Telehealth In Virginia

The Regulatory Landscape
Introduction

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Overview

- Federal Guidelines as defined by CMS
- Interstate Licensure Compact
- HIPAA
- State Laws
Federal Guidelines and Definitions

- What Constitutes telemedicine?
- CMS and implications to Virginia
- How is telemedicine affected by HIPAA
What is Telemedicine?

- Video Conferencing
- Store and Forward
- Remote Patient Monitoring
- Mobile Health
CMS and Implications for Virginia

1. What is a Distant Site and who can facilitate care via telemedicine from the Distant Site

2. Originating Sites: What are they?

3. Exceptions found in Virginia

4. A quick touch on Originating Site Fees
Distant Sites and Practitioners

- Distant Site: Is the location of the provider facilitating care via technology.

- Practitioners at the distant site who may furnish and receive payment for covered telehealth services are:
  - Physicians
  - Nurse Practitioners
  - Nurse-midwives
  - Clinical Nurse Specialists
  - Certified Registered Nurse Anesthetists
Originating Sites

- According to the CMS handbook Originating Sites are defined as:
  The location of an eligible Medicare beneficiary at the time of service furnished via a telecommunications system occurs. Medicare beneficiaries are eligible for telehealth services only if they are presented from an originating site located in:
  - A rural Health Professional Shortage Area (HPSA) located either outside of a Metropolitan Statistical Area (MSA) or in rural census tract; or
  - A county outside of a MSA
Unrestrictive counties to telehealth in Virginia
Virginia’s Exceptions to the Rules

- For physicians: Virginia is special as the state extends licensure reciprocity to bordering states.
  - Revised board guidelines are pending.

- Medicaid extends to managed care plans, however the agency imposes restrictions on the patient setting.
  - Medicaid has placed restrictions on covered services and designates eligible distant site providers as a condition of payment. However Virginia is 1 of 3 states that includes specific coverage of obstetric and gynecological services including ultrasounds.
Allows Billable Services in Schools as Originating Sites

- Speech And Language Therapy
What you need to know about HIPAA

- HIPAA does not designate any specific rules to telemedicine, they are the same as in person.

- Your organization needs to make sure that they have comprehensive policies and procedures to protect PHI.

- Must sign Business Associate Agreements with any Vendor or other “covered entity” touching PHI.

- Make sure software and video technology is encrypted. (This is not enough)
Interstate Licensure Compact

- Proposed by the AMA
- Agreed to at the state level
  - Physicians ahead of the curve
- Still a long way from being realized
Great News!

The American Telemedicine Association which acts as a standing authority behind telemedicine with legislative bodies at both the federal and state levels gave Virginia “the highest possible composite score and suggests that an extremely positive supportive policy landscape exists in [VA] which accommodates telemedicine adoption and usage.”
Not Billing CMS?

- The provider patient relationship can be established via Telemedicine in Virginia.
- Virginia does not require a physical exam.
- Virginia does not require a separate informed consent. (best practice to build this into your current consent form)
- No Telepresenter required.
Virginia’s Parity Law

- VA’s parity law was enacted in 2010 and includes coverage for telemedicine under state employee health plans as well.
Prescribing in Virginia

- E-Prescribe: Virginia allows for physicians to prescribe digitally as long as there is a “bona-fide” physician-patient relationship. Meaning that the physician has conducted a physical exam of the patient which can take place “physically” or through the use of technology.

- Enacted in March 2015, Chapter 115 permits the use of telemedicine to remotely prescribe Schedule VI controlled substance under certain conditions.