Insurers, Patients Willing to Pay for Online Visits

BY MARY ELLEN SCHNEIDER

BOSTON — Experts have been touting the potential of virtual office visits for years, but the concept may finally be hitting the mainstream now that technology, reimbursement, and patient demand are starting to catch up.

Patients are willing to pay a reasonable fee to get advice from their physician without coming in to the office, and some will even transfer to a new practice to get this service, said Dr. John W. Bachman, a consultant in family medicine at the Mayo Clinic in Rochester, Minn. The option to go online for a medical consult is especially appealing for poorer patients who can't afford to take time off from work to get to the doctor's office, Dr. Bachman said at the annual meeting of the American Academy of Family Physicians.

"The biggest problem with doctors is that we think our patients want to be there," Dr. Bachman said. "The fact is,



'The fact is, your patients will pay \$35 not to see you.'

DR. BACHMAN

your patients will pay \$35 not to see you."

That's been the experience at the Mayo Clinic in Rochester, where they have been offering online consultations to established primary care patients for \$35. The pilot project, which began in July 2007, uses an online patient portal to link patients and physicians. Through the portal, which was developed by Medfusion Inc., patients choose a physician and enter information about their complaint through a structured online questionnaire. They can also include a note to the provider and upload photos. "The patient has the skills to do this," Dr. Bachman said.

Physicians receive an e-mail notification when a consult request is made. The portal allows them to bring up templates for common conditions, such as advice on sinusitis or the H1N1 virus. The portal also includes patient education materials. Physicians can also send links and attachments to the patient.

In the first 2 years of the pilot, more than 4,200 patients registered on the site. Mayo physicians provided approximately 2,531 online visits, and billings were made for 1,159 of these. Although the registration figure is low, the number of online visits and billings are the highest reported in the literature, Dr. Bachman said.

More than 70% of the patients who participated in online visits were women, including some who were seeking consults on behalf of their children. Of the 293 conditions that were addressed during the online visits, the most frequent condition was sinusitis, with depression and back pain also coming in at the top

of the list. Doing online consults can help keep the worried well out of the office, leaving time for those patients who need to come in, Dr. Bachman said.

The preliminary analysis of the first 2 years of the Mayo pilot found that online consults saved a trip to the office for about 40% of patients and saved a phone call to the office for 46% of patients. The rest of the time, patients were asked to come in to the office.

Many private insurers in Minnesota are paying part or all of the online visit charge, he said. Although Medicare won't pay for an online visit, Dr. Bachman said he thinks many Medicare patients would be willing to pay the fee themselves. During the pilot, many uninsured patients were willing to pay for the online service.

Overall, the Mayo Clinic physicians billed patients for fewer than half of the

online consults completed because they chose not to bill for certain services, such as medication reactions that happened in the week following the initial consult, prescription refills, or other minor questions.

As physicians begin to do online visits using patient portals, Dr. Bachman suggested that they ask patients to pay upfront with a credit card. This makes payment immediate and establishes the identity of the patient, he said.

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