

Telehealth Visit Checklist for Providers

Making Telehealth Part of Your Daily Practice

Why Telehealth?

Telehealth offers the opportunity to have continuity of care without the difficulties and risk associated with travel to a physical location. For the end stage renal disease (ESRD) patient population, using telehealth to supplement on-site appointments helps to lower exposure to adverse events. If utilized effectively, for the vulnerable patient population telehealth can increase patient options for interaction with the healthcare team.

How to use Telehealth effectively:

Use this checklist to assure all team members hosting telehealth visits are following the same professional standards as they would in an in-person appointment. Listed are some key considerations to review when preparing to use telehealth.

Getting Started: Tips for Consideration

1.Engage Patients

- » Remind patients that virtual visits can be an option during pandemics or weather emergencies, as a way to avoid missing visits with your doctor, ultimately avoiding complications and hospitalizations.
- » Educate patients about telehealth and its benefits.
- » Explain to patients receiving home dialysis that after the initial three months of dialyzing at home the dialysis team can schedule virtual visits for two of three visits each quarter.
- » Educate staff on the utilization of telehealth, new technology, and equipment needed; and develop a plan to assist patients with initiating this service.
- » Be positive and encouraging when scheduling telehealth visits.

- » Determine patients' level of comfort with using this service; make sure all consent forms are completed.
- » Provide patients with a clear expectation of their responsibilities; patients should be prepared to discuss current vital signs, machine issues, flow sheets, supply needs and all other concerns.



2.Supporting Facility Staff and Clinician Concerns

- » Develop a clear understanding of your responsibilities as a provider of telehealth services including requirements for licensure, liability, billing, documentation and reimbursement policies.
- » Define schedules and location for visits to ensure HIPAA compliance.
- » Determine a workflow for each member of the team, and modify the workflow with input from the team and from patients.
- » Nominate a telehealth clinical lead to provide support and serve as the patients' primary contact for concerns.
- » Be positive and encouraging when scheduling telehealth visits.

3.Create a Checklist to Assure a Successful Visit

- » Ensure privacy, and compliance with HIPAA.
- » Avoid background noise, and mute other web applications.
- » Provide adequate lighting.
- » Assure equipment is charged and ready for use.
- » Review patient concerns and records prior to the start of the call.
- » Adjust webcam to ensure eye contact and remain focused.
- » Identify a member of the team to record, and document concerns, changes, expectations and responsibilities.
- » If you need to turn away, inform the patient or caregiver.

4.Prepare for Long-term Use

- » Stay up to date on Centers for Medicare & Medicaid Services (CMS) regulations on telehealth use including HIPAA requirements and allowable telehealth platforms.
- » Consider using telehealth services that are HIPAA-compliant and integrated into your current Electronic Medical Record/Practice Management (EMR/PM) system to benefit long-term use.
- » Survey other telehealth vendor options outside of your EMR/PM system. For a comprehensive list of telehealth vendor options, contact your Regional Telehealth Resource Center.

- » Use non-verbal language to signal you are listening.
- » Verbalize and clarify next steps such as follow up appointments, care plans, prescription orders, etc. Send a concise communication to the patient/ caregiver to recap issues and changes to the patient plan of care as requested.
- » Schedule the next telemedicine visits as needed.
- » Ask the patient if he/she would like to schedule a private visit with an individual member of the team and schedule that time.
- » Ask the patient/caregiver for their feedback on how you and the practice can improve the telehealth experience.
- » Review feedback from staff and patients to determine successes and challenges develop a plan to overcome the barriers identified.
- » For additional resources, view the ESRD National Coordinating Center's "Quickinar: Operationalizing Telehealth at the Nephrology Practice" LINK
- » Telehealth Regulation LINK

When to Use Telehealth:

There are three main types of virtual services physicians and other professionals can provide: Below is a list of procedures and corresponding coding that could be used to perform virtual care.

1.Medicare telehealth visits

(bill as regular in-person visits)

» HCPCS/CPT Codes:

- >99201-99215 for outpatient or office services;
- >G0425-G0427 for ED or initial inpatient services;
- >G0406-G0408 for follow up inpatient services (modify location)

2. Virtual check-ins

Brief (5-10 minute visits) that replace the need for an in-person visit.

» HCPCS Codes: G2010, G2012

- » e-Visits (communication between patient/provider through online patient portal)
 - > HCPCS/CPT Codes: 99421-99423, G2061-G2063

3. Telephone visits

» CPT Codes:

- >98966/99441 (5-10 minutes);
- >98967/99442 (11-20 minutes); and
- >98968/99443 (21-30 minutes)



IPRO End-Stage Renal Disease Network of the Ohio River Valley

3201 Enterprise Parkway, Suite 210, Beachwood, OH 44122 Patient Toll-Free: (844) 819-3010 • Main: (216) 593-0001 • Fax: (216) 593-0101 E-mail: esrdnetwork9@ipro.us • Web: network9.esrd.ipro.org Developed by IPRO ESRD Network of the Ohio River Valley while under contract with Centers for Medicare & Medicaid Services. Contract HHSM-500-2016-00009C

Better healthcare, realized. Adapted from material originally developed by the End Stage Renal Disease National Coordinating Center (ESRD NCC) under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services (HHS).

08/10/20 Version 1