Wyoming Telehealth Network

September Provider Spotlight

Dr. Joe Kvedar



When Dr. Joe Kvedar, dermatologist and long-time telehealth champion, first heard about telehealth in 1992, there was no way for him to imagine he would be driving innovation, creating the market, and gaining acceptance for connected health for nearly three decades. In the 1990's, to take high quality pictures for use in dermatology, it cost more than \$12,000 just to purchase the right camera to use with telehealth. That same picture is now taken with a patient's smart phone in a matter of seconds. The Wyoming Telehealth Network caught up with Dr. Kvedar, the immediate Past Chair of the Board of the American Telemedicine Association (ATA), to talk about the organization's second annual Telehealth Awareness Week and his own experiences with the ever-changing medical field.

Being ahead of the curve is nothing new for Dr. Kvedar. He has been innovating in the field of telehealth since 1994 at Massachusetts General Hospital where he formed a committee to begin understanding how telehealth could be used to decrease barriers to healthcare. This led to his overseeing the program that became a best practice model for providers throughout the globe.

Dr. Kvedar's drive to innovate in the medical field continues today, and he emphasizes the importance of having good mentors. One of his most rewarding accomplishments with telehealth has been to watch his mentees pay it forward. And with the COVID Public Health Emergency, his mentorship supported many providers who would be facing unprecedented circumstances.

As the nature of the Covid-19 pandemic shifts with advances in vaccines and treatments, the time to pivot is upon the medical field. Telehealth is not going anywhere, and leaders like Dr. Kvedar are ensuring that telehealth continues to be a critical tool for providing healthcare.

Reimbursement is the question on everyone's mind right now as things begin to shift. He explains, "If there is not parity reimbursement for telehealth visits, providers will not be able to continue to serve their patients with telehealth." This means more inefficiencies and less access to care for everyone—a move that would be unfortunate and surprising to all.

"If there is long-term reimbursement, telehealth will continue to flourish," adds Dr. Kvedar, "And we will see more and more tools come into a patient's home to provide a quality encounter. But there must be a financial pathway for these services to flourish."

Dr. Kvedar is now applying his expertise, insights, and influence to advancing the adoption of telehealth and virtual care technologies at the national level. Dr. Kvedar continues to guide the transformation of healthcare delivery as a respected thought leader, author, and convener.

His advice to other providers is critical. "Carve out some time in your schedule to do telehealth, but be careful not to make it an add-on to your existing schedule." Provider burnout is a real concern for many in the field and telehealth is meant to be a tool in the toolbox and not something to provide more to an already hectic workload.

"Telehealth is a different way of thinking about patient care. The transition can be hard for doctors, but we can help by instructing them to hire a good patient monitoring staff, and by advocating that everyone is receiving a decent wage for their work. Telehealth is often more convenient, secure and patients feel like they are being monitored," Dr. Kvedar continued. "Telehealth equity is not just about broadband access, but things like literacy. The bottom line is that telehealth extends access to care."

Learn more about Dr. Kvedar, (https://www.americantelemed.org/bios/joseph-c-kvedar-md-2/)