Telehealth: An Overview

Curi recognizes that many of our members are interested in providing care to patients via telehealth. We developed this document to provide some key information needed to get started.

Before you begin, we recommend that you familiarize yourself with the differences between telehealth and telemedicine. Please review www.healthit.gov to learn more.

Types of telemedicine

Live (synchronous) videoconferencing

involves a two-way audiovisual link between a patient and/or caregiver using audiovisual telecommunications technology such as a computer with conferencing software.

Store-and-forward (asynchronous) videoconferencing

transmits recorded health history in the form of videos and digital images through a secure electronic communications system. SFT is not a "real-time" visit; it communicates information after it has been collected. Generally, providers record or capture diagnostic information (like X-rays, CT scans, EEG printouts) at the patient's care site and then they send them to a specialist in another location.

Remote patient monitoring

uses electronic tools, such as Holter monitors, to record personal health and medical data in one location for review by a provider in another location, usually at a different time. Examples of this data include heart rate, blood pressure, and blood oxygen levels.

Mobile health

provides healthcare and public health information through apps on mobile devices. The information might include general educational information, targeted texts, or notifications about disease outbreaks. A recent example is Apple Watch, which includes apps that can detect abnormal heart rhythms such as atrial fibrillation.

Recommendations for practicing telemedicine

✓ Earn physician licensure for the appropriate state(s). The Interstate Medical Licensure Compact (IMLC) was designed to expedite state medical licensure for physicians wishing to practice in multiple states. The IMLC will make it easier for experienced physicians with positive practice histories to apply and receive state licensure where they currently do not practice.

✓ Review the Federation of State Medical Board Model Policy on Telemedicine.

✓ Review state-specific medical board information.
   » Determine when a physician-patient relationship is established.
   » Ensure privacy of patient data.
   » Perform proper assessment, evaluation, and treatment of patient.
   » Limit prescribing and dispensing of certain medications, per your state's regulations.

☑ Review the website for the Center for Connected Health Policy.

☑ Consider joining the American Telemedicine Association (ATA)—annual membership required.

  » Review specialty-specific guidelines (e.g., Teledermatology/Tele-ICU/Telebehavioral Health).
  » Review ATA publications. Let There be Light is an excellent example of a publication focusing on telemedicine lighting. All are accessible on the ATA website.

☑ Access Curi's Telemedicine Consent Form.

☑ Learn about security considerations on HealthIT.gov.

☑ Know your payors: Medicare, Medicaid, and private insurance carriers. Learn what is covered and eligible for reimbursement.

☑ Develop written policies and procedures and train staff regarding the new service line.

☑ Engage in your normal business planning activities to ensure an acceptable return on your investment. Have a prepared budget and determine the sustainability of the program. There might be grants available for some organizations, which you should consider if you are in a rural environment. Access the Telehealth Network Grant Programs through the Health Resources and Services Administration.

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