To help suppress the spread of the coronavirus, the U.S. government and many private insurers have relaxed limits on coverage for virtual doctor visits during the pandemic. As an increasing number of consumers receive medical care remotely, it’s important to understand the basics of telemedicine, whether insurance covers these services, and how the privacy of your personal and health-related information can be protected.

Telemedicine use and delivery

Outside of a pandemic, virtual doctor visits—those conducted via live, two-way video using a smartphone, tablet or computer—are used for appointments that don’t require a physical examination or testing. They are frequently relied on for medication management with a prescribing physician; follow-up care for chronic conditions; to review test results; for pre-operative consultations; to diagnose common conditions like pinkeye, colds and flu; for dermatological issues; and for mental health care.

There are two telemedicine models. In the first, you meet virtually with your own doctor, either through a link sent by text or email that takes you to a telemedicine video conferencing platform, or through a patient portal you log in to.

In the other model, you meet with a doctor that is part of a virtual healthcare company, such as Teladoc Health, MDLIVE or Doctor On Demand. Anyone can access care through one of these services. The cost of a visit depends on whether you pay out of pocket or, if insured, whether your insurer has contracted with any of these companies to provide care as part of your health plan.

Telehealth pros and cons

The advantages of virtual doctor visits include:

**Convenience:** Older patients with mobility issues and people with disabilities may find it far easier to receive care that doesn’t require travel. Workers don’t have to take as much time off for medical appointments. Virtual visits also make it easier for caregivers and long-distance family members to participate (if the patient agrees).

**Speed:** Virtual appointments typically are brief—er. Shorter consultations not only free up patients’ time, they also enable doctors to see more patients in a day, potentially reducing the wait time for an appointment.

**Cost savings:** In many cases, a costly emergency room visit can be avoided if a patient can consult with a doctor virtually to get a diagnosis or prescription.

While the benefits can be significant, virtual doctor visits are not feasible for everyone.

Some patients—particularly those who are older, have low income, or live in rural areas—may not have the technology necessary for virtual services. Some steps have been taken to overcome these barriers—for example, Medicare is now allowing appointments by audio-only for those who don’t have a smartphone, tablet or computer screen, and the Lifeline program (https://www.lifelinesupport.org/), through which qualifying low-income consumers can get discounted phone or internet service, has loosened some of its requirements—but there will still be consumers for whom telemedicine isn’t an option.

Private insurance coverage

Many insurers have made voluntary changes to their telemedicine policies during the pandemic (for example, expanding the availability of virtual services and reducing or eliminating cost sharing).

Under normal (non-crisis) circumstances, whether your private insurance covers virtual visits and other telemedicine services depends in part on state law. Generally, in any of the dozens of states with “parity” laws, any healthcare provider eligible for payment by your insurance for an in-person visit would also receive payment for a virtual visit.

However, some states have additional rules. For example, some require an initial in-person visit to establish a patient relationship before a virtual appointment will be covered. And other states allow small group plans to opt out of telemedicine coverage entirely. For detailed information about each state’s laws, use the National Telehealth Policy Resource Center’s (NTPRC) online tool (https://www.cchpca.org/telehealth-policy/current-state-laws-and-reimbursement-policies).

Even in states without parity laws, many—if not most—health insurance companies voluntarily cover telemedicine. Among those that do, coverage often is the same regardless of how the covered services are delivered. For example, if mental health services are covered under your insurance plan, you would most likely be covered for them both in person and virtually.

Still, the insurance company could im-
pose various requirements and exclusions on telemedicine coverage—for example, allowing video consultations for some conditions but not others, or not reimbursing all virtual healthcare companies at the same level (in-network versus out-of-network).

The bottom line: To avoid an unpleasant surprise in the form of an unpaid claim or a bill for the balance not covered by insurance, you should understand what your insurer’s requirements and exclusions are related to virtual healthcare coverage. Verify coverage directly with your insurance company before seeking service. Typically, you can do this by checking the summary of plan benefits and coverage through your online account, or by calling the member/customer service number (check your medical card, a recent bill or statement, or search online).

Government-sponsored healthcare programs

The federal government establishes the policies and practices for the healthcare programs it funds.

As of March 6, and lasting “for the duration of the COVID-19 Public Health Emergency,” Medicare, the federal health insurance program for seniors and some younger disabled people, is covering telemedicine services in all parts of the country, and from any site, including patients’ homes (https://www.medicare.gov/coverage/telehealth). For more information, see the Medicare Telemedicine Health Care Provider Fact Sheet (https://www.cms.gov/newsroom/fact-sheets/medicare-telemedicine-health-care-provider-fact-sheet), or contact Medicare directly (https://www.medicare.gov/Contacts/).

Medicaid, the public health insurance program for those with low income, also provides reimbursement for some telemedicine services. However, each state has the flexibility to determine exactly what it will cover and for whom. Consequently, Medicaid reimbursement (the amount paid by the program to the health service provider) varies widely among states and can influence the availability of virtual visits to Medicaid beneficiaries. To find out which telemedicine services are Medicaid-eligible in your state, visit the NTPRC’s website (https://www.cchpca.org/telehealth-policy/current-state-laws-and-reimbursement-policies), or contact Medicaid directly (https://www.medicaid.gov/about-us/contact-us/index.html).

The Department of Veterans Affairs (VA) offers video appointments for veterans receiving VA medical benefits. Learn more at the VA Telehealth Services website (https://telehealth.va.gov/), or contact the VA directly (https://www.va.gov/landing2_contact.htm).

Even those without medical insurance might be able to access telemedicine services, through community health clinics. Find a low-cost community health center near you (https://www.findahealthcenter.hrsa.gov/).

Telemedicine and your privacy

While virtual doctor visits offer some advantages over in-person appointments, telemedicine raises some unique privacy concerns.

The Health Insurance Portability and Accountability Act (HIPAA) is the primary law that guides the privacy and security of patient health information. To allow healthcare providers to easily connect with patients during the pandemic, the
U.S. Department of Health and Human Services has relaxed some HIPAA restrictions (https://www.hhs.gov/hipaa/for-professionals/special-topics/emergency-preparedness/notification-enforcement-discretion-telehealth/index.html). For example, before the pandemic, video platforms used by healthcare professionals had to be encrypted and secure to comply with HIPAA security requirements. Since the pandemic started, platforms like Zoom, Skype and FaceTime all are allowed to operate without the same requirements for patient privacy, as long as others cannot view the meeting.

The security waivers are in effect until the pandemic ends. While the waivers are active, health-care providers are urged to take steps to keep visits as secure as possible, including using complex meeting IDs, passcodes known only to the patient and provider, and video encryption. Providers also must communicate any privacy risks to the patient. Healthcare providers and video conferencing companies still must protect patient data as it flows between doctors and patients across online platforms.

As for what you can do to help protect your personal data during a virtual doctor visit, ensure your Wi-Fi connection is secure (https://www.wired.com/story/secure-your-wi-fi-router/); conduct your appointment in a private location, where your personal and medical information can’t be overheard; and avoid using public-facing video sharing platforms (Facebook Live, for example) for medical visits, since anyone can view the video feed, and it could be recorded.

Consider urging your government representatives to support legislation aimed at protecting Americans’ privacy during the pandemic, such as the Public Health Emergency Privacy Act (S 3749) (https://www.consumer-action.org/action/legislation/public-health-emergency-privacy-act).

About Consumer Action

www.consumer-action.org

Through education and advocacy, Consumer Action fights for strong consumer rights and policies that promote fairness and financial prosperity for underrepresented consumers nationwide.

**Consumer advice and assistance:** Submit consumer complaints to: https://complaints.consumer-action.org/forms/english-form or 415-777-9635. (Spanish-language complaints can be submitted to: https://complaints.consumer-action.org/forms/spanish-form/.)

Our hotline accepts calls in Chinese, English and Spanish.

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