

IMMEDIATE IMPLEMENTATION OF TELEHEALTH SERVICES FOR THE COVID-19 CRISIS

Faced with the ongoing challenges from the **COVID-19 pandemic**, many health care practices are actively seeking ways to **stay connected with their patients** and provide them with **continued access to care** at a time when most in-person patient contact is restricted to emergency cases.

Telemedicine, while not new to the health care community, represents an important and viable alternative to in-office visits, particularly given recent CMS guidelines that establish expanded reimbursement pathways for providers. This resource is designed to help practices consider **the steps involved in implementing telehealth services** for their patients, which may help bridge this immediate gap until normal patient services can resume.

Note that **policies are changing rapidly**; therefore, this information should be considered directional in nature. Practices are advised to **seek guidance from their local experts, including attorneys and payers**.

Establish Roles and Platforms



- **Form your telehealth team.** Identify and empower a small team who can coordinate with others across the practice to provide and help administer the new service to appropriate patients. On this team include a:
 - **Provider**
 - **Scheduler**
 - **Billing team member**
 - **IT support lead**
- **Select your telehealth platform(s).** When making that decision, consider the following elements:
 - Web-based vs. software packages
 - Note that non-traditional, end-to-end, login-protected platforms may be offered during this time of national emergency, such as options like Skype, Zoom, FaceTime, Facebook Messenger, etc. Reference the following link for more information: <https://www.hhs.gov/hipaa/for-professionals/special-topics/emergency-preparedness/notification-enforcement-discretion-telehealth/index.html>
 - Patient privacy (use a HIPAA-compliant telehealth platform)
 - Accessibility and availability of IT support for providers and patients
 - Cost to the practice
 - Potential learning curve
 - Integration with an existing patient portal and / or practice management system
 - Secure patient communication options, including how patients will be contacted to confirm and initiate their telehealth visit
 - Appointment reminder options (for patients and providers)

Prepare to See Patients



- **Determine telehealth offerings.** Identify types of conditions most appropriate for telehealth visits and align with relevant billing codes. (BSM's Telemedicine Flow Chart & FAQs document can help.) Appropriate telehealth offerings will need to comply with guidelines around who may/may not perform these services in your state (typically technicians are precluded). Meanwhile, outline circumstances and develop related guidelines that will necessitate in-person visits.

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- **Update your templates.**
 - **Create a designated telehealth schedule template** for these appointments. Identify what information providers will need on the schedule to contact and interact with patients (i.e., the appropriate phone number, time of the appointment, the reason for the visit as known at the time of scheduling, etc.).
 - **Create a documentation workflow and checklist** for telehealth visits. Specifics may include:
 - Capturing a patient's verbal consent for technology use and potential coinsurance.
 - Charting documentation of time spent on the telehealth consultation.
- **Ensure billing and reimbursement processes are in place.**
 - **Contact individual primary payers** other than CMS for any billing and coding guidelines specific to telehealth encounters. (Payers have been advised to follow CMS rules.) **Note:** Payers may waive copays/coinsurance amounts; therefore, these should be checked for each payer to ensure collection of appropriate fees.
 - **Develop a tracking system for the billing department**, which may need to combine multiple visits for one patient over seven days before submitting a claim.
 - Note: For Medicare patients, previous **CMS restrictions on distant site practitioners** furnishing telehealth services from their homes have been lifted with no continued requirement to update Medicare enrollment with the provider's home location.
(<https://www.cms.gov/files/document/provider-enrollment-relief-faqs-covid-19.pdf>)
- **Safeguard Protected Health Information (PHI).** Providers should take appropriate measures to limit incidental disclosures of PHI, particularly when conducting telehealth visits in a location other than the practice.

Connect with Patients

Note: During the COVID-19 situation the standard telehealth restrictions, limiting access to established patients only, have been relaxed.



- **Create a script** for staff to offer telehealth options to new and existing patients who may contact the practice. Conduct a training for those managing patient communications.
- **Advertise your telehealth services** through the practice's website, portal, social media, or other communication methods that telehealth visits are available through the practice.
- **Conduct patient outreach.** Consider reaching out to patients who are due for an office visit (either a previously scheduled new patient visit or a follow-up appointment with an existing patient) to see if they would like to schedule an earlier telehealth visit.



Once your **telehealth services** are in place, consider scheduling **regular support team check-in meetings** to discuss lessons learned and make any necessary workflow updates.

For additional resources to aid your practice during this challenging time, visit <https://bsmconsulting.com/coronavirus-BSM-resources> or call us at 800-832-0609.