

# Telehealth for West Virginians in Rural Areas

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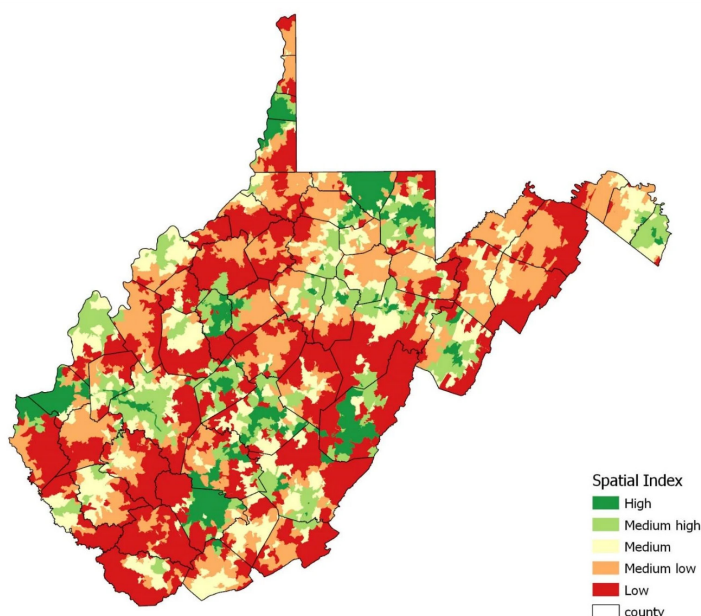
West Virginians in rural areas face limited healthcare access due to significant travel times and a general shortage of medical providers and staff. Telehealth has been suggested as a beneficial alternative to in-person care. This Science and Technology Policy Note addresses the state of telehealth in West Virginia and policy options for improving healthcare access.

## Telehealth Access in West Virginia

Telehealth provides healthcare remotely through telecommunications technology, allowing patients to consult with healthcare professionals without physically visiting a clinic or hospital. There are three major types of telehealth:

- Synchronous: a patient corresponds with a physician over video or phone
- Remote Monitoring: a patient has a device that monitors aspects of their health at home and sends their health data automatically to their physician

## Physician-to-Population Area Ratio



Source: <https://link.springer.com/article/10.1007/s12061-022-09472-0>

## Research Highlights

- West Virginians have limited access to in-person healthcare due to significant travel times to healthcare facilities and a shortage of healthcare providers.
- The lack of broadband access in West Virginia makes telehealth video-conferencing less attainable, and the state's Medicaid policy does not cover audio-only visits.
- Policy options include reforming Medicaid policy to include reimbursement for audio-only visits and improving broadband access in rural areas of the state.
- Asynchronous: a patient visits a care facility in person and has follow-up appointments over video or phone

Areas with increased access to telehealth typically show improved outcomes and increased patient compliance (as much as 20%). However, there are challenges that render telehealth inaccessible for some populations, such as the lack of broadband access across many parts of the state. West Virginia is ranked 50th in the nation for internet availability. Recent funding initiatives will improve broadband access, but implementation will take time, and, due to high poverty levels, available internet may still be unaffordable for some patients.

## Current Telehealth Access and Reimbursement Policies

In 2017, the legislature passed a bill to allow for some medications to be prescribed through telehealth. Not all bills have passed, however. For example, a bill to provide parity in insurance reimbursement for telehealth and in-person visits passed the Senate in 2021 but did not pass the House.

Federal Medicaid and Medicare programs currently cover video-based telehealth but do not reimburse audio-only telehealth visits. This policy creates barriers for individuals who lack internet access for video-conferencing and for West Virginia's aging population.

## West Virginia Telehealth Policies Compared to Other Appalachian States

State	Policies	% of Population with Broadband	Medicare / Medicaid Telehealth Status
West Virginia	Telehealth can be provided for nonresidents temporarily in West Virginia in addition to the telehealth services available for residents in the state.	82.2%	Audio-only visits are not covered by Medicaid or Medicare
Ohio	Providers in Ohio can offer telehealth services to patients living outside the state in addition to the telehealth services available for residents in the state.	87.6%	Audio-only psychotherapy visits covered by Medicaid
Kentucky	Professional licensure boards are not allowed to prohibit telehealth services to residents temporarily outside of the state and nonresidents temporarily in the state	85.6%	Audio-only visits covered by Medicaid
Tennessee	Private insurers must cover telehealth visits and coverage parity with in-person visits are required	85.7%	Audio-only visits covered by Medicaid when broadband is unavailable

### Early Detection and Improved Access through Telehealth

Telehealth has been shown to improve patient continuity in attending medical care appointments. This outcome is vital, as it allows physicians to more effectively monitor patient health and creates a greater likelihood of effective disease management.

Additionally, mental and behavioral health have been of increasing concern in rural populations. For example, as of 2023, West Virginia is listed as the 10th worst state for mental illness among adults. Increased access to telebehavioral health services can improve the opportunity for more members of the rural population to receive mental health care, thereby offering an opportunity for improved mental health outcomes.

Finally, telehealth services have been shown to reduce health workforce requirements, which is important as West Virginia faces a health provider shortage.

### Policy Options to Reduce Telehealth Barriers in West Virginia

**Reforming Medicaid policy to include reimbursement for audio-only visits.** Although Medicare has reimbursed some audio-only visits since the COVID-19 pandemic, these policies are still listed as only temporary. Since

Medicare is a federal program, the policy would need to change at the federal level. Medicaid policy can be modified at federal and state levels.

**Improving broadband access for West Virginia rural residents.** Broadband reform is a much-needed measure to improve access to care among rural West Virginians. Particularly, broadband support is needed in areas that are especially far from healthcare facilities.

**Allowing residents to access telehealth services while temporarily out of the state.**

**Reimbursing healthcare providers for telehealth visits at the same amount they receive for in-person visits.**

This Science and Technology Note was written by Robin Olivario, PhD Candidate in Neuroscience at WVU, on behalf of the Bridge Initiative for Science and Technology Policy, Leadership, and Communications. Please see <https://scitechpolicy.wvu.edu/> or contact [scitechpolicy@mail.wvu.edu](mailto:scitechpolicy@mail.wvu.edu) for more information. This Science and Technology Note is intended for informational purposes and does not indicate support or opposition to a particular bill or policy approach.