

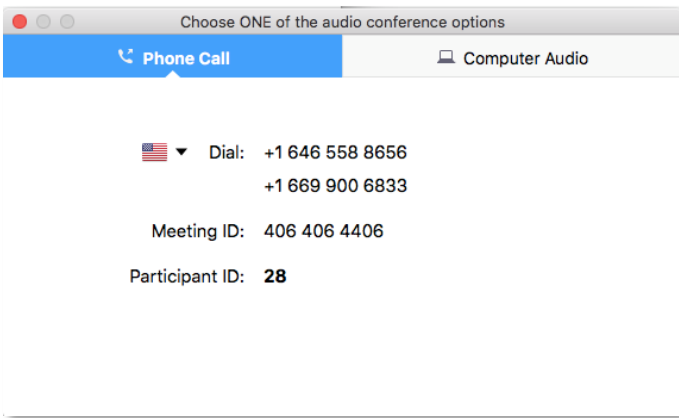


Telehealth Tuesday

SEPTEMBER 15, 2020

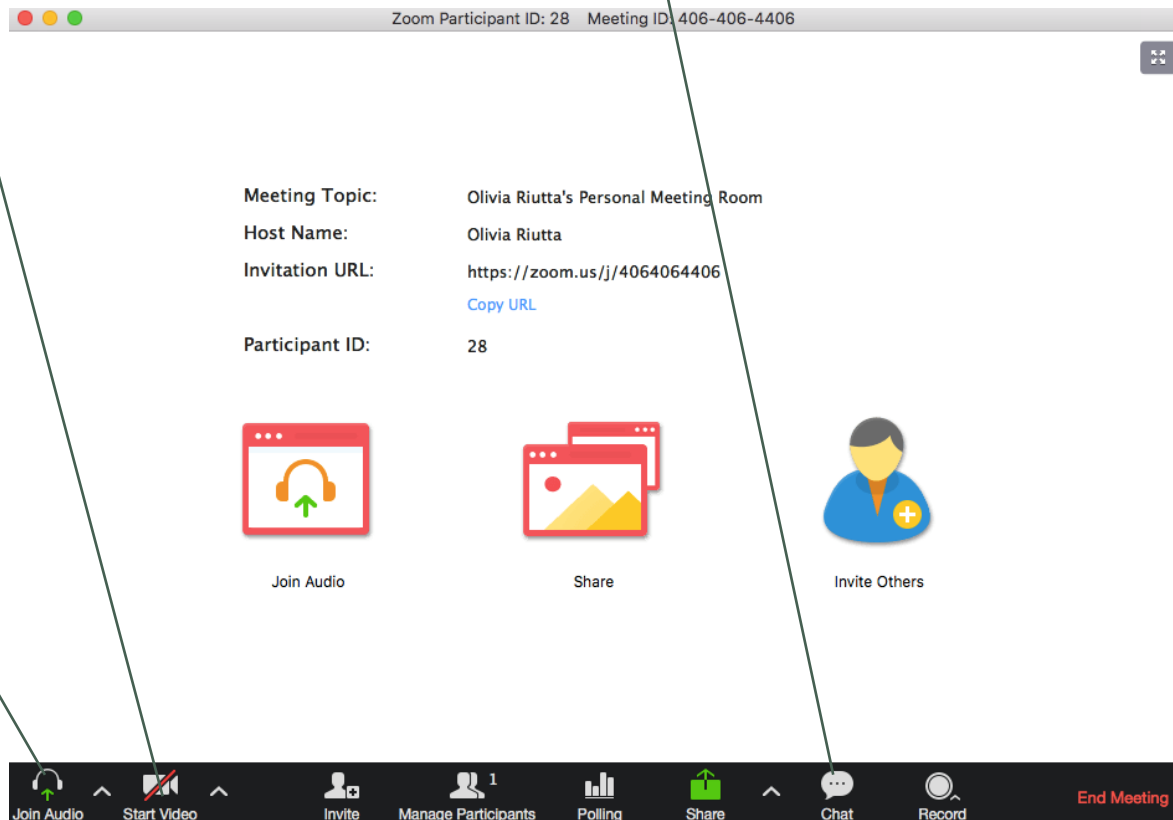
Zoom tips and tricks!

CHAT: Please jump in if you have something to share, but we also have this nifty chat function.



VIDEO: We want to see you!
If your camera isn't on, start your video by clicking here.

ATTENDANCE: If there are multiple attendees together on the call, please list the names and your location in the chat box



AUDIO: You can use your computer speakers or your phone for audio. The phone is generally better quality. If you click "Join Audio," this "Choose one..." box will pop up. If you dial in, just make sure you include your audio code.

MUTE/UNMUTE: *6 or click the mic on the bottom left of your screen.



Agenda

- Upcoming Events
- Temporary Medicare Changes and Telehealth Legislative Updates
- Evaluation and Planning Considerations
- Telehealth Toolkits and Resources
- Q&A

Upcoming HCCN Sessions

TELEHEALTH TUESDAY SESSIONS

3rd Tuesday of each month at 11:00 a.m.

October 20

November 17

December 15

Azara Healthcare 2020 Virtual Conference

September 22-24

MPCA Events

OTHER HCCN EVENTS

HIPAA Series: Save the Dates

Thursday, September 24 at 11:00 a.m.
The Path to 42 CFR, Part 2, Past, Present
and Future”

Thursday, December 17 at 11:00 a.m.



2020 Montana Healthcare Conference
October 5 – 9, 2020



Temporary Medicare Changes

MEDICARE ISSUE	CHANGE
Geographic Limit	Waived
Site limitation	Waived
Provider List	Expanded
Services Eligible	Added additional 80 codes
Visit limits	Waived certain limits
Modality	Live Video, Phone, some srvs
Supervision requirements	Relaxed some
Licensing	Relaxed requirements
Tech-Enabled/Comm-Based (not considered telehealth, but uses telehealth technology)	More codes eligible for phone & allowed PTs/OTs/SLPs & other use



Source: Center for Connected Health Policy



Temporary Medicare Changes

	POLICY CHANGE	STATUTORY OR ADMINISTRATIVE CHANGE NEEDED
1.1	Removal of the geographic limitation on where telehealth can take place.	To remove would require Congressional action.
1.2	Allowing any type of site/building a patient is located in to be an eligible location.	Would require Congressional action.
1.3	Allowing the use of audio-only to provide some services.	Would not technically require a statutory change, but CMS may not act without legislative permission. Current federal law only says the modality must be a “telecommunications system” but did not define it. CMS in regulations have defined it as an “interactive telecommunications system” that excludes audio-only.
1.4	Allowed all Medicare providers to be eligible providers.	Would require Congressional action.
1.5	Expansion of eligible services to be provided via telehealth from a list of 115 to 240.	CMS can make these change administratively without Congressional Action



Source: Center for Connected Health Policy



Challenges for FQHCs

- Prior to the PHE, FQHC's couldn't bill distant site due to original list of practices allowed under the Social Security Act.
- An addendum was made for the PHE to add FQHC's, but at a fee schedule rate
- \$92.03 for TH Services which is below the bundled rate
- Concerns on administrative burden around billing, cost reports, coding, etc.
- Agreement from FQHCs language needs to be replaced with a fundamental fix
- [H.R. 7187 Health Act of 2020](#): To amend title XVIII of the Social Security Act to provide for permanent payments for telehealth services furnished by Federally qualified health centers and rural health clinics under the Medicare program.



Legislative Updates- Federal

- 12 Senate Bills in support of Telehealth through the Public Health Emergency and beyond
- 10 House Versions in support of preserving telehealth through the end of the public health emergency
- [H.R. 7992](#) Telehealth Act combines 9 previous telehealth bills mixed from House and Senate
 - [HR 7338: The Advancing Telehealth Beyond COVID-19 Act](#)
 - [HR 5473: The EASE Behavioral Health Services Act](#)
 - [S 4039: The Telemedicine Everywhere Lifting Everyone's Healthcare Experience and Long-Term Health \(TELEHEALTH\) HSA Act](#)
 - [HR 3228: The VA Mission Telehealth Clarification Act](#)
 - [HR 4900: The Telehealth Across State Lines Act](#)
 - [S 4103: The Telehealth Response for E-prescribing Addiction Therapy Services \(TREATS\) Act](#)
 - [HR 7233: The KEEP Telehealth Options Act](#)
 - [S 3988: The Enhancing Preparedness Through Telehealth Act](#)
 - [HR 7187: The HEALTH Act](#)





Telehealth Modalities



Live Video
(aka Synchronous)
Virtual Patient Visits



Store and Forward
(aka asynchronous)
Retinal Screens, Dermatology,
Radiology, Glucose Uploads



Remote Patient Monitoring
Can be Synchronous or
Asynchronous



Mobile Health/mHealth

Planning for your Telehealth Future

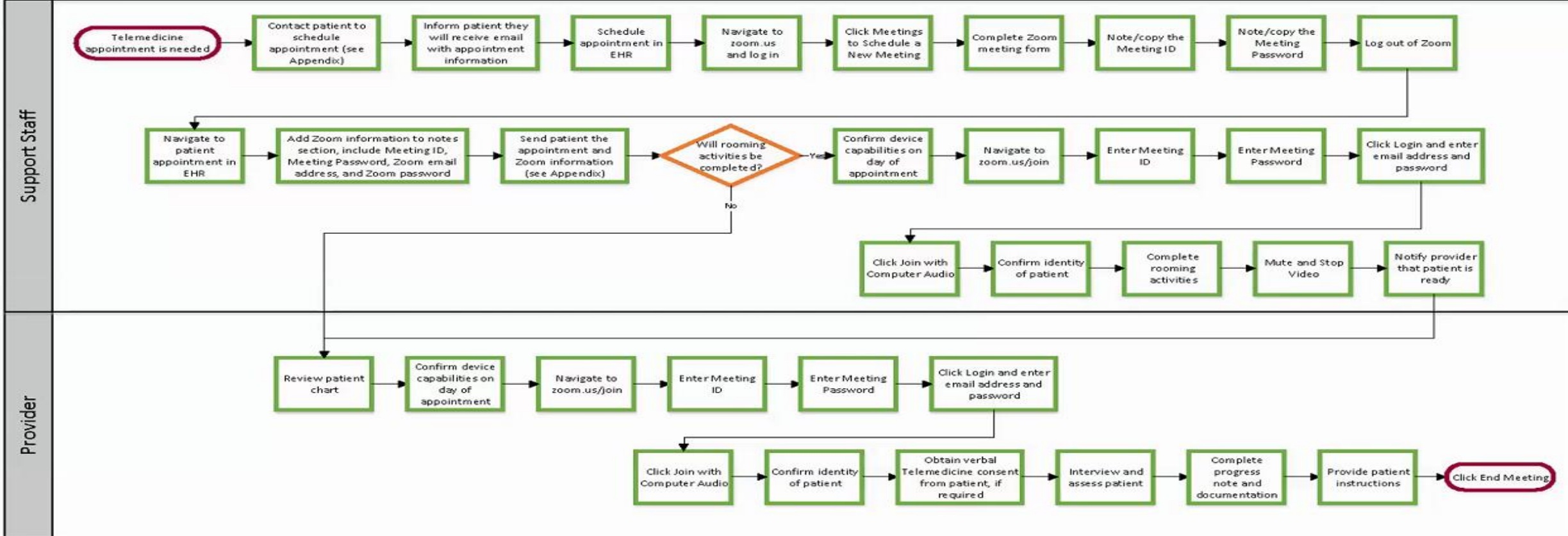


Sample Workflow

Clinic-to-Patient Non-Integrated Zoom Telemedicine – Agnostic

Workflow for a clinic to schedule and complete a stand-alone (non-integrated) Zoom telemedicine visit with a patient, who is not in the clinic.

April 3, 2020



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Telehealth Toolkits

NACHC Telehealth Implementation Quick Guide

- Reimbursement and Legal Considerations
- Operationalizing Telemedicine and Telephone Visits
- Clinical Workflow Toolkit

National Consortium of Telehealth Resource Centers Resources

NRTRC Telehealth Toolkits

- Remote Patient Monitoring Toolkit
- Telemental Health Toolkit
- Telehealth Marketing Toolkit



Questions?



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