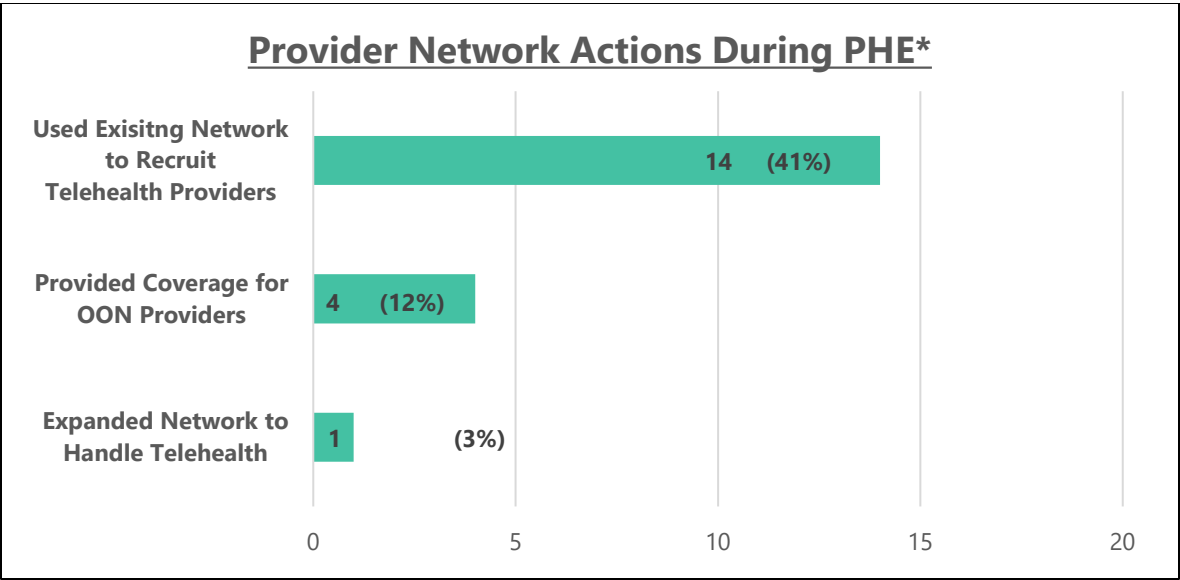
Response	Company Count	Company Percentage
Yes	0	0%
No	34	100%

Part IV. Network Questions

Did your company add any of the following to its network of providers in order to cover telehealth services in response to the public health emergency?*

Response	Company Count	Company Percentage
No additions were made	12	30%
Yes, we added PT/OT/ST and other therapies	7	17%
Yes, we added Behavioral Health	6	15%
Yes, we added Primary Care	6	15%
Yes, we added OBGYN and other Maternity	6	15%

***Note:** Companies could choose more than one category.

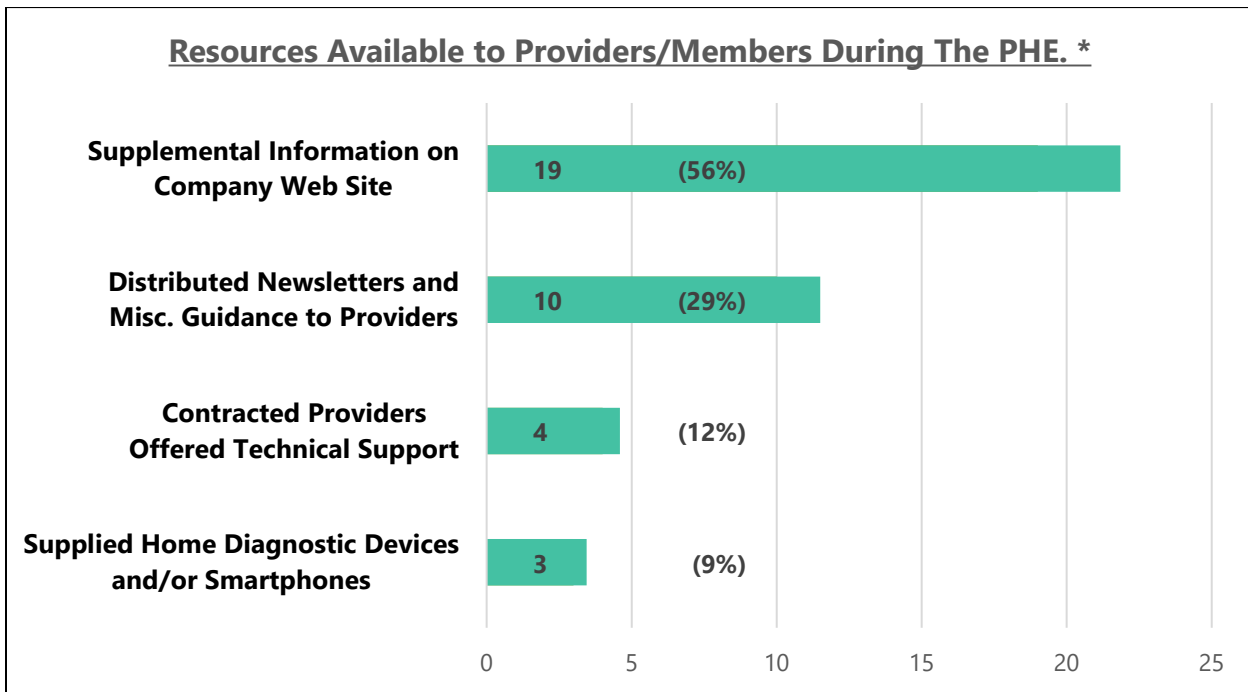


***Note:** The findings in above graph were based on “**optional comments**” offered by respondents of the surveyed companies.

Fourteen companies (or 41%) indicated they used their existing provider network to recruit additional telehealth providers. Four companies (or 12%) provided coverage for out of network (OON) providers during the COVID-19 pandemic. One company (or 3%) reported expanding its network to handle the demand for telehealth services.

V. Provider/Opportunities vs. Barriers Section

Provide a list of any resources your company made available to telehealth providers during the public health emergency. *

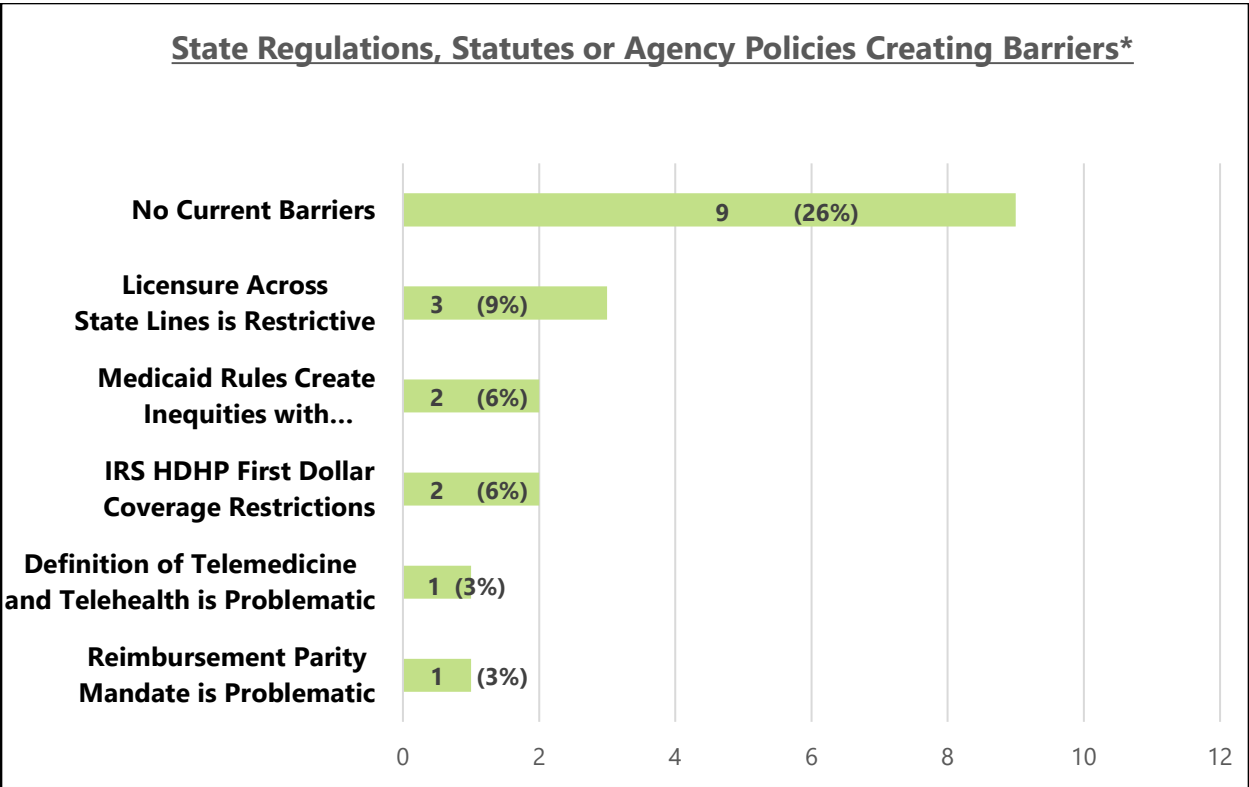


***Note:** The findings in above graph were based on “**optional comments**” offered by respondents of the surveyed companies.

Nineteen companies (or 56%) developed and posted supplemental information on their websites. Ten companies (or 29%) distributed newsletters and miscellaneous guidance to their providers. Four companies (or 12%) offered contracted providers technical support to facilitate telehealth services. Three companies (or 9%) supplied home diagnostic devices and/or smartphones to their members to facilitate telehealth services.

Are there any state regulations, statutes or agency policies that are a barrier to providing expanded telehealth coverage?

Response	Company Count	Company Percentage
Yes	11	32%
No	23	68%



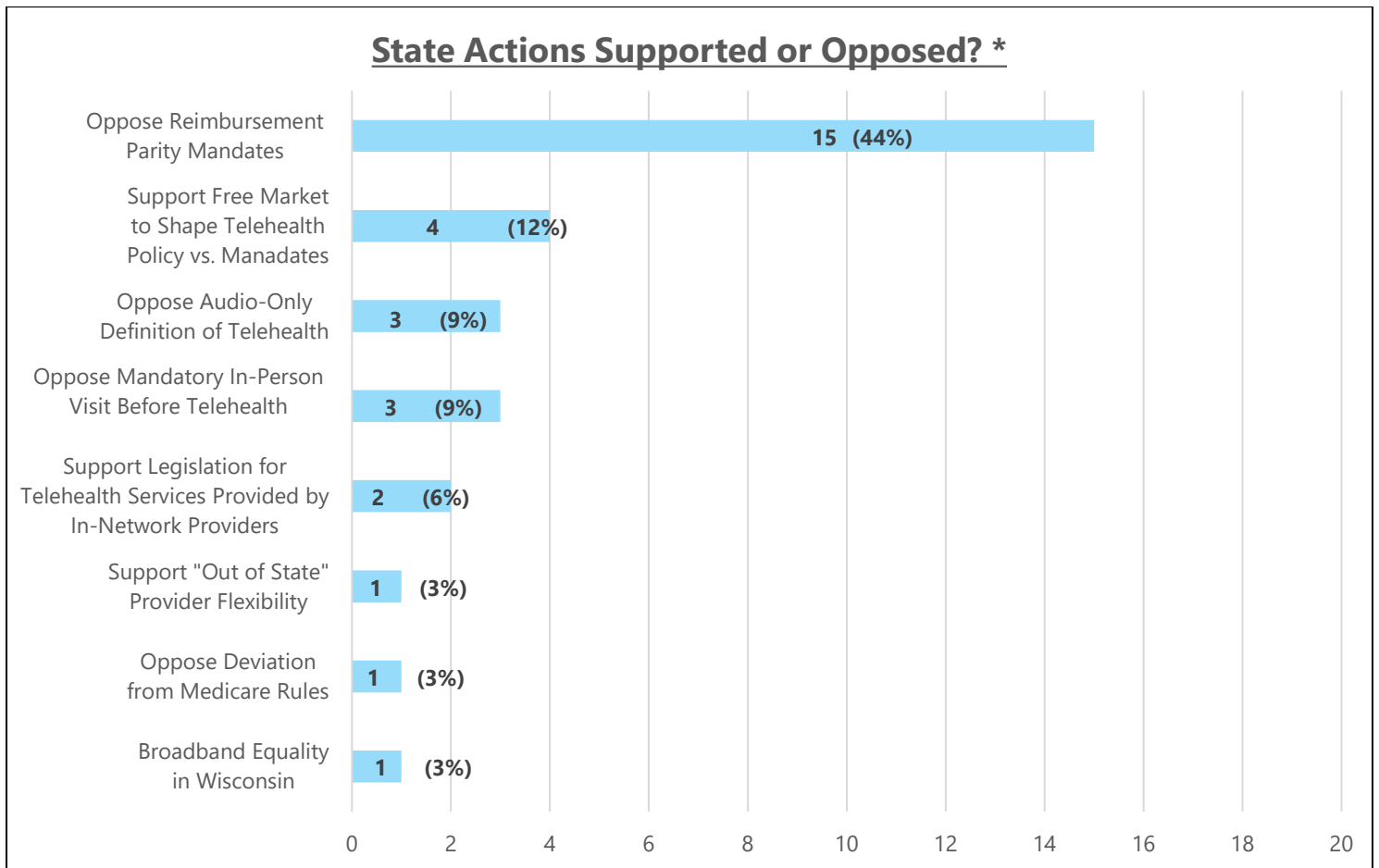
***Note:** The findings in above graph were based on “**optional comments**” offered by respondents of the surveyed companies.

Nine companies (or 26%) indicated that there were no current barriers to providing expanded coverage. Three companies (or 9%) suggested that licensure requirements across state lines is restrictive. Two companies (or 6%) felt that Medicaid rules create inequities with commercial coverage. Another two companies (or 6%) stated, the IRS HDHP first dollar coverage creates restrictions. One company (or 3%) felt that the definition of telehealth and telemedicine is problematic, another indicated that reimbursement-related parity is problematic.

Additional, select company responses/quotes with respect to potential state regulations, statutes or agency policies that are a barrier to providing expanded telehealth coverage are as follows:

- ❖ "...[company] does not believe telehealth requires a lot of regulatory intervention on the insurer side. Rather, Wisconsin policy should be focused on broad interpretations and providing flexibility so as not to stifle innovation in this area, as well as improvements to broadband in rural areas that make telehealth available to more people. The proposed telehealth parity mandate in the governor's budget causes a concern about cost."
- ❖ "Coverage parity sounds like a good idea but could become a barrier to health plans negotiating fair prices for telehealth services...the proposal would be improved by clarifying that a health plan may limit coverage of telehealth services to a network and that network does not have to be the same as the network it offers for in-person visits."
- ❖ "No current barriers. However, if CMS does not allow for the continued telehealth flexibility, we will be going back to the initial telehealth barriers that occurred prior to the pandemic such as providers needing to be licensed in the state and the requirement to have audio and video technology."
- ❖ "...[company] encountered laws in other states that prohibit telehealth providers from providing telehealth services to residents of the state unless the provider is licensed in that state. [It] support[s] the removal of such requirements, as it allows [It] to contract with telehealth providers and provide greater access to telehealth."

Are there any specific state actions that your company would support or would oppose relating to expanded telehealth coverage?*



***Note:** The findings in above graph were based on “optional comments” offered by respondents of the surveyed companies.

Fifteen companies (or 44%) oppose reimbursement parity mandates. Four companies (or 12%) support free market and less mandates to shape telehealth policy. Three companies (or 9%) oppose an audio-only definition of telehealth, another three oppose mandatory in-person visit before telehealth. Two companies (or 6%) support legislation for telehealth services provided by in-network providers. One company (or 3%) supports “out of state” provider flexibility for providing telehealth, another expressed support for broadband equality in Wisconsin.

Additional, select company responses/quotes with respect to potential state actions that companies support or oppose relating to expanded telehealth coverage are as follows:

Companies Indicating Support:

- ❖ “[company] support[s] flexibility for market-driven coverage and reimbursement for telehealth services and oppose actions by regulators and policymakers to mandate telehealth coverage and reimbursement rates...support[s] the flexibility of providers to incentivize use of telehealth services through voluntary reduced reimbursement for telehealth services...support[s] efforts to ensure that telehealth services, in order to be eligible for coverage and reimbursement, be of sufficient audio and visual fidelity and clarity to be functionally equivalent to a face-to-face visit...services provided via telehealth should be subject to the same standards as face-to-face visit including allowable provider types, service limitations, and authorizations.”
- ❖ “The company appreciates its partnership with the DHS in collaborative efforts to shape such policies that will become applicable post pandemic.”
- ❖ “[company] support[s] the ability of plans to contract with providers in ways that maximize quality and value for our members...telemedicine, telehealth, and virtual care services can be an innovative modality of care. However, the amount paid for these services versus in-person services should continue to be determined by our contracts with health care providers and the standards of care, not dictated by state law.”
- ❖ “[company] support[s] that any legislation requiring coverage of telehealth be limited to that provided by in-network providers.
- ❖ “[company] support[s] broadband equality throughout state and revisions of Medicaid policies to ensure Medicaid member[s] have equal access to telehealth as other lines of business.”
- ❖ “[company] would back state actions that would support and encourage innovations in the area of independent primary care and behavioral health service delivery via telehealth, and extend the opportunities presented by telemedicine to optimize the use of mid-level practitioners and off-site imaging.”
- ❖ “[company] would support legislation that continued to allow us to contract with telehealth providers based on factors such as high quality of services, service type, provider credentials, and desirable pricing that benefits our customers,

which does not require the coverage of all non-network and network providers at the same cost-sharing levels or pricing levels...[It] agree[s] and understand[s] that all insurers are required to provide telehealth services in compliance with the mental health parity requirements.”

- ❖ “...[company] support[s] most actions taken by states to expand telehealth access with the exception of reimbursement parity.”
- ❖ “...[company is] very supportive of out-of-state provider flexibilities continuing.”
- ❖ “...[company] would prefer that the market, [Its] external customers and other factors help [it] shape [its] policies around telehealth going forward rather than mandates that require [it] to provide telehealth services in areas [its] customers may not want or need.”
- ❖ “...[company] would support to continue expanded telehealth services. Additionally, [it] would support any action to allow for lower cost sharing of telehealth services (in relation to in-person visits).”

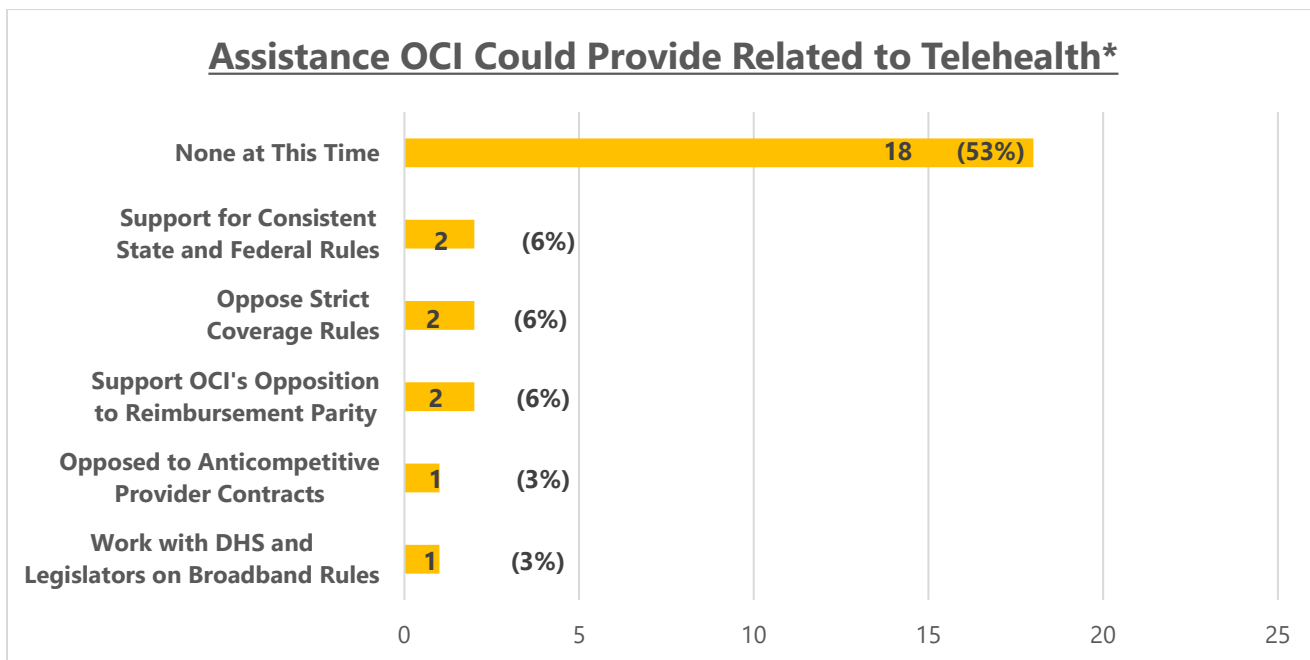
Companies Indicating Opposition:

- ❖ “...[company] oppose[s] efforts to require additional fees, at either the originating or distant site, for use of telehealth services and technology...reimbursement for telehealth, like other contractual arrangements, should be negotiated between the health plan and provider.”
- ❖ “...[company] would oppose any attempt to mandate that payment for telehealth be at the same rate as payment for in-person services.”
- ❖ “...[company] oppose[s] requiring reimbursement parity between in-person and telehealth services beyond the public health emergency...MedPAC, the group that advises CMS on Medicare coverage, also recently opposed continuation of payment parity for telehealth services until more studies on the impact to the cost of health care are completed, so as to protect Medicare enrollees and the government from unnecessary spending and fraud.”
- ❖ “...[company] would oppose any legislation or regulation that would increase barriers to utilization of telehealth or increase the cost of telehealth. These policies would prohibit [it] from realizing its full potential to improve access, care delivery and have an impact on the overall health care system. Specifically, [it] would oppose any mandates that fix reimbursement requirements or clinical requirements such as mandatory in-person visits before accessing telehealth.”
- ❖ “...[company] oppose[s] any move to include Audio-Only treatment into a definition of telehealth or to require coverage for Audio-Only encounters. This

creates a significant opportunity for fraud and abuse in billing practices and there is no practical means of validating the appropriateness of the encounter without requiring production and review of medical records.”

- ❖ “[company] would oppose efforts to replicate for telehealth the current cost structure of care delivered in a clinical setting. People are already being asked to pay too much for care that they cannot afford.”
- ❖ “[company] do[es] not want there to be required parity in reimbursement for all services.”
- ❖ “[company’s] business model aligns [its] commercial coverage with Medicare eligible benefits; this includes telehealth coverage. Given this approach, any state deviation from Medicare reimbursement rules would add further complexity and challenges to [its] provider contracts, billing, and reimbursement.”
- ❖ “[company] would strongly oppose audio-only care in most clinical situations because it cannot provide a clinically equivalent encounter with a patient. This point cannot be stressed enough. In all situations, the clinical needs of the patient, and thus the type of encounter must be primary in determining the appropriate avenue for care. Too much of the current discussion seems the other way around - focused on facilitating expanded telehealth from a provider perspective rather than addressing the patient's care needs.”

Identify any assistance OCI could provide to your company related to telehealth coverage going forward.*



***Note:** The findings in above graph were based on “optional comments” offered by respondents of the surveyed companies.

Eighteen companies (or 53%) indicated they did not need any assistance from OCI at this time. Two companies (or 6%) indicated support for consistent state and federal rules, another two (or 6%) reported it would prefer OCI to oppose strict coverage rules, and OCI should support opposition to reimbursement related parity. One company (or 3%) reported it would prefer OCI to oppose anticompetitive provider contracts, another would prefer if OCI would work with WI DHS and legislators on broadband rules.

Additional, select company responses/quotes with respect to potential assistance OCI could provide your company related to telehealth going forward are as follows:

- ❖ “...[company] would like to see OCI committed to taking costs out of the health care system which would enable health plans to lower premiums and get more people covered. Telemedicine and AI provide opportunities for innovation if lowering costs takes priority over protecting hospitals and health systems. [It]

ask[s] OCI to consider action or support of legislation that addresses health system consolidation and anticompetitive terms in provider contracts, as both these issues will certainly come into play as telemedicine evolves.”

- ❖ “Provide timely guidance, to the extent appropriate. Do not create strict coverage expectations as telehealth is evolving quickly and [It] need[s] flexibility to adapt with coverage, contracting, claim processing, quality concerns and appropriateness of certain services via telehealth, HIPAA expectations for contracted providers and their technology, etc.”
- ❖ “Review of any potential sharing of data relating to telehealth utilization.”

Attachment 1

Telehealth Survey

Key Findings:

(**Note:** Not all companies responded to every question.)

- 1.** During the COVID-19 pandemic 32 (or 94%) of the companies have expanded telehealth during the public health emergency (PHE).
- 2.** Amid the COVID-19 pandemic 28 out of 32 (or 88%) of the companies expanded both behavioral health and PT, ST, and OT telehealth services.
- 3.** Thirteen of the 32 companies (or 41%) stated that their expanded behavioral services along with expanded PT, ST, and OT services will remain post pandemic.
- 4.** Seventeen out of 32 (or 53%) companies indicated that they are evaluating whether to maintain expanded telehealth services post pandemic.
- 5.** Fifteen out of 32 (or 47%) companies have stated that they intend to maintain the expanded telehealth services with slight modifications post pandemic.
- 6.** Twenty-one of the 34 companies (or 62%) stated they see their 2021 coverage of telehealth "remaining about the same."
- 7.** Thirty-one of the 34 companies (or 91%) stated they provided coverage for audio-only telehealth services.
- 8.** Fifteen of the 34 companies (or 44%) stated they identified telehealth connectivity issues during the PHE.
- 9.** Twenty-seven of the 34 companies (or 79%) waived cost sharing for telehealth services related to COVID-19 during the PHE.
- 10.** Thirty-four (or 100%) of the companies did not require prior authorization for telehealth during the PHE.
- 11.** Fourteen of the 34 companies (or 41%) stated they used their existing network to recruit telehealth providers.

Key Findings (cont.)

- 12.** Nineteen of the 34 companies (or 56%) stated they provided supplemental information on their web site to assist navigating the expanded telehealth services.
- 13.** Three of the 34 companies (or 9%) stated they provided home diagnostic devices and/or smart phones to their members.
- 14.** Nine of the 34 companies (or 26%) stated they do not see any barriers with state regulations, statutes, or agency policies with respect to providing telehealth services.
- 15.** Fifteen of the 34 companies (or 44%) oppose and ask that OCI oppose reimbursement parity mandates attached to telehealth.