

Telehealth 101
the basics

TELEHEALTH BRINGS THE RIGHT HEALTHCARE TO PATIENTS WHERE AND WHEN THEY NEED IT

Today's Technology is Being Leveraged to:



Monitor patients' health status and behaviors remotely

Meet face to face with patients using video conferencing to have discussions and provide treatment



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Goal

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Obtain images for diagnostic purposes using specialized scopes and cameras

Capture, store and then forward images to remote providers who can make a diagnosis and provide treatment recommendations





Educate patients and providers through apps and video conferencing

Monitor the impact of patients' daily activities on their health status



Provide patients with tools to assist them in adopting behaviors to promote their health

Do You Hope To...

- ► Increase **Access** for Patients?
- ► Increase **Market** for Providers?
- ► Reduce Costs?
- ► Improve Health Outcomes?
- ► Improve Patient Satisfaction?
- ► Improve Provider Satisfaction?

Factors to Consider

Licensure

Providers should refer to the guidelines of their licensure boards. However, these general rules apply:

- Providers must be licensed in the state where the patient is located.
- Telehealth can be a valuable tool that allows all types of healthcare providers to work to the top of their license but not beyond it.
- Multi-state licensure compacts have been looked to as a solution for licensing barriers, though the methods vary. The Nurses Licensing Compact offers one license that is valid in multiple states. The Interstate Medical Licensure Compact for physicians offers an expedited process to obtain a license in a compact state.

Factors to Consider

Credentialing

In July of 2001, the Centers for Medicare and Medicaid Services' final rule on credentialing and privileging established a process for originating site hospitals (location of the patient) to rely on the credentialing and privileging decisions of the distant site hospital (location of the specialist) for telehealth practitioners.

Hospitals should also check their state Medicaid policies to ensure that they do not have additional requirements.

Need help taking the next step? We can help! www.NETRC.org

The Northeast Telehealth Resource Center (NETRC), a project of MCD Public Health in collaboration with the University of Vermont, has a mission to increase access to quality health care services for rural and medically underserved populations through telehealth.

NETRC is a member of the National Consortium of Telehealth Resource Centers and is federally funded to provide resources and technical assistance for telehealth program development in New England, New York, and New Jersey.













Medicare

Medicare is a Federal program administered at the federal level. Medicare provides some reimbursement for telehealth services. The program has specific requirements in three major areas: physical location of the patient, clinical service being provided and the provider's credentials. CMS's publication, Telehealth Services, provides an excellent overview of related Medicare policies.

You can find out if your location meets the rural eligibility requirements using HRSA's Payment Eligibility Analyzer.

Reducing your **Upfront Expenses**

Equipment Purchases

- Carefully match your selection to clinical needs
- Develop models built on low cost technology options when possible
- Look to grant opportunities to capitalize the investment (e.g. the RUS Distance Learning and Telemedicine grant program)

Administrative Costs

- Optimize use of available reimbursement for services
- Adapt solutions from business plans of efficient and effective programs
- ► Explore HRSA's grant opportunities for program development (ORHP Rural Health and OAT network development grants)

Connectivity Costs

- ► Check your eligibility to participate in Universal Service Administrative Company subsidies
- Explore possibilities of reduced rates through FCC Regional Pilot Projects and state-level Healthcare **Connect Fund programs**

Medicaid

Medicaid is a Federal program that is administered at the state level. Some states have laws to dictate Medicaid telehealth reimbursement policies and some states do not. Medicaid reimbursement varies greatly among states.

For information about Medicaid policies in your state, contact NETRC or visit CCHPCA.org.

Private Insurance

Like Medicaid, private insurance mandates are administered at the state level. Some states have laws to dictate telehealth reimbursement policies and some states do not. Private insurance reimbursement varies greatly among states.

For more information, contact NETRC or visit CCHPCA.org.

Choosing Your Equipment and Vendor(s)

Organizations are integrating a variety of technologies into their telehealth programs, from off-the-shelf webcams/laptops, tablets, and smart phones, to specialized field kits, mobile carts, wall-mount stations, and kiosks. Many systems integrate peripheral devices, such as exam cameras, stethoscopes, otoscopes, dermatoscopes and more. Telehealth software continues to evolve rapidly, featuring cloud-based videoconferencing, workflow and practice management tools, and EHR integration. For tips on equipment selection, contact NETRC or visit TelehealthTechnology.org.

Factors to Consider

HIPAA/Privacy

The technology alone cannot make one HIPAA compliant. Human action is required in order to meet the necessary level of compliance that is required. HIPAA does not have specific requirements related to telehealth. Therefore, a telehealth provider must meet the same requirements of HIPAA as would be needed if the services were delivered in-person.

Additionally, states may have their own privacy and security laws with which providers must be familiar. HIPAA is a baseline to protecting health information and some states may actually have a higher bar a provider must meet in order to be compliant. States also may have specific internet vendor laws that may not be directed at health services, but nonetheless impact them because they are services sold via the Internet. If a provider is

Factors to Consider

rescribing via Telehealth

Controlled substances are often used in medication assisted therapy (MAT). While a growing number of states allow telehealth to be used to prescribe, prescription of controlled substances is under federal law where there are only a few narrow exceptions in how telehealth can be used; See the Ryan Haight Act for more information.

However, an additional avenue will be opening up as the DEA finalizes regulations on the creating of a telemedicine registry by the end of 2019. A provider on the registry will be able to use telehealth to prescribe a controlled substance without falling into one of the current narrow exceptions. Additionally, access to SUD services via telehealth in Medicare have been expanded by the <u>SUPPORT for Patient and Communities Act</u>, which removed the telehealth geographic requirements in the treatment for substance use treatment or co-

Please visit www.NETRC.org for telehealth program development resources, regional policies and regulations, upcoming events, and more.

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