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Telehealth (Digital Practice) Implementation: Considerations and Roadmap

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Disclosures

The operational implementation principles and information presented is current upon original presentation time (May 2020). Changes may occur in practice, regulations, and insurance coverage as a result of the Covid-19 pandemic, and evolving evidence in digital practice effectiveness.

Learning Outcomes

After this course, participants will be able to:

- Identify at least three component steps required for the implementation of telehealth (digital practice) into existing clinical practice.
- Identify at least two regulatory and insurance considerations each.
- Describe at least two potential clinical scenarios for digital practice.
- Identify at least three evidence-based strategies of telehealth use in patient care.
- List at least four resources available in the telehealth/digital practice space.
POLL: What is your clinical type?

A. Occupational Therapist/Occupational Therapy Asst.
B. Physical Therapist/Physical Therapist Asst.
C. Speech Language Pathologist/Audiologist
D. Other

History of Telemedicine

Telemedicine →

Telehealth
Telerehabilitation →

Digital practice

2000 → 2020
History of Telemedicine

Telemedicine
Telehealth
Telerehabilitation

Digital health/practice

Access…Convenience, Consumer Demand…Necessity!!!!

RURAL POPULATION

Access…

URBAN POPULATION

Convenience, Consumer Demand…

ENTIRE POPULATION!

Necessity!!!!
Convergence:
- Need/Access
- Regulatory Changes
  - Policy Changes
  - Insurance Coverages
    - Digital Practice Technologies
    - Virtual Health Technologies

Occupational Therapy
Physical Therapy
Speech Language Pathology/Audiology
What is Telehealth?

- The Health Resources Services Administration defines telehealth as the use of electronic information and telecommunications technologies to support long-distance clinical health care, patient and professional health-related education, public health and health administration. Technologies include videoconferencing, the internet, store-and-forward imaging, streaming media, and terrestrial and wireless communications.

Source: HealthIT.gov (accessed 3/17/20)

What is Digital Health/Practice?

- **Digital health** is the convergence of digital technologies with health, healthcare, living, and society to enhance the efficiency of healthcare delivery.

- Generally, digital health is concerned about the development of interconnected health systems to improve the use of computational technologies, smart devices, computational analysis techniques, and communication media to aid healthcare professionals and their clients manage illnesses and health risks, as well as promote health and wellbeing.

Digital health connects and empowers people and populations to manage health and wellness, augmented by accessible and supportive provider teams working within flexible, integrated, interoperable, and digitally-enabled care environments that strategically leverage digital tools, technologies and services to transform care delivery.

Mobile Health News/HIMSS, accessed 4/7/20

POLL: What is your level of participation in telehealth/digital practice?

A. Have been engaged in practice, in 2019 or earlier
B. Engaged in practice, beginning in 2020 (prior to Covid-19 pandemic)
C. Engaged in practice, beginning in 2020 (result of Covid-19 pandemic)
D. Plan to initiate in practice this year
E. No plans to initiate, or not appropriate for my practice
Types

- Synchronous
- Asynchronous
- Remote Patient Monitoring
- Mobile Health (mHealth)

Patient Satisfaction with Telehealth

1734 (54 %) of 3303 patients completed survey at CVS Minute Clinics: Between 94 and 99 % reported being very satisfied with all telehealth attributes. One-third preferred a telehealth visit to a traditional in-person visit. An additional 57 % liked telehealth. Lack of medical insurance increased the odds of preferring telehealth.

CONCLUSIONS: Patients reported high satisfaction with their telehealth experience. Convenience and perceived quality of care were important to patients, suggesting that telehealth may facilitate access to care.
COVID-19 and the Advancement of Digital Physical Therapist Practice and Telehealth
(Lee, Alan PTJ Apr 2020)
WHY!

strategy

Image: www.gettyimages.com
Telerehabilitation Applications:

Acute Care -> Outpatient

Skilled Nursing
Inpatient Rehab
Home Health
LTACH

Patient: Post Acute Care Continuum “Traditional”

Clinical Applications

Telemedicine:
- Occupational Therapy
- Speech Language Pathology
- Vestibular
- Orthopedics – total joint replacement, spine pain, hands
- Oncology
- Neurology
- Cardiopulmonary
- Chronic disease/illness
- Pediatrics/schools

Rehabilitation:
- Physician visits
- Behavioral Health
- ICU
- Neurology
- Wound care
- Women’s Health
- Radiology/imaging
- Pediatrics
- Community/rural health
- Schools
Implementation

- Vendor identification and considerations
- Security/HIPAA
- Technology installation
- Workflow development
- Communication strategies
- Staff education and training
- Patient informed consent
- Patient education/assistance

Vendor Considerations

- Business Associate Agreement (B.A.A.)
- HIPAA compliant
- Secure data transmissions
- Interface with current EHR
- History and Users
- Cost

Image by: Gerd Altmann from Pixabay
Security/HIPAA

- HIPAA compliance
- Data encryption

SOME METHODS IN USE MAY NOT BE SECURE!

Image by: Jan Alexander from Pixabay

Technology Installation

Image by: Callier from Flickr Quincy Data Centre
Vendor Identification*

- Doxy.me
- Bluejayhealth
- Vsee
- Chiron Health
- ReflexionHealth
- Healthy Roster
- Net Health
- WebPT
- Physera

*Convenience sample

Workflow

- Evaluation In-Person Remote
- Visits In-Person Remote
- Scheduling Patient Use Visit Links
Patient Challenges

- Broadband connections/connectivity
- Hardware/device options
- User capability (technology)
- “Second hands” in the home to assist patient
- Clinical equipment
Staff Education and Training

- Evaluations
- Follow up visits
- Use of patient based surveys/questionnaires
- “Hands on” adaptation to remote care
- Patient: Informed Consent
- Precision of instructions
- Patients, caregivers
- Risks and emergency preparedness

Documentation

- Same as an in-person visit
- Document consent and risks of completion via telehealth
PATIENT CONSENT!

Additional Considerations

- State licensure
- State telehealth provisions
- Risk management
- Ethics
Additional Considerations

- Staff Competencies
- Standard operating policies and procedures
- Emergency procedures

Practice, State, Federal Regulations:

Image by Martin Falbisoner / CC BY-SA
(https://creativecommons.org/licenses/by-sa/3.0)
Center for Connected Health Policy

American Telemedicine Association

Key findings from the ATA report on telehealth coverage and reimbursement:

- 40 states and the District of Columbia have adopted substantive policies or received awards to expand telehealth coverage and reimbursement since 2017.
- 36 states and D.C. have parity policies for private payer coverage; only 21 states and D.C. have coverage parity policies in Medicaid.
- 28 states have Medicaid payment parity policies; only 16 mandate payment parity for private payers.
- The majority of states have no restrictions around eligible provider types; ten states have authorized six or more types of providers to treat patients through telehealth.
- Only 16 states limit telehealth to synchronous technologies while most of the country recognizes the benefits of remote patient monitoring (RPM) and store and forward (S&F).

ATA website, accessed April 10, 2020
WCPT/INPTRA Digital Practice
White Paper (2019)

- Regulations
- Limitations
- Evidence
- Ethics
- User Safety
- Education (Students)

Steps for Implementation

- Insurance: Medicare
- Insurance: Medicaid
- Insurance: Commercial
- Insurance: Workers Compensation
E-visits

- G2061, G2062, G2063 (Medicare)
- 98970, 98971, 98972 (Commercial)

- Virtual Check ins:
  - G2012

- Remote Evaluation of recorded Video/images
  - G2010

- Telephone assessment/management
  - 98966, 98967, 98968

E-Visits: Medicare

- G2061: Qualified non-physician health care professional online assessment and management, for an established patient, for up to seven days; cumulative time during the seven days, 5-10 minutes.
- G2062: Qualified non-physician health care professional online assessment and management service, for an established patient, for up to seven days; cumulative time during the 7 days, 11-20 minutes.
- G2063: Qualified non-physician qualified health care professional assessment and management service, for an established patient, for up to seven days; cumulative time during the 7 days, 21 or more minutes. (March 18)
Billing

- CPT Codes
- Modifiers
- Billing form (location codes)
- Private Practitioners (1500 form)
- Hospital based clinicians: UB-04
What are the Gaps?

How Do I Move from “Hands on” to Hands off?

WHAT HAVE I MISSED?
Summary/Best Practice Review:

- Start with strategic fit and patient needs!
- Understand the current regulations!
- Investigate Vendors!
- Develop new work flows!
- Provide Patient Informed Consent!
- Detail in Documentation!
- Insurance billing and reimbursement!
- Outcomes measurement!
POLL: What is your largest practice barrier to initiate/expand digital practice?

A. Types of patients seen are challenging for adapting to telehealth model
B. Technology and work flows for patients usage
C. Vendor or other implementation costs are prohibitive
D. Disparate systems and connections (EHR)
E. Insurance or patient payment/reimbursement
F. Other: ____________

Digital Practice Metrics

- Patient volumes
- Patient outcomes
- Patient satisfaction
- Patient attendance
- Patient adherence
- Cost effectiveness

Note to Self: Compare TH outcomes and traditional care!
Digital Practice Evidence

Emergency Rooms:

- Telemedicine for triage of Pediatric Orthopedic Patients to Level I Trauma Center

- Sports medicine- rural health and AT's/Physicians

Atanda A and Leyden K. Utilizing Telemedicine to Pre-screen New Patients to Facilitate Triage and Reduce Exam Room Wait Times in a Pediatric Sports Medicine Clinic. MATRC Conference, April 2019
Telehealth case studies

- Orthopedics - back pain, TJR
  - Screenings with CPGs
- Vestibular
- Wound care
- Cardiopulmonary
- Pediatrics

Skilled Nursing - Telehealth

Telerehabilitation Applications:

- Descriptive article of applications of telerehabilitation of patients with:
  - TBI, MSK, Rheum.
- Applications and use of telemedicine


Telemedicine: Parkinson’s Disease

- Investigated feasibility and safety of telemedicine delivered using tablets
- Compared six month periods of in-person visits and telemedicine visits, to six month periods of in-person visits only
- Primary outcomes were the same (PDQ - 39SI)
- High levels of patient satisfaction with telemedicine

Patients with Stroke

RECOMMENDATIONS FOR CLINICAL PRACTICE:
We propose that wearable sensor technologies and TH programs have the potential to provide most-effective, intensive, home-based stroke rehabilitation.


Patients with COPD:

- Investigated use of TM and TR for patients with COPD (Canada)
  - Access, self-management

Selzler A-M et al. Telehealth Pulmonary Rehabilitation. A review of the literature and an example of a nationwide initiative to improve the accessibility of pulmonary rehabilitation. Chronic Respiratory Disease 2018; 15:1, 41-47
Patients with LBP:

Three case studies which discuss the use of and application of telehealth techniques in three cases of patients with back pain using McKenzie MDT

“Clinicians must change the very foundation of how they have traditionally operated.”


Patients with THA/TKA:

- Study of 40 patients with THA and TKA, enrolled in a program of virtual care/visits with VERA™ (Reflexion Health)
- Compared compliance, exercise, functional outcomes, and satisfaction (90 day readmissions, HOOS, KOOS, ROM)
- Average cost savings of > $1,000 per patient episode
- No differences in rates of readmission, knee manipulations, ER visits
- Pilot patients for virtual care did include 6-8 in person visits

Telerehabilitation for Total Hip and Knee Arthroplasty Patients: No Increase in Readmissions. Center for MSK Care, Yale School of Medicine and Yale New Haven Health, New Haven, CT 2019
Patients with MSK Conditions:

Image by: Injurymap / CC BY [https://creativecommons.org/licenses/by/4.0]

Image courtesy of Physiotec HEP


Informational Resources

- Telehealth Resource Centers (TRCs)
  - Telehealthresourcecenters.org
- Center for Connected Health Policy
  - cchpca.org
- Telehealth Technology
  - Telehealthtechnology.org
- American Telemedicine Association (ATA)
  - Americantelemed.org
- International Journal of Telerehabilitation
  - Telerehab.pitt.edu
Informational Resources

- Professional Associations
  - AOTA, APTA, ASHA, NATA
- Federation of State Boards of Physical Therapy
- World Confederation for Physical Therapy
  - INPTRA

Summary:

- Identify component steps required for implementation of telehealth (digital practice) into existing clinical practice.
- Review regulatory and insurance considerations.
- Apply potential clinical scenarios for digital practice.
- Provide evidence which discusses telehealth use in patient care.
- List resources available in the telehealth/digital practice space.
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- Donelan K et al. Patient and Clinician Experiences with Telehealth for Patient Follow Up Care. AJMC, Jan 2019
- Kloeck CJJ et al. Effectiveness of a Blended Physical Therapist Intervention In People with Hip Osteoarthritis, Knee Osteoarthritis, or both: A Cluster Randomized Controlled Trial PTJ 2018; July 98(7) 560-570
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