Dealing with COVID -19 by Implementing a Telehealth Program: The State of Telehealth Today

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Objectives

This presentation will address:

- the role of telehealth in addressing issues surrounding COVID-19 and beyond.
- curricular development in this time of crisis

Participants will learn:

- how telehealth is being used;
- the steps needed to implement/provide a telehealth program;
- rules and regulations that have changed to expand telehealth services and loosen restrictions;
- reimbursement;
- and issues that must be taken into considered such as selecting a platform, consent, and more.
Impact of Presentation

• Help those involved in moving *clinical practice* to TH delivery understand:
  • Legal and regulatory changes
  • Steps to accomplishing a successful transition

• Help those providing *clinical student experiences* understand:
  • How clinical encounters can be established
  • What counts for clinical hours

• Offer suggestions on *NP educational content* that is needed
Purpose of Telehealth

- Identify and treat patients with COVID-19 symptoms/diagnosis
- Protect Patients/Populations from COVID-19
- Protect Providers from developing COVID-19
- Continuing care for existing patients
- Treating acute patients
Identify Prior to Starting Program

• **Patient Population** (demographics, healthcare issues, site that delivery will occur from, patient site)

• **Service(s)** that will be delivered
  • Synchronous (videoconferencing with or without peripherals)
  • Asynchronous (text, emails, imaging, Remote Patient Monitoring)

• **Equipment** you will use (existing, free, purchased)

• **Personnel** that will be involved
  • Administrative
  • Provider
  • Information Technology
Type Telehealth Program

• Videoconferencing with and without Peripherals
• Asynchronous (Store-and-Forward)
  • eVisits
  • Text
• Hospital-based
• Ambulatory
• Remote Patient Monitoring
• Tele-consultation (specialist)
• Phone Calls (not TH)
Develop Protocols

- **Contacting patients** – Patients need to know that you can manage them via telehealth. Who will contact them? How will you contact them? What will be their process for contacting you?

- **Obtaining consent** – How will consent be obtained/recorded? What personnel will be involved?

- **Steps for patients** to connect for encounter. Should include information on steps to take if get disconnected. Send to patient prior to encounter.

- **Providing the visit** to outline the provider’s steps for conducting the visit (will outline later in presentation)

- **Handling emergencies** including obtaining the address where they are located and name and number of emergency contact
Before Encounter

• Practice and become comfortable with the Equipment
• Learn about Telehealth Etiquette
  https://www.youtube.com/watch?v=YVJOesPIdc4&list=PLM0VF0yZsE6f6737BT0QdUp7iC9BMINyC&index=2
• Test the equipment to make sure there are no complications
• Have patient test the connection from their site.
• Be sure to have IT available if possible
• Make sure you have the consent for the visit if needed (you may need to check with your state to see if a written consent if needed)
Beginning of Encounter

• **Purpose of Encounter** – Why you are conducting the visit?

• **Consent** - Does patient agree with purpose and agree to participate? *(Document in chart)*

• **Identify those at Each Site** - Ask patient who is with them and if it is ok for them to stay for the visit. May have patients and provider show identification especially if you have not met them.

• **Discuss Security** – Assure patient that their information will be secure. Let them know how security is maintained.

• **Outline Session** – Let patient know what to expect.

• **Equipment Expectations** – Explain what to expect of equipment and what to do if connection is lost.
Conducting Encounter

• **Obtain History/Subjective** – Maintaining same standards of care as an in-person visit.

• **Obtain Clinical Data**
  • Use creative strategies
  • Use observational skills
  • Have patient and/or family assist in gathering data
  • Use devices/objects found in the home (i.e., flashlight)

• **Examples**
  • ENT
  • CHF
  • DM

• **End encounter** – Provide a plan, set up referral, send notes/texts secure email
Examples of Current Telehealth

- Physical Assessment and treatment
  - School health
  - FQHCs
  - St. Jude
  - Stroke Management

- Behavioral
  - Mental Health Counseling
  - Education on behavior changes

- Monitoring
  - RPM
Medicare (1135 Waiver)

• Patients
  • No longer rural or medically underserved area requirements
  • No longer need to be located at a healthcare site
  • No longer need prior relationship with provider
  • Can be treated for any condition

• HIPAA-Compliant Platforms have been waived
• Live audio/visual connections is still required
• Billing codes - Medicare’s Telehealth Fact Sheet (Ref) for codes
• Copays may be reduced or waived, however, practices are not required to waive the copay
• Coverage at the same rate as in-person visits
• Out-of-state licensing requirements are temporarily waived
Medicaid

- Medicaid is regulated at the state level.
- State Medicaid programs are being asked by CMS to waive current telehealth restrictions.
- Many states have responded and removed some of the existing barriers to telehealth, however, each state is different.
- Providers should check with the Medicaid program in their state in order to remain compliant with their state’s Medicaid telehealth waivers.
Commercial Payers

• Commercial payers can set their own rules regarding coverage for telehealth.
• The American Medical Association is requesting many commercial providers to remove barriers to providing telehealth services that are not currently covered.
• Some commercial payers are still requiring co-signatures for NP’s
• Providers should check with the payers that cover their patients in order to understand their coverage
Ryan Haight Act

• The Drug Enforcement Administration (DEA) has released guidance allowing DEA-registered practitioners to issue prescriptions for controlled substances without an initial in-person medical evaluation.
  • Prescription must be issued for a legitimate medical purpose in accordance with how providers would act in their usual course of practice
  • The telemedicine must be done using an audio-visual, real-time two-way communication
  • The practitioner must be acting in accordance with applicable Federal and State law
  • Be sure to obtain identification
Student Clinical Experiences

• Expectations are for all NP students to have 500 supervised direct patient care clinical hours.

• For tracks that require more than 500, the remaining hours may be done through simulation.

• It is the responsibility of the program to determine if the students meets the competencies for the program.

• If a student has achieved the direct supervised clinical hours and can demonstrate having met the competencies to provide care, you do not need to acquire additional hours.

Student Clinical using Telehealth

• Clinical hours may be achieved through telehealth encounters the same as in-person hours

• Requirements that must be met include:
  • Patient care is being provided
  • A preceptor or faculty member is participating in the visit (Supervised Direct Patient Care)
  • Same standard of care is being expected as in person visit
  • Student is involved in the provision of care at the level they would be expected during an in-person visit
  • Visit may be done using videoconferencing alone or with peripherals, eConsults, EVisits
Telehealth Education

• Educational strategies that can be provided to assist students in acquiring the KSAs for telehealth delivery

Support for Telehealth Education

- HRSA National Telehealth Education Toolkit
  - O'Rourke, Jenny <jorourke1@luc.edu>
  - Reynolds, Elizabeth <ereynolds4@luc.edu>
- Telehealth Resource Centers
  - https://www.telehealthresourcecenter.org/
- Faculty Collaboration
- Telehealth Certification Programs
- Telehealth Centers (C-TIER)
- Text “Telehealth Essentials for Advanced Practice Nurses” due out in July
References


- CMS shares specifics on sweeping Medicare telehealth expansion. https://medcitynews.com/2020/03/cms-shares-specifics-on-sweeping-medicare-telehealth-expansion/?rf=1

- Telehealth Etiquette. https://www.youtube.com/watch?v=VYJOesPldc4&list=PLM0VF0yZsE6f6737BT0QdUp7iC9BMInyC&index=2


- The National Resource Center with links to the regional center. https://www.telehealthresourcecenter.org/


Questions??