Telemedicine and COVID-19: What You Need Know Moving Forward

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DISCLAIMER:

Due to the rapidly changing conditions and information surrounding COVID-19, some information shared in this presentation may have changed. Follow CDC for updates and guidelines.

GPT is not offering medical advice.
This presentation will simply demonstrate how telehealth can be implemented to assist in treating patients with and without COVID-19.

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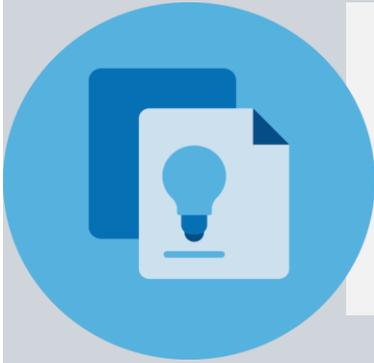
Learning Objectives

- Describe the role of telemedicine with community mitigation as related to COVID-19
- Describe benefits of virtual front-line screening for COVID-19
- Describe regulatory considerations for providers offering telemedicine consultations

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COMMUNITY MITIGATION is a set of actions that persons and communities can take to help slow the spread of respiratory virus infections. Community mitigation is especially important before a vaccine or drug becomes widely available.

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Factor	Potential mitigation activities according to level of community transmission or impact of COVID-19 by setting		
	None to Minimal	Minimal to moderate	Substantial
Healthcare settings and healthcare provider (includes outpatient, nursing homes/long-term care facilities, inpatient, telehealth) "What healthcare settings including nursing homes/ long-term care facilities, can do to prepare for COVID-19, if the facilities has cases of COVID-19, or if the community is experiencing spread of COVID-19"	• Provide healthcare personnel ([HCP], including staff at nursing homes and long-term care facilities) and systems with tools and guidance needed to support their decisions to care for patients at home (or in nursing homes/long-term care facilities). • Develop systems for phone triage and telemedicine to reduce unnecessary healthcare visits. • Assess facility infection control programs; assess personal protective equipment (PPE) supplies and optimize PPE use. • Assess plans for monitoring of HCP and plans for increasing numbers of HCP if needed. • Assess visitor policies. • Assess HCP sick leave policies (healthcare facilities should provide non-punitive sick leave options to allow HCP to stay home when ill). • Encourage HCP to stay home and notify healthcare facility administrators when sick. • In conjunction with local health department, identify exposed HCP, and implement recommended monitoring and work restrictions. • Implement triage prior to entering facilities to rapidly identify and isolate patients with respiratory illness (e.g., phone triage before patient arrival, triage upon arrival).	• Implement changes to visitor policies to further limit exposures to HCP, residents, and patients. Changes could include temperature/ symptom checks for visitors, limiting visitor movement in the facility, etc. • Implement triage before entering facilities (e.g., parking lot triage, front door, phone triage, and telemedicine to limit unnecessary healthcare visits. • Actively monitor absenteeism and respiratory illness among HCP and patients. • Actively monitor PPE supplies. • Establish processes to evaluate and test large numbers of patients and HCP with respiratory symptoms (e.g., designated clinic, surge tent). • Consider allowing asymptomatic exposed HCP to work while wearing a facemask. • Begin to cross train HCP for working in other units in anticipation of staffing shortages. https://www.cdc.gov/coronavirus/2019-ncov/downloads/community-mitigation-strategy.pdf	• Restrict or limit visitors (e.g., maximum of 1 per day) to reduce facility-based transmission. • Identify areas of operations that may be subject to alternative standards of care and implement necessary changes (e.g., allowing mildly symptomatic HCP to work while wearing a facemask). • Cancel elective and non-urgent procedures • Establish cohort units or facilities for large numbers of patients. • Consider requiring all HCP to wear a facemask when in the facility depending on supply.

TeleHealth

Telehealth can play a significant role in community mitigation.

While being easy and convenient for both the provider and the patient, telehealth allows for:

✓ Isolation of patients at home while still maintaining their medical care

✓ Care for patients that aren't related to COVID-19 and who are afraid to come into the provider's office

✓ Remote Patient Monitoring

TeleHealth

Telehealth: Frontline COVID-19 Screening Model

Grand Rapids, Michigan-based Spectrum Health, which features 15 hospitals and 11 urgent care centers, has implemented telemedicine screening for COVID-19.

According to the CMO, Dr. Darryl Elmouchi, Telemedicine is a good fit for screening. It is a matter of asking the appropriate questions and ensuring that you have the right answers and a triage plan. You can't do a full examination of someone at home with telemedicine, but you can screen to determine whether someone is at low risk or is at high risk and in need of nonurgent or urgent care.

Benefits of Virtual Screening:
✓ It is much more convenient for people to be screened in their homes rather than having to visit an emergency room or urgent care center. The convenience should help lower a barrier to getting screened.
✓ From a public health standpoint, telemedicine screening can help avoid inundating healthcare settings with patients who are at low risk of having COVID-19, which maintains capacity to treat patients who are at high risk.
✓ The telemedicine screening can help prevent the spread of COVID-19 in that for those patients who are not critically ill, they can be triaged at home rather than visiting an emergency room or clinic, where other people could become infected.

Source:
*Health*Leaders Media
Darryl Elmouchi, MD, MBA, Chief Medical Officer, Spectrum Health, Grand Rapids, MI

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Consider which patients are candidates for virtual telemedicine visits during this crisis.

✓ Non-COVID-19 Patients
    Those at low risk

✓ Patients with Chronic Diseases
    Those at high risk

✓ COVID-19 Presumptive / Positive Patients
    Those in isolation at home

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Care and Treatment of Non-COVID 19 Patients

Who: Patients who are not at risk for COVID-19

WHY	HOW	WHEN
For patients experiencing no COVID-19 symptoms and who are merely seeking medical treatment for non-serious conditions or who need medical follow-up, patients can safely remain at home while having virtual contact with care providers.	Components and considerations: • Reliable internet connectivity • Appropriate device with video/audio capabilities	Your medical practice can begin seeing patients virtually almost immediately. *medical judgement should always be used to maintain the safety of the patient

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Care and Treatment of Patients Needing Medical Monitoring

Who: Patients with chronic medical conditions

WHY	HOW	WHEN
Patients with chronic medical conditions will need to be medically monitored and can not or should not go into the provider's office.	Components and considerations: • Reliable internet connectivity • Appropriate device with video/audio capabilities • Thermometer, BP cuff, weight scales any other required device to gather needed vital signs	Your medical practice can begin a remote patient monitoring program almost immediately *medical judgement should always be used to maintain the safety of the patient

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WHY	HOW	WHEN

Patient Isolation at Home

Who: Presumptive/Positive Coronavirus patients

WHY

For patients experiencing mild to moderate symptoms with no risk factors, patients can safely isolate at home while having virtual contact with care providers. This prevents the unnecessary need for a patient to travel for on-going medical care.

HOW

Components and considerations:

- Reliable internet connectivity
- Appropriate device with video/audio capabilities
- Thermometer, BP cuff, any other required device to gather needed vital signs

WHEN

Based on sound medical judgement and criteria described by CDC and other authority organizations, patients can be seen at home as early as the first symptoms.

*medical judgement should always be used to maintain the safety of the patient

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Telehealth Considerations for Providers

Source:
HIT Consultant
By Husch Blackwell Attorneys

1. Licensure. Physicians must continue to hold appropriate licensure to provide services to patients in other states and follow the applicable licensure and telehealth laws;

2. Scope of Practice. Be mindful that applicable state Practice Acts for non-physician practitioners remain in effect and take steps to ensure that telehealth services are rendered only by appropriately licensed and supervised practitioners;

3. Credentialing. Physicians rendering services must hold appropriate credentialing at hospitals, when applicable;

4. Controlled Substance Prescribing. Any prescribing of controlled substances must be done in accordance with the telemedicine limitations set forth under the Ryan Haight Act;

5. Data Privacy and Security. The Coronavirus Appropriations Act makes no mention of the Health Insurance Portability and Accountability Act ("HIPAA") or its implementing regulations. Providers should continue to provide telehealth services via HIPAA-compliant telecommunications methods; enter into business associate agreements with technology vendors, when applicable; and comply with the minimum necessary standard for disclosures of protected health information;

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What about hardware & software?

Q: Is any specialized equipment needed to furnish Medicare telehealth services under the new law?

A: Currently, CMS allows for use of telecommunications technology that have audio and video capabilities that are used for two-way, real-time interactive communication. For example, to the extent that many mobile computing devices have audio and video capabilities that may be used for two-way, real-time interactive communication they qualify as acceptable technology.

The new waiver in Section 1135(b) of the Social Security Act explicitly allows the Secretary to authorize use of telephones that have audio and video capabilities for the furnishing of Medicare telehealth services during the COVID-19 PHE.
In addition, effective immediately, the HHS Office for Civil Rights (OCR) will exercise enforcement discretion and waive penalties for HIPAA violations against health care providers that serve patients in good faith through everyday communications technologies, such as FaceTime or Skype, during the COVID-19 nationwide public health emergency.

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Steps for Seeing Patients during COVID-19 Pandemic Using Telehealth

Telehealth is ideal for this type of highly contagious disease, not just in pandemic situations. By following the guidelines set forth by the CDC and using your own medical judgment, telehealth can help reduce the risk of transmission.

1

Create Logistics Around Provider Scheduling

Options:
- Patients will call provider office
- Patients will schedule via online portal

2

Interview/Screen Patient

Follow CDC's Guidance for Health Professionals

3

Determine Treatment/Next Steps

- Determine risk factors for patient
- Decide if testing for COVID-19 is needed and refer to testing location
- If COVID-19 is not suspected, order medical treatments as indicated

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What provisions have private insurance plans implemented during this pandemic?

Source:
AHIP
America's Health Insurance Plans is the national association whose members provide coverage of healthcare & related services across America.

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- Will waive co-pays for all diagnostic testing related to COVID-19
- Zero co-pay telemedicine visits for any reason, and it is extending its Medicare Advantage virtual evaluation and monitoring visit benefit to all fully insured members
- People diagnosed with COVID-19 will receive a care package

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Anthem

- Will cover the cost of coronavirus testing with no out-of-pocket cost
- Prior authorization is not required for diagnostic services related to COVID-19 testing
- Recommends using telehealth when possible to help prevent the spread of a virus
- Will waive co-pays when patient uses Anthem's telehealth program, *LiveHealth Online*

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Humana

- Will waive out-of-pocket costs associated with COVID-19 testing. This applies to Medicare Advantage, Medicaid, and commercial employer-sponsored plans.
- Waiving telemedicine costs for all urgent care for the next 90 days
- Allowing early refills on regular prescription medications

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We Can Help!

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912-285-0902

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