

The Shifting Policy and Practice Landscape of Telehealth in Schools

June 11, 2020 at 2:00 pm - 3:00 pm ET

Agenda

- Welcome and webinar logistics
- Telehealth policy and COVID-19
- Providing school based mental and sexual health services via telehealth
- Q&A
- Closing



Disclaimer

Development and presentation of this webinar was supported by cooperative agreement CDC-RFA-PS18-1807 with the Centers for Disease Control and Prevention. The opinions, findings, and conclusions do not necessarily represent the views or official position of the U.S. Department of Health and Human Services or the Centers for Disease Control and Prevention.

Objectives

- By the end of this webinar, you will be able to:
 - Locate your state's current policies pertaining to telehealth for adolescents
 - Identify one special consideration to take into account when exploring the use of telehealth for students in your state
 - Identify a strategy at least one other state is using to provide student support through telehealth

Poll Everywhere Instructions

How to Join

Web

- 1. Go to PollEv.com/childtrends925
- 2. Respond to activity

Text



- 1. Open new text message
- Text CHILDTRENDS925 to
 22333
- 3. Respond to activity

Telehealth Policy & Practice Experts



Mei Kwong

Executive Director

Center for Connected Health

Policy



Dr. Maria Aramburu de la
Guardia So
Medical Director
School Based Health Center
Roosevelt Senior High School



Jillian Shropshire
School Based Mental Health
Therapist
Mary's Center

TELEHEALTH POLICY IN COVID-19

June 11, 2020 CDC



Mei Wa Kwong, JD,

Executive Director, CCHP



CENTER FOR CONNECTED HEALTH POLICY (CCHP)

is a non-profit, non-partisan organization that seeks to advance state and national telehealth policy to promote improvements in health systems and greater health equity.

DISCLAIMERS

- Any information provided in today's talk is not to be regarded as legal advice. Today's talk is purely for informational purposes.
- Always consult with legal counsel.
- CCHP has no relevant financial interest, arrangement, or affiliation with any organizations related to commercial products or services discussed in this program.



ABOUT CCHP

- Established in 2009
- Program under the Public Health Institute
- Became federally designated national telehealth policy resource center in 2012
- Work with a variety of funders and partners









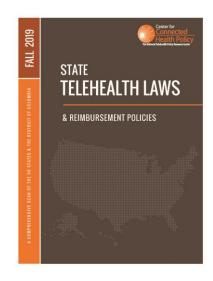






CCHP PROJECTS

- 50 State Telehealth Policy Report
- Administrator National Consortium of Telehealth Resource Centers
- Convener for California Telehealth Policy Coalition









NATIONAL CONSORTIUM OF TRCS

TelehealthResourceCenter.org



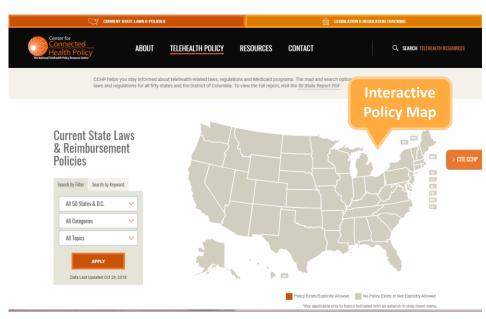




NRTRC	gpTRAC	NETRC	
CTRC	HTRC	UMTRC	
SWTRC	SCTRC	MATRC	
PBTRC	TexLa	SETRC	
12 Regional Resource Centers			



TELEHEALTH STATE-BY-STATE POLICIES, LAWS & REGULATIONS



Information updated through February 2020

Search by Category & Topic

Medicaid Reimbursement

- Live Video
- Store & Forward
- Remote Patient Monitoring Reimbursement

Private Payer Reimbursement

- Private Payer Laws
- Parity Requirements

Professional Regulation/Health & Safety

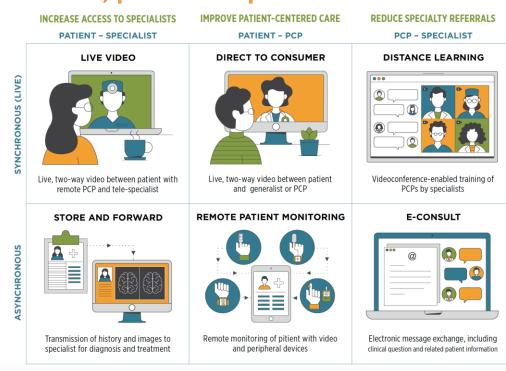
- Cross-State Licensing
- Consent
- Prescribing
- Misc (Listing of Practice Standards)



TELEHEALTH & TERMINOLOGY

Provision of health services from a distance, provider & patient not in the same

- Originating Site Where patient is located
- Distant Site Where the telehealth provider is located
- Modality The way the service is provided to the patient





AREAS IMPACTING THE USE OF TELEHEALTH

- **Reimbursement**
- Prescribing/provider-patient relationship establishment
- Licensure/Credentialing
- Privacy/Security
- Malpractice



THE STATES



MEDICAID REIMBURSEMENT BY SERVICE MODALITY

(Fee-for-Service)



Live Video

50 states and DC



Store and Forward

Only in 16 states



Remote Patient Monitoring

23 states

As of February 2020



REIMBURSEMENT REQUIREMENTS FOR PRIVATE PAYERS



42 states and DC

have telehealth **private payer** laws

Some go into effect at a later date.

Parity is difficult to determine:

Parity in services covered vs. parity in payment

Many states make their telehealth private payer laws "subject to the terms and conditions of the contract"

As of February 2020



EXISTING TELEHEALTH POLICY

Much of the telehealth policy that exists revolves around reimbursement, what gets paid. The policy is further broken down into who, what, where and how.





QUESTIONS THAT NEED TO BE ASKED

- Who will be paying for the services?
 - Is the child covered?
 - Is the location where the child is receiving services an eligible site?
 - Is the service the child is receiving covered when delivered via telehealth?
 - Is the provider an eligible provider?
 - Is the modality used allowed?



EXAMPLE #1 – District of Columbia

THE QUESTION	THE SITUATION	WHAT DOES TELEHEALTH POLICY SAY
Who will be paying for the services?	Medicaid	
Is the child covered by the payer?	Yes	
Is the location where the child is receiving services an eligible site?	During the telehealth interaction, the child will be in a school-based program.	Yes
Is the service the child is receiving covered when delivered via telehealth?	Stomach Ache - Yes	Yes
Is the provider an eligible provider?	Physician	Yes
Is the modality used allowed?	Live Video	Yes



EXAMPLE #2 – New Jersey

THE QUESTION	THE SITUATION	WHAT DOES TELEHEALTH POLICY SAY
Who will be paying for the services?	Medicaid	
Is the child covered by the payer?	Yes	
Is the location where the child is receiving services an eligible site?	During the telehealth interaction, the child will be in a school-based program.	No
Is the service the child is receiving covered when delivered via telehealth?	Mental/Behavioral Health Services	Yes
Is the provider an eligible provider?	Physician	Yes
Is the modality used allowed?	Live Video	Yes



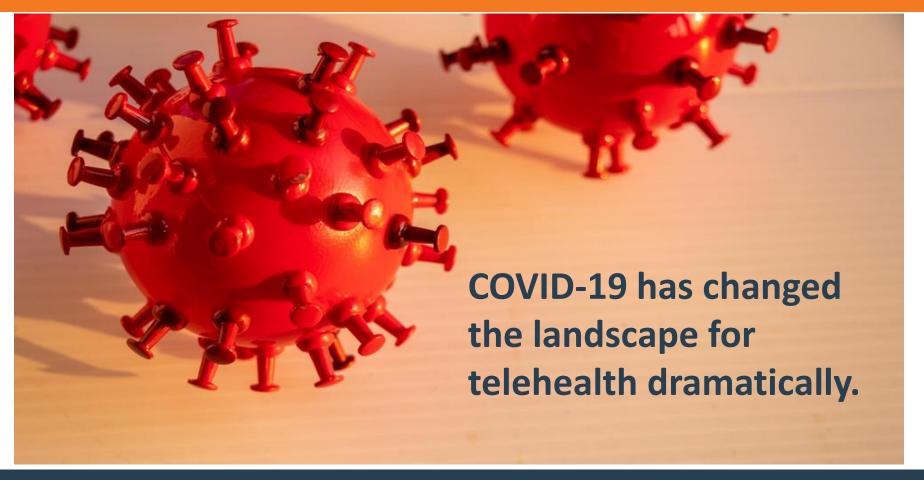
OTHER IMPACTS ON THE USE OF TELEHEALTH

- If a school-based program, what are the Education policies/rules?
 - There may be conflicting/different rules that apply to education programs that could impact the use of telehealth
- Community/Parent Education/Reaction
- Licensure
- Privacy



COVID-19







COVID-19 WORLD STATES

- Less common telehealth policy changes
 - Expanding use of other modalities besides phone
 - Expanding the list of eligible providers to include others such as allied health professionals
 - Waiving consent requirements, usual an adjustment made such as allowing it to be verbal consent



POST-COVID-19 WORLD

- Some policy changes will remain
 - Both on federal & state level
- But questions/issues will need to be resolved
 - Connectivity/Broadband
 - Digital Divide
 - Licensure
 - Where else can it be deployed?



CA CONSUMER TELEHEALTH WEBSITE





If you're having a medical emergency, you should call 911 or go to the nearest emergency room.

During this coronavirus (COVID-19) outbreak, the safest way to find out what medical care you may need is by phone or video while staying at home. This is called "telehealth."

Telehealth is the first step in getting medical care from home, including:

- If you have <u>coronavirus symptoms</u> and think you need <u>testing</u> or <u>treatment</u>.
 Many health care providers and health plans offer telehealth options for COVID-19 screening.
- If you need treatment for symptoms of other medical conditions or for followup care to treat ongoing conditions.
- If you need treatment for a mental health or substance use issue, or are

- Search function for health plans in your area that cover telehealth
- Nurse advice line
- Contact information for issues

https://covid19.ca.gov/telehealth/



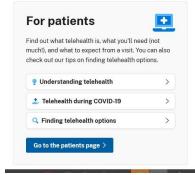
HHS TELEHEALTH WEBSITE

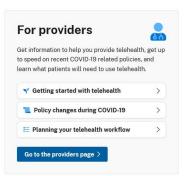
Telehealth: Health care from the safety of our homes. During the COVID-19 Public Health Emergency, we don't have to choose between medical care and social distancing. When

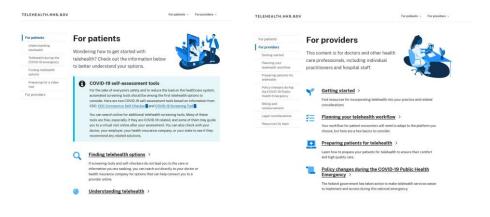
During the COVID-19 Public Health Emergency, we don't have to choose between medical care and social distancing. When patients can get health care through telehealth — and doctors can provide it — we protect ourselves, our families, and our communities.



Learn more about telehealth







https://telehealth.hhs.gov/



CCHP

- CCHP Website cchpca.org
 - Telehealth Federal Policies -<u>https://www.cchpca.org/resources/covid-19-telehealth-coverage-policies</u>
 - State Emergency Waivers/Guidances - <u>https://www.cchpca.org/resources/covid-19-related-</u> state-actions
- Subscribe to the CCHP newsletter at cchpca.org/contact/subscribe





Thank You!

www.cchpca.org

info@cchpca.org



Poll Everywhere Instructions

How to Join

Web

- 1. Go to PollEv.com/childtrends925
- 2. Respond to activity

Text



- 1. Open new text message
- Text CHILDTRENDS925 to
 22333
- 3. Respond to activity

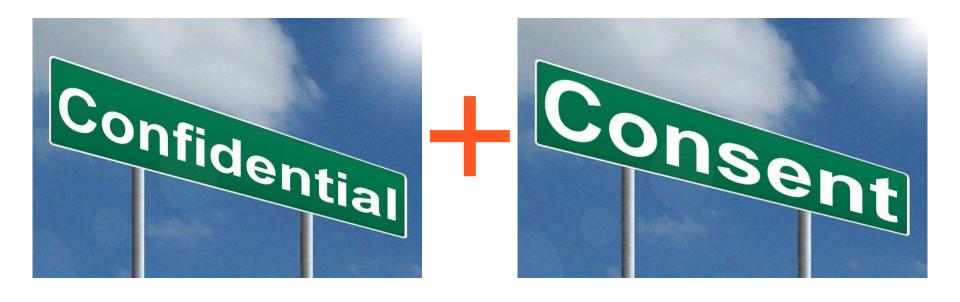
Providing School-Based Mental and Sexual Health Services via Telehealth

Dr. Maria Aramburu de la Guardia, MD, MPH, FAAP Jillian Shropshire, MSW LGSW

School Based Health during COVID times



Confidentiality and Consent



Reproductive and Sexual Health

- Education
- Patient outreach
- Preventative care platform
- Risk assessment



Confidentiality of Telehealth

HIPAA-compliant platforms

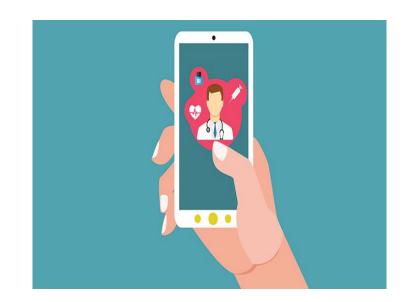
Client-friendly platforms

Review confidentiality



Strategies for Engaging Adolescents in Using Telehealth

- Flexibility and diversity in platform choice
- Reminder texts
- Late afternoon appointments
- Normalize meeting virtually
- Expect adolescent clients to keep the



video away from their face

Telehealth Billing Considerations

Medicaid coverage

Private insurance



Virtual Mental Health-Physical Health Collaboration

PRE-COVID



VS.

POST-COVID



Questions / Discussion



Poll Everywhere Instructions

How to Join

Web

- 1. Go to PollEv.com/childtrends925
- 2. Respond to activity

Text



- 1. Open new text message
- Text CHILDTRENDS925 to
 22333
- 3. Respond to activity

Closing

- Speaker contact information
 - Mei Kwong- meik@cchpca.org
 - Dr Maria G. Aramburu- Maria.G.Aramburu@gunet.georgetown.edu
 - Jillian Shropshire- <u>JShropshire@maryscenter.org</u>

Thank You