



KANSAS ACADEMY OF  
FAMILY PHYSICIANS  

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CARING FOR KANSANS

2017 SPECIAL COMMITTEE ON HEALTH  
Kansas Academy of Family Physicians  
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Chairman Hawkins and Members of the Committee:

Thank you for the opportunity to submit these comments regarding **telemedicine** on behalf of the Kansas Academy of Family Physicians (KAFP). Our organization represents over 1,660 active, resident, student and life members across the state. The mission of KAFP is to promote access to, and excellence in, health care for all Kansans through education and advocacy for family physicians and their patients.

While some of the concepts of telemedicine sound simple and you may hear some recommendations that sound simple, we believe this is a complex issue. We believe you are wise to give it thoughtful study and we want to highlight some key issues for your deliberations.

A statement from our national organization, the American Academy of Family Physicians (AAFP), provides many significant issues to consider: *“AAFP supports expanded use of telemedicine as an appropriate and efficient means of improving health, when conducted within the context of appropriate standards of care. Payment models should support patient freedom to choose how they wish to receive services. Additionally, payment models should support the physician’s ability to direct the patient toward the appropriate service modality in accordance with the current standard of care.”*

### Principles by which we believe telemedicine should be practiced

We recommend starting with core principles, which should underpin the implementation of telemedicine in Kansas. Like all other patient care, care delivered via telemedicine should:

1. Place patient welfare first
2. Maintain acceptable & appropriate standards of practice
3. Adhere to recognized ethical codes governing the medical profession
4. Properly supervise non-physician clinicians
5. Protect patient confidentiality

Based upon these principles, we believe that those who provide medical care electronically should:



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- Establish an appropriate physician-patient relationship including informed consent, identification, verification & authentication of location for both parties, and disclosure of applicable credentials.
- Have an emergency plan for referral to an acute care facility or ER.
- Provide continuity of care in which a patient can seek follow-up care or information.
- Establish a medical record that includes copies of all patient-related electronic communications, prescriptions, laboratory and test results, evaluations and consultations, records of past care, informed consent and instructions. Such record must be accessible and documented for both the physician and the patient consistent with all established laws and regulations governing patient healthcare records.
- Meet or exceed applicable legal requirements of medical/health information privacy.
- Protect transmissions, including patient e-mail, prescriptions, and laboratory results securely.
- Implement measures for prescribing to uphold patient safety in the absence of tradition physical examination, guaranteeing that the identity of the patient and provider is clearly established and that detailed documentation for the clinical evaluation & resulting prescription is enforced and independently kept. Integration with e-Prescription services that help assure informed, accurate and prevention of errors are preferable.
- Use the same ethical and professional standards for care provided electronically as s/he does for in-person care.

### **Coverage and Reimbursement**

Differences in payment and coverage for telehealth services in the public and private sector, as well as different policies across states, remain a barrier for widespread telehealth use. States have enacted various policies related to Medicaid and, in many cases, private payers. State policy typically determines what constitutes telehealth; the types of technologies, services and providers that are eligible for reimbursement; where telehealth is covered and how; and other guidelines. Parity of payment for telehealth and in-person services should be carefully considered, including these issues:

- Use of new technology
- Equity of access
- Records
- Data security

### **Licensure**

With technology's ability to span state borders, provider licensure portability is a key issue that states are examining to expand access and improve efficiency in the existing workforce. Policymakers are addressing practice across state lines through various mechanisms,



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including reciprocity with other states and interstate compacts. Kansas is one of 17 states that has an Interstate Medical Licensure Compact, which enables full licensure authority.

**Attachments:**

- AAFP Position on Telemedicine
- Model Policy for the Appropriate Use of Telemedicine Technologies in the Practice of Medicine
- Shared Principles of Primary Care