Rural Health Clinic/Federally Qualified Health Center
Originating Site Requirements for Telehealth Services

gpTRAC Great Plains Telehealth Resource & Assistance Center

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

Purpose: To explain the Originating Site 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*

"The RHC or FQHC practitioner can respond from any location during a time that they are scheduled to work for the RHC or FQHC."

For further reading: https://www.cms.gov/files/document/medicare-telehealth-frequently-asked-questions-faqs-31720.pdf

"Medicare can pay for many types of office, hospital, and other visits furnished via telehealth across the country and including in patient's places of residence. Additionally, the HHS OIG is providing flexibility for healthcare providers to reduce or waive cost-sharing for telehealth visits paid by federal healthcare programs."

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

"While they must generally travel to or be located in certain types of originating sites such as a physician's office, skilled nursing facility or hospital for the visit, effective for services starting March 6, 2020 and for the duration of the COVID-19 Public Health Emergency, Medicare will make payment for Medicare telehealth services furnished to beneficiaries in any healthcare facility and in their home."

For further reading: https://www.cms.gov/newsroom/fact-sheets/medicare-telemedicine-health-care-provider-fact-sheet

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*Temporary guidance related to Public Health Emergency (PHE)

Procedures:

I. **Population and Services for a Virtual-Type Visit.**
    A. If utilizing an originating site, the originating site should meet the following:
        1. The originating site must be located within a Health Professional Shortage Area (HPSA).
        2. The originating site must be one of the following types of health facilities:
            a) Physicians or practitioner offices
            b) Hospitals
            c) Critical Access Hospital (CAH)
            d) Rural Health Clinics
            e) Federally Qualified Health Centers
            f) Hospital-based or CAH-based Renal Dialysis Centers
            g) Skilled Nursing Facilities (SNF)
            h) Community Mental Health Centers (CMHC)
    B. Providers will use their clinical judgement to identify patients for telehealth services.
    C. Telehealth services will be integrated alongside face-to-face clinical activities.
    D. For patients in need of emergency care, the same emergency procedures should apply that were in place prior to offering telehealth services.
    E. For patients in need of referrals, the same procedures apply that were in place prior to offering telehealth services.
    F. Telehealth services provided at the originating site.
        1. Medicare telehealth visits

II. **Preparation for a Telehealth Visit at the Originating Site.**
    A. Complete appropriate preparation prior to a virtual-type visit.
        1. The patient needs to be scheduled at the originating site for the use of space and technology for the connection with the distant site.
        2. The originating site must have a stable internet and the appropriate technology to participate in the visit.
            (**Refer to RHC/FQHC Technology policy**)
    B. Complete appropriate preparation the day before a virtual-type visit.
        1. Ensure connectivity at the originating site can be established.
            a) Virtual test visit.
        2. The patient will receive a reminder of the visit and told to come in 15 minutes prior to appointment time to establish connection with the distant site.
            a) An email with a link (encrypted) may be sent to the patient.
            b) The patient may be sent a text message.
            c) A phone call may also serve as a reminder.
                (**Refer to RHC/FQHC Distant Site policy**)

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C. Complete appropriate actions the day of the virtual-type visit.
   1. The patient must be prepared for the visit.
       a) Bring the patient to the telehealth room (take vital signs, review medication list, document intake information in the originating site EMR, etc.).
       b) Ensure all necessary technology is available and working. **(Refer to RHC/FQHC Technology policy)**
       c) Have personnel stay with the patient until all information has been communicated to the distant site provider and the staff has been dismissed.
       d) Provide the patient with a means to call for assistance (call light, bell, etc.) or remain with the patient when needed for safety or as requested.
D. Complete appropriate actions following the virtual-type visit.
   1. Facilitate any discharge instructions and follow-up as indicated by the distant site.

III. **Documentation Requirements of the Telehealth Visit.**
   A. Document any intake information, to include, but not limited to:
       1. All vital signs must be documented, along with the time taken.
       2. The medication review must include any changes to current medications being taken.
       3. Indicate originating site for specific distant site visit ("Originating site for cardiology appointment with Dr. XXX at XXX distant site."). **(Refer to RHC/FQHC Documentation policy)**