

RESOLUTION

Subject: Telemedicine Payment Parity  
Submitted by: Barren County Medical Society  
Referred to: Reference Committee

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WHEREAS, The Commonwealth presently experiences medical service challenges due to geographic boundaries, a rural populace, and a limited physician workforce; and

WHEREAS, the demand for Kentucky’s physician services will continue to increase as the population ages, as more people obtain healthcare coverage, and more treatments become available for chronic disease care; and

WHEREAS, Kentucky physicians practicing within the Starfield “medical home model” of an established and ongoing care relationship, help to provide the overwhelming majority of acute and chronic disease care services throughout the Commonwealth; and

WHEREAS, the opportunity to translate medical care into the virtual clinic extends an opportunity to overcome said challenges of geography, rural location, and physician workforce limitation; and

WHEREAS, Kentucky’s physicians are in the best position target and deliver chronic disease care management to its citizenry via the virtual clinic, when appropriate; and

WHEREAS, there is a fixed financial burden imposed on the Commonwealth’s physicians required to maintain the physical plant necessary to provide ongoing care services that an established patient care relationship requires for office-based practice in the examination, consultation, and ongoing face-to-face follow-up care; and

WHEREAS, Kentucky insurance carriers have been resistant to reimburse for online care of the well-established patients of Kentucky’s physicians; and

WHEREAS, there are presently no standard of payment for ongoing, episodic, virtual electronic care within the established physicians-patient relationship—where, “established” means a bona fide relationship that begins with a physician examination of the patient and regular/routine follow-up as medically dictated; and

WHEREAS, the virtual clinic has been demonstrated to be much more cost effective than traditional face-to-face standard visits with similar level of quality outcomes, as well as, observation that insures remained sustainable; now, therefore, be it

2016-3.2

RESOLVED, that the Kentucky Medical Association adopt and advocate for a policy of telemedicine payment parity between virtual visits and in-office visits to Kentucky physicians, where a bona fide established and ongoing care relationship exists, such that, the reimbursement is equivalent for online care and face-to-face care.