

Request for Virginia MCO and DMAS Support of eConsult to Improve Access to Care for Medicaid Patients

Virginia Department of Medical Assistance Services (DMAS) and managed care organizations (MCOs) have the opportunity to work together to improve access to specialty care for our Medicaid patients through support of electronic consult. eConsult facilitates communications between primary care providers and specialists, often eliminating the need for member travel and time off work for in-person specialty care visits.

Benefits of eConsult

In programs across the country, eConsult has demonstrated [increased access](#) to specialty care for Medicaid patients, reduced turnaround time for care management guidance, a reduction in [unnecessary or inappropriate referrals](#), and [cost savings](#). Medicaid agencies in states including [California](#) (p10), [Colorado](#) and [New York](#) (p578) have activated CPT codes [99451 \(specialist/consultant\)](#) and [99451 \(treating provider\)](#) with resulting cost savings and efficiency. [MCO data](#) dashboards demonstrate the positive impacts of these programs.

Ensuring High Quality, Cost Effective eConsults

Best practices, standards, and service level agreements for eConsult have been documented as a result of a number of state-level programs and [publications](#).

- **Appropriate use of eConsult** – primary care providers and specialists agree that eConsults are best utilized for routine, non-urgent patient needs. The primary care provider maintains the patient relationship and owns the decision as to when an eConsult is appropriate, and has the ability to request a second opinion, or refer the patient. eConsults are often viewed as the first step in the referral process, and have demonstrated an average of 25%-75% [resolution of the primary care provider question](#) (avoiding unnecessary in-person visit.)
- **Best practice questions and responses** – In mature programs, eConsults providers are trained to write [effective questions](#) including a clinical question, relevant patient history, and diagnostics including labs and images. Specialists' responses are rated for quality and satisfaction by primary care providers. PCPs are upskilled in the process, reducing utilization over time.
- **Specialist response turnaround time** – programs work with their specialist networks to agree upon an [optimal turnaround time](#) which ranges from an average of 4 hours (remote, contracted network) to 3 days (academic medical centers) – a dramatic reduction in wait time from weeks or months for an in-person visit.

Managed Care Plan Collaboration in Support of eConsults

Providers demonstrate [improved utilization of eConsult](#) when it is covered by all of their patients' managed care plans, reducing the need to determine if a patient is eligible to receive an e-consult. MCOs have collaborated to form consortia to support provider education and share best practices for incorporating eConsult into the referral process. To create a widely accepted, sustainable program, MCOs can:

- **Contract with an eConsult platform** that offers a specialty network for managed care members.
- **Cover the costs of the platform** and the eConsult encounters for their plan members.
- **Engage clinics** with a high volume/excessive wait times for specialty referrals, and/or long distance to travel for in-person specialty care.

Call to Action

Virginia MCOs can support eConsult by agreeing to cover the costs of eConsults for their Medicaid members. We ask that DMAS consider including eConsult as a reimbursable service. This will encourage the capture of eConsults within patients' electronic health records, improve reporting, and enhance the quality of patient care.