Telemedicine Advocates Cry Foul Over FCC's Net Neutrality Plan

Ending net neutrality rules would force healthcare providers to choose between telemedicine and profits, some experts say. Others feel it would stifle telehealth expansion into underserved areas.

December 12, 2017

Telehealth and telemedicine experts are warning that Federal Communications Commission Chairman Ajit Pai's proposal to scrap net neutrality rules could seriously damage telehealth expansion in rural parts of the country and create a two-tiered system for telemedicine connectivity.

"All hospitals consume huge amounts of bandwidth. All hospitals have wireless connectivity," says Robert Annas, senior managing director at SOLIC Capital and chief operating officer for Eagle Telemedicine. "Limiting that is not the answer."

Pai has scheduled an FCC vote on December 14 to end net neutrality, which requires Internet Service Providers to allot the same bandwidth to all sites and prevents them from delaying, slowing or charging extra for bandwidth.

"One aspect of this proposal I think is worth highlighting here is the flexibility it would give for prioritizing services that could make meaningful differences in the delivery of healthcare.," he said in a Nov. 30 speech." By ending the outright ban on paid prioritization, we hope to make it easier for consumers to benefit from services that need prioritization - such as latency-sensitive telemedicine. Now, we can't predict exactly which innovations entrepreneurs will come up with. But by replacing an outright ban with a robust transparency requirement and FTC-led consumer protection, we will enable these services to come into being and help seniors."

Pai says ending net neutrality would "restore Internet freedom" and foster business development. Many in healthcare don't agree.

Annas argues that ending net neutrality would give the largest health systems an unfair advantage over smaller, more rural health systems, medical practices, clinics and community health centers, all of which will need access to bandwidth to stay competitive and provide healthcare through telemedicine and telehealth in underserved regions.

"Many of these [health systems] are already struggling. They can't afford to pay more," he said. "They don't have the resources."

Some have argued that the FCC could set aside a so-called "fast lane" for healthcare. That option was proposed in 2014 – and opposed by groups like the American Academy of Pediatrics, which argued that such a service would still put smaller providers at a disadvantage.

"AAP is opposed to the implementation of paid prioritization because of its detrimental effects on the elimination of health disparities, efficiency of healthcare, and access to health information by parents and caregivers," the organization wrote in a letter to the FCC. "If healthcare providers do not have the financial resources necessary to

purchase priority Internet access, they may not be able to provide the efficacious, patient-centered, cost effective care recommended as part of the ongoing transformation and reform of our nation's healthcare system."

Annas says any attempt to stratify bandwidth places the larger health systems with financial flexibility at an advantage, and forces smaller providers to curb their telemedicine plans, band together in groups to negotiate bandwidth contracts, or shut down.

"Healthcare is a little bit different than accessing Google," he points out. If providers were forced to negotiate for bandwidth, he says, many would shift their focus from healthcare access and quality to profits simply to stay alive.

Pai's proposal has drawn strong criticism, with some saying the repeal could even hurt the Department of Veterans' Affairs "Anywhere to Anywhere VA Healthcare" program, which proposes allowing VA doctors to use telemedicine to treat veterans no matter where they're located.

In a May 31 post in Health Affairs, Leslie Lenert, MD, MS, FACMI, FACP, Chief Research Information Officer for the Medical University of South Carolina (MUSC) and others argued that "could have a negative impact on the health of the most medically underserved Americans."

"Reliable low cost service for telehealth is potentially threatened by the loss of [net neutrality]," they wrote. "What happens to telehealth if Netflix traffic is preferred above medical applications? Could Internet Service Providers (ISPs) offer better services for one hospital system than another, helping them take over telehealth in a region? The undoing of NN weakens the infrastructure of reliable low cost connectivity that telehealth systems depend upon."

"In addition, Internet service may be increasingly necessary to help patients stay healthy by connecting them to their providers for monitoring their chronic illnesses," they added. "If the cost of Internet service is prohibitive, it becomes another factor that worsens health disparities in low income individuals."

The U.S. Chamber of Commerce also opposes ending net neutrality, saying it would stifle innovation and entrepreneurship.

"By applying last century's regulatory approach to 21st Century networks, net neutrality will flip the model entrepreneurs have used to transform the Internet into an integral part of our economy," the organization wrote. "Instead of being allowed to quickly take risks on new ideas and business models, Internet innovators will have to ask for the FCC's permission. No wonder Sen. John Thune (R-S.D.) warned that net neutrality will 'put a wet blanket on the entrepreneurism and innovation.'"

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