Technology for Treatment – Telehealth for Therapy

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Disclaimer . . .

- Information changes as often as daily
- LOTS of resources out there - be certain of the date of the information
- Much of the current Federal, and therefore state and local information is applicable during the National Emergency – after that time?
- Know the regulations as well as your profession’s interpretations.
Are you ready for treatment?

- Is everyone willing to think outside the box?
- Technology?
- Prescriptions?
- Consents?
- Policies and Procedures?
Using Technology for Treatment

- Virtual Services
  - E-visits
  - Virtual Check Ins
  - Telehealth
Considerations

- Synchronus vs. asynchronous care
- Does your state allow for telehealth? For therapists? For assistants?
- Are you licensed in the state where your patient is?
HIPAA / Documentation

- Consent – initial and daily documentation
- HHS/OCR has indicated that enforcement has been loosened (security, BAA)
- “Good faith provision”
- No public facing platforms
- Are ancillary people around during the treatment? Can you/do you need to control that?
OCR with HHS (HIPAA)

“OCR will exercise its enforcement discretion and will not impose penalties for noncompliance with the regulatory requirements under the HIPAA Rules against covered health care providers in connection with the good faith provision of telehealth during the COVID-19 nationwide public health emergency. This notification is effective immediately” (3/17/2020).
“Providers are encouraged to notify patients that these third-party applications potentially introduce privacy risks, and providers should enable all available encryption and privacy modes when using such applications.” HHS.gov/hipaa

Business Associate Agreement (BAA) – use a platform that has the agreement, or obtain one, if possible
Nuts and Bolts - Therapist

- Prescription for therapy (NOT for hippotherapy or equine related activities)
- Consents
- Physical set up / Equipment
- Platform downloaded and checked
- Contact info for the patient/caregiver
- Resources – You Tube, Platforms, Colleagues - AHA
Nuts and Bolts - Patient

- Set up a scheduled time
- Do you want the patient to have anything particular available? Or set up ahead of time?
- Who is going to operate the video?
- Does the patient need someone to assist them?
Your focus . . . these are not mutually exclusive . . .

- Activities directly with the patient
- Activities in a grouping of parents/siblings/caregivers
- Instruction to parents/caregivers
- Observation and Feedback
- Testing
Pros/Advantages -

- We get to see them in their home/interacting with the folks they usually do their activities with.
- This is the patient’s ‘natural’ environment.
- A chance for the caregivers to become more engaged, they must participate in hands on and you can guide/support.
- A better perspective to see the ‘whole’ person.
- With recording, can slow down the movement to analyze it.
- More focused view of the patient, fewer distractions.
Cons / Disadvantages

- You can’t get on a horse(!)
- Hands on ‘feel’ is lost, as is hands on skill
- More screen time for the patient
- Standardized tools need to be ones that can be administered by non-trained persons, or be ‘caregiver report’
- Very intense, focused work
- (currently) takes more time – planning, follow up
- Lots of sitting for the therapist
Reimbursement - Telehealth

- Coding – be familiar with the codes and modifiers that might be needed
- Place of service
- Insurance – Many state governors have mandated that telehealth is covered for outpatient therapy through Insurance, and/or Medicaid
- Access APTA, AOTA, ASHA and the AHA, Inc website for further information
Keep up to Date /
Anticipate the end

Keep apprised of policies/decisions (Federal, State, Payers)

This is an opportunity . . .

Be ready for the transition back to the pre-virus world – It will come!!!