

Rise in Cost? Telehealth Study's Findings Questioned



Telehealth makes care easily accessible to more patients, especially those in remote or rural areas where medical facilities are not available. Aside from increasing patients' access to care, new research suggests however that use of direct-to-consumer telehealth services also may increase overall healthcare spending – contrary to the widespread expectation that such services would reduce costs.

The telehealth study, published in Health Affairs, found that healthcare spending was lower on a per-episode basis with direct-to-consumer telehealth visits – but that "the convenience of telehealth led to greater use of care and therefore increased healthcare spending." In particular, researchers found that that 88 percent of direct-to-consumer telehealth visits represented new utilisation, and that annual spending on acute respiratory illness grew by \$45 per telehealth user.

The findings have drawn criticism from analysts. According to Tracy Walsh, senior consultant for Population Health Advisor of Advisory Board, the findings may not be generalisable because of some limitations to the methodology used by researchers. For instance, the study's definition of direct-to-consumer telehealth includes interactions by telephone. But most state policies, industry groups and other vendors exclude phone conversations from their definition of "telehealth," in part because there is limited reimbursement for this type of service. Also, phone calls are often viewed as a standard complement to patient care rather than a discrete clinical encounter, Walsh says. This means the study findings aren't necessarily representative of real-time, audiovisual direct-to-consumer virtual visits, she adds.

Walsh also questions the assumptions made by the study authors regarding the duration of telehealth visits. The authors stated, "Since we did not have time estimates directly related to telehealth, we assumed that the time spent on a telehealth visit was the same as the clinic time for the average visit, so that the only time saved was travel time." In contrast, industry players point out that direct-to-consumer visits can increase provider efficiency by as much as 40 percent, Walsh says.

In addition, the study used data from a patient population with "generous commercial insurance," which may not be reflective of patient utilisation patterns for those enrolled in high deductible health plans or Medicare and Medicaid plans, according to Walsh.

Source: [Health Data Management](#)

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