

Technology for Telehealth Services

Policy: It is the policy of [Organization name here] to ensure telehealth technology provides safe and quality health care services to qualified beneficiaries in a HIPAA-compliant environment.

Purpose: To explain the technology and HIPAA requirements for the provision of telehealth services, from a Medicare Rules and Regulations perspective.

Scope: This document is applicable for rural health clinics and federally qualified health centers (RHC/FQHC), in accordance with the rules and regulations of the Centers for Medicare & Medicaid Services (CMS). Each organization should check their state regulations for further requirements and opportunities.

*Temporary PHE Guidance**

“Payment for Medicare Telehealth Services: Section 3704 of the CARES Act authorizes RHCs and FQHCs to furnish distant site telehealth services to Medicare beneficiaries during the COVID-19 PHE.”

“Medicare telehealth services generally require an interactive audio and video telecommunications system that permits real-time communication between the practitioner and the patient. (During the PHE, some telehealth services can be furnished using audio-only technology.). RHCs and FQHCs with this capability “can provide and be paid for telehealth services furnished to Medicare patients located at any site, including the patient’s home, for the duration of the COVID-19 PHE.”

For further reading: <https://www.cms.gov/files/document/covid-rural-health-clinics.pdf>

For further reading: <https://www.cms.gov/files/document/omh-rural-crosswalk.pdf>

*Temporary guidance related to Public Health Emergency (PHE)

Procedures:

I. Population and Services for a Virtual-Type Visit.

A. Perform a market review for telehealth services.

1. Identify the patient population to be served (size, demographics).

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2. Survey stakeholders (both clinical and nonclinical) for input to identify the functionality needs of current and future services provided.
- B. Identify the technology requirements for the provider, clinic, and staff.
 1. A reliable, secure internet connection is needed to ensure quality care, patient safety, and information security compliance.
 2. An interactive audio and video telecommunications system that permits real-time communication between the provider at the distant site, and the patient at the originating site is required.
 3. Any computers/tablets/Smartphones should use passcodes and must have an adequate camera, speakers, microphone, and sufficient processor to run the required software.
 4. Identify the appropriate examination camera and other peripherals as indicated/needed (i.e., electronic stethoscope, otoscope, etc.)
- C. Identify the technology requirements for the patient.
 1. A reliable, secure internet connection is needed.
 2. An interactive audio and video telecommunications system that permits real-time communication between the patient at the originating site, and the provider at the distant site is required.
 3. Any computer/tablet/Smartphone should use a passcode, and must have an adequate camera, speakers, microphone.

II. Video Platform Considerations (Provider and Patient) for a Virtual-Type Visit.

- A. Keep the lighting source during the visit in front, or to the side, of the speaker. Avoid having the camera face a bright window.
- B. For the camera/image placement during the visit, fill the frame, do not be looking down, look at eye level, allow hand gestures to be seen.
- C. The background area engaging with patients should be neat, clean, free of distractions.
- D. Reduce background noise by utilizing mute features appropriately or consider using a headset.
- E. Consider the ease of connectivity to the internet and wi-fi connection during the visit.

III. Health Insurance Portability and Accountability Act (HIPAA) Requirements for the Virtual-Type Visit.

- A. Compliance with HIPAA should be to the greatest extent possible.
- B. Only authorized users must have access to a patient's private health information.
- C. A system of secure communication should be implemented to protect the patient information.
- D. A system of monitoring communications should be implemented to prevent accidental or intentional breaches.

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*Temporary PHE Guidance**

“The U.S. Department of Health and Human Services Office for Civil Rights issued a [Notification of Enforcement Discretion](#) to empower covered health care providers to use widely available communications applications without the risk of penalties imposed by the U.S. Department of Health and Human Services Office for Civil Rights for violations of HIPAA rules for the good faith provision of telehealth services.”

“A covered health care provider that wants to use audio or video communication technology to provide telehealth to patients during the COVID-19 nationwide public health emergency can use any non-public facing remote communication product that is available to communicate with patients.”

-Audio and video communication technology, such as Apple Facetime, Facebook Messenger video chat, Google Hangouts video, Skype, Zoom can be used. (although allowed, not highly recommended)

-Public facing is not allowed, to include Facebook Live, Twitch, TikTok, and similar video communication applications.

For further reading: <https://www.hhs.gov/hipaa/for-professionals/special-topics/emergency-preparedness/notification-enforcement-discretion-telehealth/index.html>

“During the COVID-19 Public Health Emergency, health care providers may use any non-public facing application to communicate with patients without risking any federal penalties – even if the application isn’t in compliance with the Health Insurance Portability Accountability Act of 1996 (HIPAA).”

For further reading: <https://telehealth.hhs.gov/providers/getting-started/#understanding-telehealth-technology-options>

IV. Knowledge and Skills of Telehealth Services for Clinic Personnel.

(Refer to RHC/FQHC Knowledge and Skills policy)

V. Patient Education and Support during the Virtual-Type Visit.

A. Provide the patient information of the telehealth process.

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- B. Ensure the patient has access to a stable internet and wi-fi connection.
- C. Explain the appropriate technology used for a telehealth visit (computer, telephone).
- D. Schedule the patient with an in-home pre-visit to set up equipment, if needed, or else provide the patient the option to bring their equipment into the office for a set-up and/or pre-visit test call.
- E. Supply handouts with step-by-step instructions for accessing online patient portals.
- F. Provide the patient with phone numbers, email addresses, and websites for IT support.
- G. Consider federal and non-profit organization support for those patients who cannot afford internet or phone services.

<https://telehealth.hhs.gov/providers/preparing-patients-for-telehealth/>

TIPS:

- *Patients should be advised of video platform considerations prior to meeting with their physician or practitioner. Wi-fi connectivity should be confirmed and tested.*
- *Providers should notify patients that any third-party application could potentially introduce privacy risks, and providers should enable all available encryption and privacy modes when using such applications.*
- *Practices need to determine if business associate agreements (BAA) with the platform vendor and other facilities are in place to ensure HIPAA compliance.*
- *Consider superusers to specifically provide patient education and 1:1 support.*