DISCLAIMER

FOR AVERA INTERNAL USE ONLY; DO NOT SHARE WITH EXTERNAL PARTIES.

This document is intended to be a resource providing a basic overview. This is not intended to be relied upon as a legal document. Concerns pertaining to the requirements detailed in this document should be directed to Avera’s Office of General Counsel.
Defining Telemedicine

While there are many different definitions used by state and federal entities, for our purposes:

• 2-way video

• Real-time patient and provider interaction

• Provision of treatment in line with professional health care standards
Privacy and Security

- Providers generally required to comply with same HIPAA requirements as traditional care.
- Do not text or email PHI. Use the patient portal, fax, phone, or other approved pathways.
- Secure Paper Documentation if taking calls at home.

“Covered health care providers may use popular applications that allow for video chats, including Apple FaceTime, Facebook Messenger video chat, Google Hangouts video, Zoom, or Skype, to provide telehealth without risk that OCR might seek to impose a penalty for noncompliance with the HIPAA Rules related to the good faith provision of telehealth during the COVID-19 nationwide public health emergency.” From: Notification of Enforcement Discretion for Telehealth Remote Communications During the COVID-19 Nationwide Public Health Emergency

Consent

- Document patient consent for telemedicine in the patient’s medical record

Licensure

- Requirements are changing daily. Refer to the Federation of State Medical Board’s list of States Waiving Telehealth Licensure Requirements

Privileges

- You do not require additional privileges to see a patient in their home.
- To see a patient over telemedicine in a hospital, hospital outpatient setting, or provider-based clinic, you should hold appropriate privileges, regardless of your intention to document or prescribe.
- Disaster privileging options are available. You are encouraged to work with each hospital’s medical staff for more information.
Best Practices for A Successful Telehealth Visit

- Wear Appropriate, Professional clothing, just as if you are in clinic
- Sit in Front of a Simple Background
- Protect Privacy
  - Keep the door closed and ensure that no one “walks in” on your consult
- Ensure Proper Lighting
- Control Background Noise
- Look Into the Camera vs. at Patient on the Screen
  - This will make the patient feel like you are talking to and looking directly at them
- Say What You’re Doing Off Screen
  - This may include the taking of notes or actions requiring you to leave your seat. A simple “I’m just looking up some details on your condition” will put the patient at greater ease
For New Patients, You Should:

1) Ask the patient to identify themselves using 2 factors
2) Verify the state in which patient’s location for licensure
3) Disclose your identify and applicable credentials, or point them to Avera.org provider directory
4) Document consent to be treated over telemedicine, after discussing what telehealth is,
5) Establish a diagnosis through the use of acceptable medical practices, including patient history, mental status examination, physical examination, and appropriate diagnostic and laboratory testing;
6) Discuss with the patient the diagnosis and its evidentiary basis and the risks and benefits of various treatment options
7) Ensure appropriate follow-up care for the patient
8) Provide a visit summary to the patient or consult note to the facility of record
Medicare Reimbursement

1. Patient Location
   - Restrictions are removed for the time being.
   - **Can occur in Patient Home** or other non-health care setting
   - **Can occur in urban settings**
   - Can occur in the same community as the patient

2. Type of Health Provider
   - Physician
   - Nurse Practitioner
   - Physician assistant
   - Nurse midwife
   - Clinical nurse specialist
   - Clinical psychologist and clinical social worker
   - Certified registered nurse anesthetist
   - Registered dietitian or nutrition professional
   - Added: Therapists: OT/PT/ST

3. Services Reimbursed
   - **Limited to a defined set of CPT Codes**
     - Most commonly used codes: Telehealth consultations, Office or other outpatient visits
   - **Recently added:**
     - Emergency Department Visits
     - Observation and Hospital care
     - ICU / NICU / PICU care
     - Nursing Facility Visits
     - Home Visits and Domiciliary / Custodial Care services
     - Radiation Treatment Management services
     - PT/OT/ST Therapy services
     - Others

The telehealth waiver will be effective until the Public Health Emergency declared by the Secretary HHS ends.

Telehealth services are not limited to patients with COVID-19.
Questions:
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