

Telehealth in Minnesota

Promoting Innovation in the Delivery of Local Public Health Services



Telehealth is the use of technology to deliver healthcare, health information, or health education at a distance. One of the most common ways to offer telehealth is through live video, an online, two-way interaction between a provider and client using a basic webcam and speakerphone or a smartphone.

Advances in technology and telehealth mean that many public health and health care services can now be offered in everyday settings where individuals live, learn, work or play. This brings benefits in:

- ✓ Improved access, particularly in rural areas with workforce shortages;
- ✓ Cost efficiencies for the provider and client, including reduced travel times, better management of chronic illness, and less time off work or out of school;
- ✓ Improved quality (studies consistently show quality as good or better than in-person consultations); and
- ✓ Responding to patient demand.

Innovations in Minnesota's Local Public Health System

In the face of increasingly limited resources and as the needs of communities continue to evolve, local public health agencies are looking to telehealth for new ways to innovate service delivery and promote cost efficiencies. Telehealth opportunities currently being explored include but aren't limited to:

- Providing directly observed therapy (DOT) for tuberculosis (TB) and other infectious diseases to promote compliance with treatment while reducing barriers and costs;
- Enhancing evidence-based family home visiting programs;
- Expanding access to school health services led by licensed school nurses; and
- Increasing coordination of public health emergency preparedness and response activities.

Strengths and Limitations of Minnesota's Telemedicine Act

State statute requires Minnesota Health Care Programs to cover medically necessary services and consultations through telemedicine in the same manner as if delivered in person. Licensed health care providers who meet standard provider enrollment requirements and complete a Provider Assurance Statement (confirming their agency has protocol, appropriate technology and resources to deliver telemedicine) are eligible to bill. Per statute, billable telemedicine visits are limited to 3 per week per enrollee.

Public health nurses and registered nurses are among the licensed providers already recognized by state statute as eligible to bill for telemedicine. However, other public health staff who play a vital role in the delivery of billable services, such as certified community health workers who provide DOT or family home visiting, are not. For infectious disease prevention, benefits are further restricted by the 3 visits per week limit, as treatment for some diseases (e.g., TB) may require daily DOT for 6 months or more.

Removing Barriers to Telehealth Adoption

LPHA supports revisions to Minnesota's Telemedicine Act that allow local public health providers to bill more than 3 times per week for telemedicine services conducted for the purposes of infectious disease prevention and treatment and that expand the list of eligible providers to include certified community workers.

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