Primary Care
Originating Site Requirements for Telehealth Services

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 primary care practices, 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*

"CMS has issued temporary measures to make it easier for people enrolled in Medicare, Medicaid, and the Children's Health Insurance Program (CHIP) to receive medical care through telehealth services during the COVID-19 Public Health Emergency.

Some of these changes allow providers to:

-Conduct telehealth with patients located in their homes and outside of designated rural areas
-Proactive remote care, even across state lines, through telehealth
-Deliver care to both established and new patients through telehealth
-Bill for telehealth services (both video and audio-only) as if they were provided in person

For further reading: https://www.hhs.gov/coronavirus/telehealth/index.html

"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

*Temporary guidance related to Public Health Emergency (PHE)

Temporary PHE Guidance*

"Medicare beneficiaries will be able to receive a specific set of services through telehealth including evaluation and management visits (common office visits), mental health counseling and preventive health screenings. This will help ensure Medicare beneficiaries, who are at a higher risk for COVID-19, are able to visit with their doctor from their home, without having to go to a doctor's office or hospital which puts themselves and others at risk."

Under the waiver, limitations on where Medicare patients are eligible for telehealth will be removed during the emergency. In particular, patients outside of rural areas, and patients in their homes will be eligible for telehealth services, effective for services starting March 6, 2020."

"Starting March 6, 2020 and for the duration of the COVID-19 Public Health Emergency, Medicare will make payment for professional services furnished to beneficiaries in all areas of the country in all settings."

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

"Building on prior action to expand reimbursement for telehealth services to Medicare beneficiaries, CMS will now allow for more than 80 additional services to be furnished via telehealth. During the public health emergencies, individuals can use interactive apps with audio and video capabilities to visit with their clinician for an even broader range of services. Providers also can evaluate beneficiaries who have audio phones only. These temporary changes will ensure that patients have access to physicians and other providers while remaining safely at home."

For further reading: https://www.cms.gov/files/document/mln-connects-special-edition-3-31-2020.pdf

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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

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       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 to connect with the distant site.
    2. The originating site must have a stable internet and the appropriate technology to participate in the visit.
       (**Link to Primary Care 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.
       (Link to Primary Care Distant Site policy)
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.
            (Link to Primary Care 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.). 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.")
        (Link to Primary Care Documentation policy)