

Welcome to the Telehealth ECHO Practice Management (and Forms)



Funding

This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award totaling \$6,000,000 with no percentage financed with nongovernmental sources. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by HRSA, HHS or the U.S. Government.



- **For educational and quality improvement purposes, we will be recording this video-session**

- By participating in this clinic you are consenting to be recorded – we appreciate and value your participation

- If you have questions or concerns, please use the chat or email shanna.peters@kansasaap.org



Housekeeping

- This session will be recorded for educational and quality improvement purposes.
- Please do not provide any protected health information (PHI) during any ECHO session.
- IT Trouble? Chat with Amy Trollinger or email amy.trollinger@kansasaap.org

Please turn on your video!

Please enter your name and organization in the chat box.

Introduce Yourself



Please mute your microphone when not speaking.

Microphones



5 min: Introduction
25 min: Lecture
5 min: QI Review
20 min: Case/Discussion
5 min: Close

Agenda



Today's ECHO Faculty

- Stephanie Kuhlmann, DO, FAAP
- Kristen Stuppy, MD, FAAP
- Kathy Farrell, MD, FAAP



Telehealth ECHO Practice Management (and Forms)

Stephanie Kuhlmann, DO, FAAP



Disclosures

- I have no relevant financial relationships with the manufacturers(s) of any commercial products(s) and/or provider of commercial services discussed in this CME activity
- I do not intend to discuss an unapproved/investigative use of a commercial product/device in my presentation.



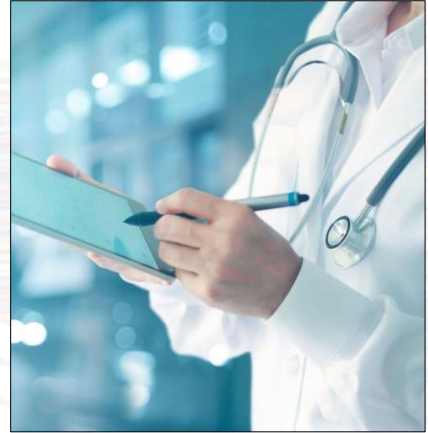
Objectives

- Highlight additional practice tips
- Provide template examples and resources for forms
- Discuss what happens beyond the pandemic



Stay aware

- The field of telehealth is exponentially growing
- Laws rapidly changing
- Ensure your practice is staying up to date
- Consult with legal counsel
- Consult with malpractice coverage
- Have a strong administrative leader who is well versed and trained in telehealth methods and compliance



Keep it simple

- Make sure your methods and processes are streamlined
- Use administration tools (scheduling, documenting, billing, etc.) that are easy to use
- Keep the end user in mind
- Develop a proper documentation protocol

Ensure success

- Successful implementation is a team effort
 - Clarify roles and expectations
 - Open communication and feedback
- Visualize the workflow from all stakeholder's perspectives
 - Ensure alignment
- All staff should be trained and aware
 - Start with those that are most enthusiastic
 - Identify a “super user” for on-going training and assistance



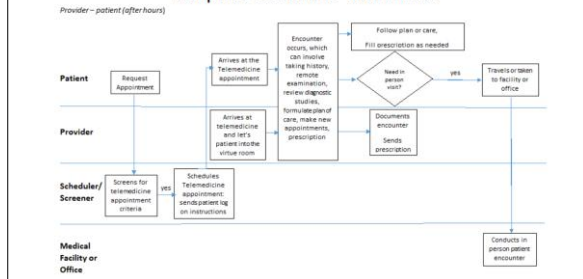
Monitor and improve

- Have routine meetings for feedback
 - Evaluate strengths and weaknesses routinely
 - Centralize feedback
- Establish a baseline and set success metrics
 - Track outcomes
- Utilize Quality Improvement methodology
 - Make adjustments or implement new ideas in a structured and organized manner



Sample Documents (aap.org)

Template 'Swimlane' Workflows



Telehealth Visit Protocol

This document provides a basic format for a telehealth session. The framework can be adapted to any telehealth practice. It is recommended that any clinic practice is adapted for telehealth visits, including confirming clinic appointment, documenting patient arrival time, integrating within the clinic workflow, and obtaining patient consent (if applicable). Further, if telehealth visits occur between two providers, it is recommended that the providers determine which side will take the lead during the visit.

Step 1.

- Test the equipment prior to the first clinic appointment (preferably 20-30 minutes prior to the visit). This should be tested by the information technology staff at both sites.
- Connect and test the peripheral equipment.
- Troubleshoot any technology glitches.
- Collect a roster of key staff contacts at each site (including cell phone numbers, email, and a landline phone number in the event of technical difficulties).
- Ensure that the camera and equipment is ready for use.

Step 2.

- Document the patient arrival and place patient in the clinic room.
- Obtain a signed consent, if applicable.
- Review the protocol of the telehealth visit and explain what the patient can expect.

Step 3.

- Alert the provider that the patient is ready and send the provider into the room.
- Request that introductions begin at patient site. Include everyone in the room.
- Begin the visit, per protocol.
- Obtain a history and physical exam, as applicable.
- Review medication, applicable.
- Develop a plan of care with the team.
- Identify a follow-up plan.
- Document the visit (both sites).
- Evaluate the visit.
- Conclude visit.
- Process payment.
- Clean and store equipment and peripherals.

Disclaimer: This sample document is provided only as a reference for practices developing their own materials and may be adapted to local needs. This document may or may not represent official AAP policy or guidelines and the AAP is not responsible for its use. You should consult an attorney who is knowledgeable about the laws of the jurisdiction in which you practice before creating or using any legal documents.



Sample Documents (aap.org)

Telehealth Patient Recruitment Sample Letter

The announcement of a new telehealth service to your practice may be shared broadly through your practice website or on an individual basis with a family that you believe might benefit from a telehealth visit. It can also be helpful to have a handout to utilize for discussion with your patients and families.

(Name of practice)

Dear (patient and family name),

We are able to offer you an opportunity to connect with a specialist through our telehealth program. Telehealth practice uses live or real time video and sound to connect you with your specialist who is at a different location. You will be in our clinic and the specialist is in her clinic. You will travel only as far as our office for the telehealth appointment.

The telehealth appointment is as private as if you were in the specialist office. We use secure software to connect to the specialist. During the visit a (INSERT WHO WILL BE IN THE ROOM (eg nurse, medical assistant, doctor)) will be in the exam room with you. The specialist will be in her clinic. We will all be able to see and hear each other during the appointment. Telehealth will help us coordinate your child's care. We will be able to talk about diagnosis and treatment plans together.

One of our nurses may be calling you to ask if you would be interested in participating in our telehealth program.

Sincerely,

Name _____
Title _____

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Sample Documents (aap.org)

TELEHEALTH ACKNOWLEDGEMENT FORM

Patient's Name: _____ Birthdate: _____

1. I understand that my health care provider, _____, has recommended to me that I engage in a telehealth appointment with _____ provider.

2. My health care provider has explained to me how the telehealth technology will be used to connect me with a provider. Telehealth appointments may be conducted by videoconferencing, video images, still (high quality photo) images, or by telephone conference. I understand that this appointment will not be the same as a direct patient/health care provider visit due to the fact that I will not be in the same room as my health care provider. I understand that the health care provider may use devices such as a stethoscope or otoscope or other peripheral devices to assist in the examination.

3. I understand there are potential risks to this technology, including interruptions, unauthorized access and technical difficulties. I understand that my health care provider or I can discontinue the telehealth appointment if it is felt that the videoconferencing connections are not adequate for the situation. I understand that I can discontinue the telehealth appointment at any time.

4. I understand that my healthcare information may be shared with other individuals for scheduling and billing purposes. Others may also be present during the appointment other than my healthcare provider and specialty health care provider in order to operate the equipment. The above mentioned people will all maintain confidentiality of the information obtained. I further understand that I will be informed of their presence during the consultation and thus will have the right to request the following: (1) omit specific details of my medical history/physical examination that are personally sensitive to me; (2) ask non-medical personnel to leave the telehealth examination room; and/or (3) terminate the telehealth appointment at any time.

5. I have had the alternatives to a telehealth appointment explained to me, and in choosing to participate in a telehealth appointment, I understand that some parts of the exam involving physical tests may be conducted by individuals at my location at the direction of the specialty health care provider or the primary care provider.

6. In an emergency situation, I understand that the responsibility of the telehealth specialist or provider may be to direct me to emergency medical services, such as emergency room. Or the telehealth provider may discuss with and advise my local provider. The telehealth specialist's or provider's responsibility will end upon the termination of the telehealth connection.

7. I understand that billing for the telehealth consultation may occur from 1) the primary care provider and 2) telehealth provider, and 3) as a facility fee from the site from which I am presented. Billing is at the discretion of the provider. Billing procedures will be explained to me.

8. I have read this document carefully, and understand the risks and benefits of the telehealth appointment and have had my questions regarding the procedure explained and I hereby consent to participate in a telehealth appointment visit under the terms described herein.

Patient/Guardian signature

Date and Time

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1



Transitioning from the pandemic

- Will it stay or not?
 - Expansion of the originating site
 - Expansion of providers
 - Expansion of services
 - Expanded use of technology
- What needs more answers?
 - Licensure/credentialing
 - HIPPA/privacy
 - Broadband/connectivity
 - Reimbursement from health plans



What have we learned?

“The unprecedented increase in telehealth use during the current crisis is both a challenge and an opportunity to assess its impact on access to care, the quality of care, and the financial impact on the health care system.”



<https://www.ama-assn.org/practice-management/digital/what-physicians-need-do-optimize-telehealth-after-pandemic>



Where do we go?

“Enacting coverage parity, providing fair payment; requiring insurers to allow all contracted physicians to receive reimbursement for remote visits, expanding acceptable modalities increasing digital literacy, and addressing geographical and originating site barriers are among the areas that need to be addressed.”



<https://www.ama-assn.org/practice-management/digital/what-physicians-need-do-optimize-telehealth-after-pandemic>

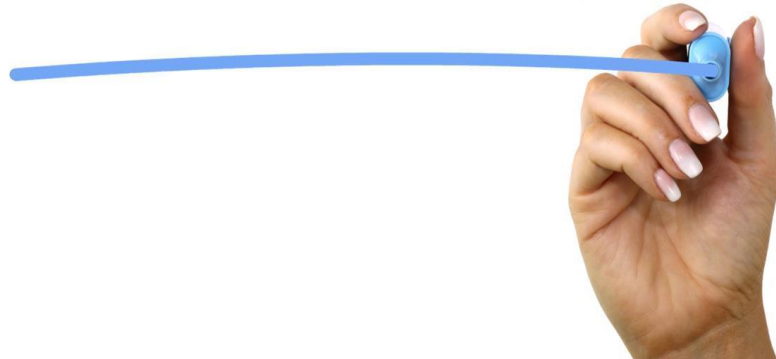


References and Additional Resources

- [TELEHEALTH \(healthit.gov\)](https://healthit.gov)
- [MATRC Telehealth Resources for COVID-19 Toolkit – MATRC](#)
- https://youtu.be/J_Fr-eMtv20
- [Heartland Telehealth Resource Center | Telehealth Solutions \(heartlandtrc.org\)](#)
- [Telehealth 2 rev.pdf \(aap.org\)](#)
- [Sample-Telehealth-Policies-and-Procedures.pdf \(matrc.org\)](#)
- [AMA® Telehealth Implementation Playbook | AMA \(ama-assn.org\)](#)
- [Trends in the Use of Telehealth During the Emergence of the COVID-19 Pandemic — United States, January–March 2020 | MMWR \(cdc.gov\)](#)



QUESTIONS



Case Presentation

Questions and Discussion

- Patient with potential ADHD who need a workup
 - How do I get the Conners or Vanderbilt forms filled out by parent and teacher for their evaluation?
- 18-month-old Well Child Check and/or potential developmental delay
 - How do I get the ASQ and MCHAT to the parent's parent prior to evaluation?
- Newborn Well Child Check
 - How do I do the maternal depression screening (Edinburg PPD scale)?
- Teenager with a potential mood disorder
 - How do I get the PHQ-9a (or any other testing) to them?
- 5 year old with Autistic like behaviors
 - How do I administer the CAST or other screening?

