

**Telehealth or ...?
Understanding the Complexities of
Telehealth Beyond the Initial Set Up**

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Telehealth: A Brief Overview

Overview: What is Telehealth?

Defining Telehealth:

As Defined by Medicaid:
Telehealth seeks to improve a patient's health by permitting two-way, real time interactive communication between the patient, and the physician or practitioner at the distant site. This electronic communication means the use of interactive telecommunications equipment that includes, at a minimum, audio and video.

As Defined by CCHP: Telehealth is a collection of means or methods for enhancing health care, public health and health education delivery and support using telecommunications technologies. Telehealth encompasses a broad variety of technologies and tactics to deliver virtual medical, health, and education services. Telehealth is not a specific service, but a collection of means to enhance care and education delivery.

As Defined by HRSA: The use of electronic information and telecommunications technologies to support long-distance clinical health care, patient and professional health-related education, public health and health administration

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Review of Key Telehealth Terms:

- **Distant site or HUB Site:** where the physician or licensed provider is located physically at the time of service.
- **Originating or Spoke site:** where the patient is located during the telehealth service.
- **Interactive telecommunications system:** Multimedia communications equipment that includes, at a minimum, audio and video equipment permitting two-way, real-time interactive communication between the patient and distant site physician or clinician.



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The Distinct Modalities for Telehealth

•Synchronous Transmission (Live): The interactive transmission of video connection in real time with the patient present.

Asynchronous (Store and Forward): The transmission of medical images and/or data from the originating site to the distant site for the physician to review without the patient present.

4 Main Modalities:

Remote Patient Monitoring: The use of technology to monitor a patient and track health care data to send to the physician from the physician's home

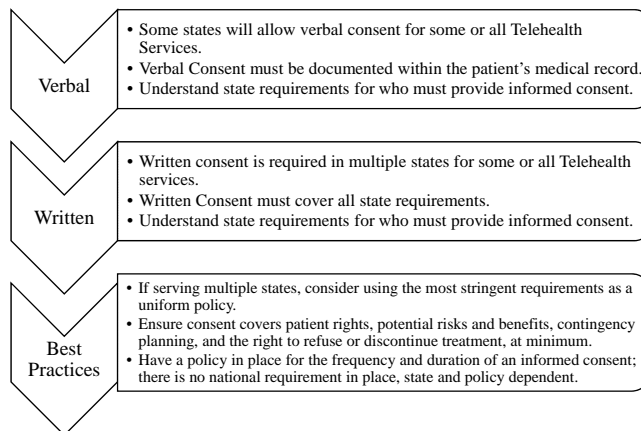
•Mobile Health: The delivery of health care services via mobile devices, such as cell phones and tablets.

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We Know What the Basic Rules Are.
Now What? Covering Consents, Records
and More...

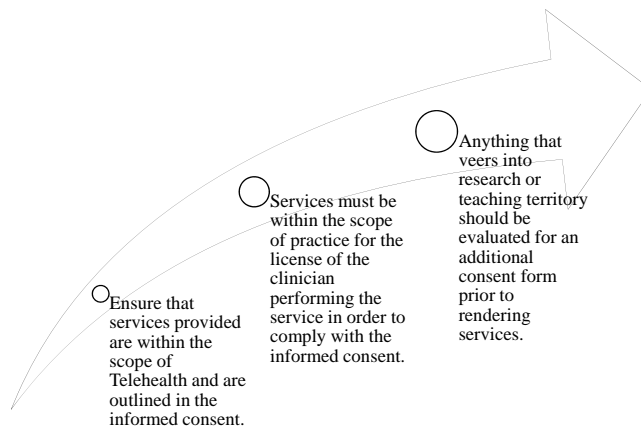
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Informed Consent: What Are the Rules?



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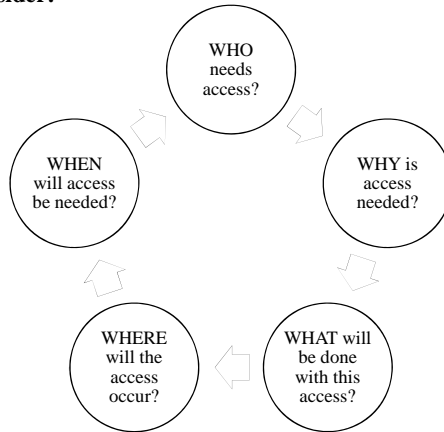
Informed Consent: Are We Covered?



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Access To Records: Should We Allow It?

Always consider:



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Access To Records: Additional Questions to Ask

•Does the vendor have a Business Associate Agreement?

Is this a Covered Entity?

•Who will be documenting in the EMR, originating or distant site?

What other solutions could be used in lieu of providing EMR access?

Should you trust another person to record information?

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PHI... Keep it Protected



- Telehealth poses potential privacy risks through transmission of data. Consider performing risk assessment to identify potential gaps in privacy and security.
- Ensure vendors have Business Associate Agreements in place that covers security measures. Consider having the BA sign your agreement rather than their own to hold the BA to your standards.
- Understand the encryption requirements between clinic to clinic and consumers, and the difference in standards. What is good for clinic to clinic may not hold up in clinic to consumer.

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New Virtual Care Codes

- Effective January 1, 2019, new virtual codes were added to the physician fee schedule that alleviate CMS requirements for Telehealth.

- Technically not considered a “Telehealth” service, removing the geographic and service restrictions.



- Verbal Consent required, must be documented within the patient’s medical record.
- Understand the billing requirements; there are limitations to billing these codes based on the patient’s visit history and are limited to existing patients.
- Increased range of eligible providers.

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State Lines: Dare to Cross Them

State Licensure

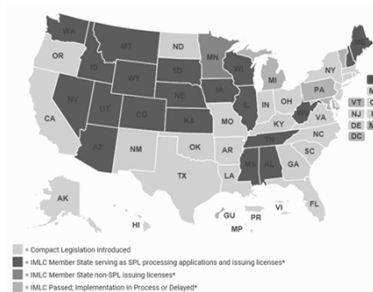
- Many states have some form of licensure requirement for Telehealth.
- Providing services via Telehealth generally requires the physician to follow the licensure rules of the state the patient is physically located in.
- Malpractice considerations add to the need to ensure state licensure where providing Telehealth services.
- Some exceptions for licensure may include:
 - Peer to peer consults across state lines.
 - Bordering states, under certain circumstances.
 - Registration with state medical licensing board, where permitted.
 - Follow up care.

Current Licensure Legislation

- **Veterans Administration:** VA health care providers may provide telehealth services, within their scope of practice, to VA beneficiaries regardless of the state where the health care provider or the beneficiary is physically located.
- **Interstate Compact – Nurse Licensure Compact:** Permits nurses to have one license viable in other compact member states. 31 active states participating.
- **Interstate Medical Licensure Compact:** An agreement between 24 states and 1 territory that expedites the licensure process and permits the physicians to practice within the compact states.

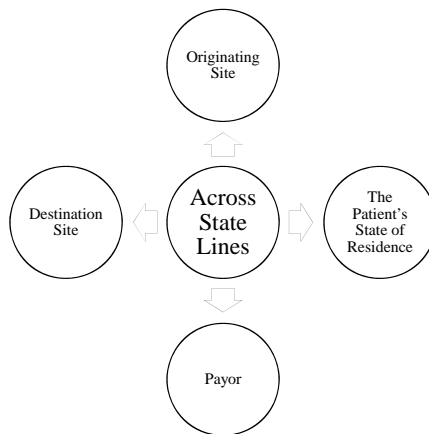
Federation of
**STATE
MEDICAL
BOARDS**

Interstate
**Medical Licensure
Compact**
A faster pathway to medical licensure



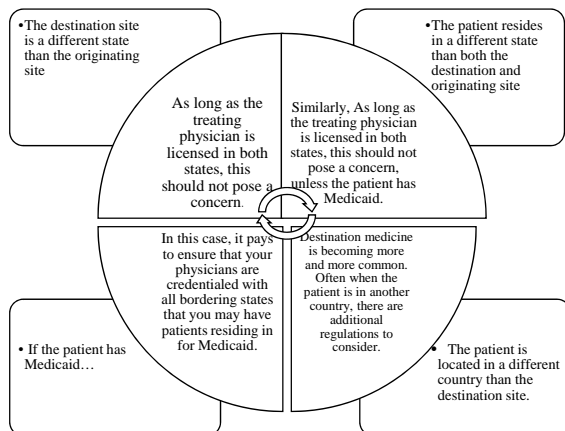
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Complications with Telehealth and State Borders



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A Tale of Two States... And More!



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Is It Okay if We...

A Comprehensive Look at Some of the Latest Q&A for Telehealth Operations.

Interesting Operational Questions

Can an LPN obtain informed consent for RPM?

Yes. The LPN will not be covering any clinical care, and may obtain the consent on behalf of the provider in this case. Consult state and payor regulations for other services.

Can an RN remove sutures via Telehealth at the originating site?

Yes, this is within the scope of practice for a nurse; the issue becomes how this care is documented within the EMR if the patient record is held at the distant site.

Can my patient record our Telehealth Session?

That depends on the state; legally, in a one party state, the patient can record the session without consent from the provider. The provider may still build in the request not to record within the informed consent, or ban the presence of cell phones from the originating site.

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More Interesting Operational Questions

Is a Presenter required at the distant site?

Not necessarily. Unless required by the payor or the physician, a presenter is not a condition of compliance and reimbursement.

Can an unlicensed provider deliver care at the originating site under the direction of the physician?

Typically not. For example, fitting of custom orthotic devices could not be performed by an individual who is not certified and/or licensed, even if directed by the physician.

The originating site is in Mexico, so we do not have to follow HIPAA laws, right?

No. This patient still has the expectation of privacy and security. Additionally, the destination site IS in the US and is subject to HIPAA compliance.

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Even More Interesting Operational Questions

Medicare will now cover POS 2 for all services now, right?

No. This 2019 change to geographic location only applies to patients with ESRD, Opioid treatment and Telestroke. Rural requirements still apply to other services.

Does Medicare Advantage now cover Telehealth as a basic benefit?

In 2020, Medicare Advantage plans will be permitted to cover Telehealth as a basic benefit under the Bipartisan Budget Act of 2018.

When does follow up care cross the lines?

When the follow up visit deviates from the original service and starts to explore new symptoms or conditions that would not be bundled with the original service.

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Challenges to Success in Telehealth:

- Lack of Substantial Infrastructure
- Lack of Physician Engagement
- Lack of Planning for Implementation
- Lack of Staff Engagement
- Lack of Understanding of Compliance Regulations
- Lack of Reimbursement
- Lack of Patient Satisfaction or Engagement

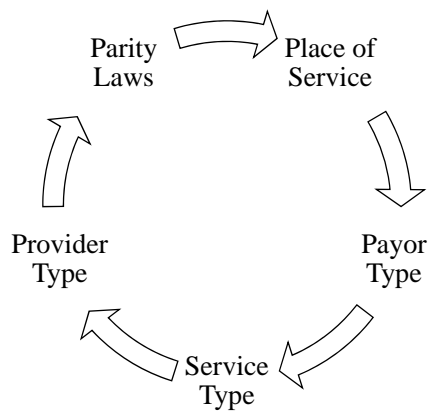
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Areas of Interest for Reimbursement Audits



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Understanding Reimbursement: Is it Worth It?



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A Brief Preview of the Kaiser Permanente Telehealth Program

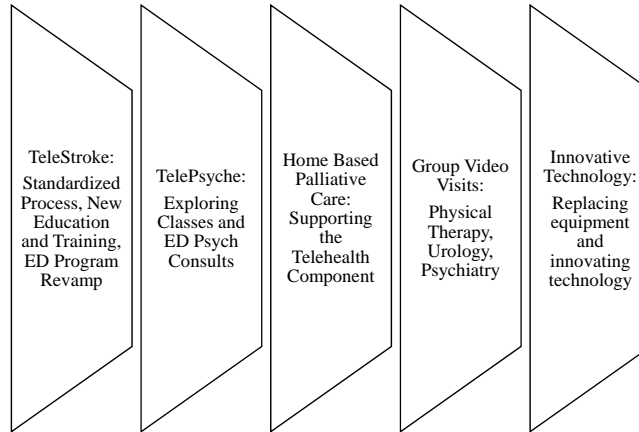
The Kaiser Permanente Approach

- “Our Telehealth Vision is to provide a variety of telehealth options that deliver choice, convenience, and coordination to our patients, and help our care teams provide effective, high-quality care as we implement proven technologies”.



- “As we implement new telehealth options, patients will have more control as they address their health concerns in person or virtually, knowing that at every interaction — at clinics, pharmacies, hospitals, or at home — they’ll benefit from the high-quality, integrated end-to-end experience that we provide”.

Hot Topics and Trends in Kaiser Permanente Telehealth:



Kaiser Permanente National Telehealth Compliance Program

- Program dedicated to compliance of coding, billing and clinical Telehealth issues.
- Annual tool kit for coding and billing.
- Share point site dedicated to providing real time updates and historical data, fee schedules, coverage data and other key telehealth reimbursement information.
- Monthly meetings to introduce regulatory updates, proposals and rules.
- Forum to submit questions and requests for assistance.
- Support for national and regional Telehealth partners.

Helpful Links and References

American TeleMedicine Association. <http://www.americantelemed.org/home>

Center for Connected Health Policy. <https://www.cchpca.org/about/about-telehealth>

Centers for Medicare and Medicaid Services. <https://www.cms.gov/newsroom/fact-sheets/final-policy-payment-and-quality-provisions-changes-medicare-physician-fee-schedule-calendar-year>

Interstate Medical Licensure Compact. THE IMLC. <https://imlcc.org/>

Legal Information Institute. 42 CFR 410.78. <https://www.law.cornell.edu/cfr/text/42/410.78>

Medicaid.gov. <https://www.medicaid.gov/medicaid/benefits/telemed/index.html>

National Consortium of Telehealth Resource Centers. <https://www.telehealthresourcecenter.org/>

Final Thoughts, Questions?