

HR 5190

Specialty Treatment to Access and Referrals Act of 2019 (STAR Act)

BILL SPONSORS:

Rep. Harder (D-CA), Rep. Young (R-AK), Rep. Fortenberry (R-NE), Rep. Torres (D-NM), Rep. Steube (R-FL)

INTENT OF THE BILL:

To amend the Public Health Service Act to provide assistance for health centers and rural health clinics to implement electronic provider consultation and related telemedicine services.

The STAR Act's findings section concludes that E-Consult services have the potential to improve access to specialty care at relatively low costs, however there is a need for additional research to determine best practices and processes for E-Consult services and validate its impact on access to specialty medical care, costs and clinical outcomes.

E-CONSULT SERVICES AND RELATED TELEHEALTH ASSISTANCE PILOT PROGRAM

KEY DEFINITIONS

<p>E-CONSULT SERVICE</p>	<p>Synchronous or asynchronous, consultative, health care provider-to-health care provider communications that occur within a shared certified electronic health record (EHR) technology or secure Internet-based platform and are primarily intended to provide specialty expertise to treating clinicians (who are often primary care providers) without requiring a direct interaction between the patient and the medical specialist. Such consultation ordinarily involves a treating clinician sending information regarding the patient and a consultation request to a medical specialist who may then respond in any of a number of ways, including providing requested feedback, asking for additional information, recommending certain studies or examinations, or initiating the scheduling of an appointment.</p>
<p>TELEHEALTH</p>	<p>Use of electronic information and telecommunications technologies (including videoconferencing, the internet, store-and-forward imaging, streaming media, and terrestrial and wireless communications) to support and promote long distance clinical health care, patient and professional health-related education, public health, and health administration.</p>
<p>RELATED TELEHEALTH SERVICES</p>	<p>Telehealth services arising out of or incident to an E-Consult service, such as laboratory tests, diagnostic imaging, or a subsequent interaction between a medical specialist and a patient.</p>

PILOT GOALS

HR 5190 would allow the Secretary to award up to \$12,000,000 total in grants to eligible health center controlled networks, health centers and rural health clinics between the fiscal years of 2021 through 2025 to conduct pilot projects to implement and test the effectiveness of E-Consult services and related telehealth services.

The goal of the pilot would be as follows:

- “Improvement in patient access to specialty care.
- Reduction in specialty care patient wait times.
- Reduction in patient specialty referrals.
- Reduction in patient miles traveled for specialty care consultations.
- Increased support for primary care providers as demonstrated by job satisfaction measures.
- Increased patient satisfaction as demonstrated by quality surveys.
- Health care cost savings.”

GRANT LIMITATIONS

The grant award could be for a term of no more than 5 years, and not exceed \$200,000 for each center or clinic facility location, or in the case it is awarded to an eligible health center controlled network, it cannot exceed \$5,000,000.

The grant funds would only be allowed to be used for the following:

- “Conducting assessments of a participating facility’s infrastructure (such as broadband, equipment and software), clinical objectives, and staffing plans.
- Developing and assisting in the execution of equipment and software procurement, defining clinical objectives, developing adequate staffing plans, and implementing E-Consult services and related telehealth services program plan.
- Training participating facility staff to properly utilize technology and implement programs.
- Providing clinical workflow training to support program implementation.
- Providing integrated certified EHR technology capabilities to support live video (where applicable) and E-Consult services.
- Integrating the facility with live E-Consult service support providers and networks that meet the patient goals of the network, center, or clinic.
- Procuring appropriate information technology and undertaking minor alterations of physical space.
- Carrying out the pilot.”

A health center or rural health clinic can qualify to participate in the pilot if they demonstrate that the location lacks sufficient access to medical specialty care and has not already implemented an E-Consult and related telehealth services program. See [bill text](#) for other requirements related to the health center demonstrating their capacity to take on an E-Consult pilot program and application requirements.

EVALUATION AND REPORT

Not later than 180 days after the date of completion of the last pilot project, the Secretary would be required to submit a report to Congress including an evaluation on the project that addresses:

- “An overview of supported projects and identification of areas of success and failure.
- Policies, practices, and organizational approaches that either facilitate or impede the effective use of E-Consult services.
- Relative effectiveness of consultations provided by Medical Specialists in improving outcomes, quality of care and efficiency with respect to different specialties, clinical conditions, complexity, patient types or other issues.
- The extent to which information shared in the E-Consult services process is sufficient, accurate, and actionable in order to effectively facilitate care improvement, and whether such bi-directional information flows can be standardized.
- The extent to which E-Consults facilitate continuity of care.
- Any issues arising related to maintaining the privacy of personal health information, ensuring cybersecurity, and other information security issues.
- The extent to which E-Consult services contribute to improved health outcomes and metrics that can facilitate such evaluation.
- Any unintended or adverse results from utilizing E-Consult services.”

CCHP ANALYSIS

It is important to note that this bill would only allow (not require) the Secretary to award grants under the E-Consult pilot. Also to note, the Centers for Medicaid and Medicare Services began reimbursing for interprofessional internet consultation in Calendar Year 2019, which does allow for consultations between professionals performed via communications technology such as the telephone or internet, and includes CPT codes 99446-99449, 99451 and 99452.