Guidelines to Starting a Clinical Telehealth Service with Policy Review

Kentucky Telehealth Summit
May 23, 2019

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Develop a Business Plan for how you will implement, utilize and market your telehealth services

- Purpose, Value & Outcome
- Executive Leadership and Clinician Champions
- Services to be Performed
- Financial Plan with anticipated operating costs / sources of reimbursement / revenue
- Needs Assessment to examine existing workflow and communication workflow
- Procedural and Operational Policies
- Licensure / Privileging / Credentialing
- Malpractice Insurance
- Training on equipment and procedures (fixed clinic, direct to consumer, remote patient monitoring, etc.)
- Marketing strategy / interaction with your patients
- Timeline for Implementation

How Do I Get Started?
**Understanding Telehealth Policy**

**Medicaid Requirements**

- Effective July 1, 2019, Medicaid will reimburse an eligible telehealth care provider for a telehealth service in an amount equal to the amount paid for a comparable in-person service, unless a managed care organization and provider establish a different rate.

- Telehealth Care Providers shall be licensed in Kentucky and a Medicaid Participating Provider in order to receive reimbursement.

- Referral requirements will be the same for telehealth service as in-person visit.

- Shall utilize real-time interactive audio and video technology or store and forward services provided via asynchronous technologies as the standard practice of care where images are sent to specialist for evaluation.
Understanding Telehealth Policy

Medicaid Requirements

• Informed Consent is required
• Telehealth services shall be delivered over a secure communications connection that complies with the federal HIPAA regulations
• Malpractice Insurance
• Medicaid Telehealth Services Coverage & Reimbursement Regulation - Amendment will be effective July 1, 2019
• Use POS 02 to denote a telehealth service and a modifier
Understanding Telehealth Policy

Medicare Requirements

• Eligible location per the telehealth eligibility analyzer – https://datawarehouse.hrsa.gov/tools/analyzers/geo/Telehealth.asp

• Eligible location type – The originating site is the location of the patient at the time the service is being furnished

  The offices of physicians or practitioners
  Hospital-based or CAH-based Renal Dialysis Centers (including satellites)
  Critical Access Hospitals (CAHs)
  Skilled Nursing Facilities (SNFs)
  Rural Health Clinics
  Community Mental Health Centers (CMHCs)
  Federally Qualified Health Centers

• Q3014 Facility Fee

  Condition of payment requires the use of interactive audio and video technology
Medicare Requirements

- Eligible location type – The distant site is the site where the physician or other licensed practitioner delivering the service is located.
  
  Physicians
  Nurse Practitioners (NPs)
  Physician Assistants (PAs)
  Nurse-midwives
  Clinical Psychologists (CPs) and clinical social workers (CSWs). CPs and CSWs cannot bill for psychiatric diagnostic interview examinations with medical services or medical evaluation and management services under Medicare. These practitioners may not bill or receive payment for Current Procedural Terminology (CPT) codes 90792, 90833, 90836, and 90838

- Use POS 02 to denote a telehealth service
With the passage of SB112, a health benefit plan shall reimburse for covered services provided to an insured person through telehealth. Telehealth coverage and reimbursement shall be equivalent to the coverage for the same service provided in person unless the telehealth provider and the health benefit plan contractually agree to a lower reimbursement rate for telehealth services.

A health benefit plan shall require a telehealth provider to be licensed in Kentucky in order to receive reimbursement for telehealth services.

Use POS 02 to denote a telehealth service and a modifier.
Technology Requirements

- Review available bandwidth / adequacy / # connections needed
- Investigate all vendors online & demo
- Business Associate Agreement – every vendor handling or transmitting PHI should sign a BAA
- Technology cannot be HIPAA compliant; YOU must use it in a compliant manner
- Service Agreements and long-term commitments
- Reoccurring fees and future upgrade costs
- Technology requirements must meet the standards of an in-person clinic. Live interactive, store and forward, and remote patient monitoring requirements are dependent upon how the clinic is designed
- Secure communications connection that complies with the federal Health Insurance Portability and Accountability Act of 1996, 42 U.S.C. secs. 1320d to 1320d-9
- Business strategy must service multiple markets (direct to consumer, remote patient monitoring, etc.)
Staff and Training

• **Recommended Staff** - Program Director, Program Coordinator, Patient Presenter, Referring Clinician, IT Staff (Dependent upon the size of the program)

• **Training**
  
  • National School of Applied Telehealth - [https://www.nationalschoolofappliedtelehealth.org/oltpublish/site/cms.do](https://www.nationalschoolofappliedtelehealth.org/oltpublish/site/cms.do)
  
  • American Telemedicine Association - [https://www.americantelemed.org/ata-news/ata-accredits-new-teleheath-training-program/](https://www.americantelemed.org/ata-news/ata-accredits-new-teleheath-training-program/)
  
  • STAR Telehealth & the National School of Applied Telehealth - [http://www.startelehealth.org/](http://www.startelehealth.org/)
  
  • Check with professional licensure boards and national associations for training requirements
Federal Funding Opportunities

- SAMHSA Technology Assisted Care in Targeted Areas of Need Grants - [http://www.samhsa.gov/grants/grant-announcements/ti-16-001](http://www.samhsa.gov/grants/grant-announcements/ti-16-001)
• Analyze your current workflow
  • Integrate telehealth within this workflow

• Before starting a new clinic work with the provider in advance to develop a process for each clinic that closely mirrors a traditional clinic and addresses what must happen before during and after the clinic, including scheduling, registration, documentation, billing and follow up.
  • Ask to shadow their traditional clinic.

• Perform “mock” clinic in order to be comfortable with the process.
<table>
<thead>
<tr>
<th>Presenting site</th>
<th>Consulting site</th>
</tr>
</thead>
<tbody>
<tr>
<td>Set up and test early to trouble-shoot any technical problems before patient arrives.</td>
<td>Set up and test early to trouble-shoot any technical problems before clinic starts.</td>
</tr>
<tr>
<td>Patient room should be well lit, ideally with a solid color background behind the patient.</td>
<td>Room should be well lit, ideally with a solid color background behind the provider.</td>
</tr>
<tr>
<td>Make sure video and audio is clear.</td>
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</tr>
<tr>
<td>If medical devices such as the electronic stethoscope are needed, have them available. If the patient must be supine during part of the exam, place them on an exam table.</td>
<td></td>
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<tr>
<td>Have patient come early to register and complete necessary paperwork and consent forms.</td>
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<tr>
<td>Obtain vital signs and other diagnostic information (labs, EKG...) prior to consult, and forward to consultant.</td>
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## During Clinical Encounter

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<tr>
<td>Actively engage the patient, family and the consulting provider, introducing both sides and explain how the telehealth will be done.</td>
<td>Actively engage the patient, family and the patient site staff. Introduce everyone on both sides.</td>
</tr>
<tr>
<td>Be very prescriptive, telling the presenter exactly what is needed to complete the exam. Explain to the presenter where to position the camera. Close up images for a surgical wound and wide images to study gait.</td>
<td>Visualize the patient’s chest when listening to heart sounds and the patients back when listening to lung sounds, guiding the placement of the stethoscope.</td>
</tr>
<tr>
<td>During the exam, make sure the camera is positioned to optimize the provider’s view. Zoom in close for detail and zoom out during the interview. Show the patients chest when using the stethoscope for heart sounds and show the patients back when capturing lung sounds.</td>
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### After Clinical Encounter

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<td>Securely fax or email documentation that is needed by the provider.</td>
<td>Document and securely fax or email completed note to appropriate referring practice/provider.</td>
</tr>
<tr>
<td>Clarify post clinic actions, such as how to get prescriptions and what follow up will be required.</td>
<td>Review post clinic actions, review medications if recommended and how to get prescriptions and what follow up will be required.</td>
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</tbody>
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Other Tips

• Policies and procedures may vary by site
  • Communication is very important

• Focus on experience
  • Reassure patients that telehealth is done every day in Kentucky

• The presenter may have to participate as a medical historian and translator to help the patient and provider communicate

• If you notice that something is not clearly understood, please help

• Periodically survey providers and presenters to get feedback
  • Should be part of workflow
Effective July 1, 2019, the Kentucky Statewide Telehealth Program is being established within the Cabinet for Health and Family Services dedicated to assisting telehealth providers by promoting, advocating and supporting telehealth adoption across the Commonwealth.

The program serves as a focal point for the repository of information and resources including access to state telehealth laws, policy and guidelines; FAQs regarding telehealth for Medicaid, Medicare and Health Benefit Plans; educational materials and webinars; statewide telehealth services directory; publications and journals; links to associations, organizations, and professional licensure boards and other state and national programs and resources.
Questions & Contact Information

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