

Telehealth During a Pandemic: Maintaining Accessible Services

December 18, 2020



TBI TARC is supported by contract number
HHSP233201500119I from the U.S. Administration for
Community Living, Department of Health and Human
Services, Washington, D.C. 20201

Welcome to Today's Webinar



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Thank you for joining us to learn about **Telehealth During a Pandemic: Maintaining Accessible Services.**

This webinar is sponsored by the Traumatic Brain Injury Technical Assistance and Resource Center. TBI TARC is funded by the Administration for Community Living.

This webinar is free and open to the public.



Webinar Logistics

- Participants will be muted during this webinar. You can use the **chat** feature in Zoom to post questions and communicate with the hosts.
- Toward the end of the webinar, we will have an opportunity to **respond to questions** that have been entered into **chat**.
- The webinar will be live captioned in English.
- The webinar will also have an American Sign Language (ASL) interpreter.
- This live webinar includes polls and evaluation questions. Please be prepared to interact during polling times.



Feedback and Follow-Up

- After the webinar, you can send follow-up questions and feedback about the webinar to tbitarc@hsri.org (Please note: This email address is not monitored *during* the webinar.)
- A recording, including a pdf version of the slides, will be available within two weeks at tbi.acl.gov
- We will also include questions and responses in the materials that are posted following the webinar.

Opening Remarks



Dana Fink

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Project Officer

- ACL's Traumatic Brain Injury (TBI) State Partnership Program (SPP) provides support to state and local agencies nationwide to develop and promote accessible and person-centered services and supports for all members of the TBI community.
- The ACL TBI TARC helps TBI SPP grantees promote access to integrated, coordinated services and supports for people who have sustained a TBI, their families, and their caregivers.
- TBI TARC also provides a variety of resources to non-grantee states, people affected by brain injury, policymakers, and providers.

Who's Here?



“In what role(s) do you self-identify? Select all that apply.”

1. Person with a traumatic brain injury (TBI) or other disability
2. Family member or loved one of a person with a TBI or other disability
3. Self-advocate / advocate
4. Peer-specialist / peer-mentor
5. Social worker, counselor, or care manager
6. Researcher/analyst
7. Service provider organization employee
8. Government employee (federal, state, tribal, or municipal)

Meet Today's Panelists



Terri Imus



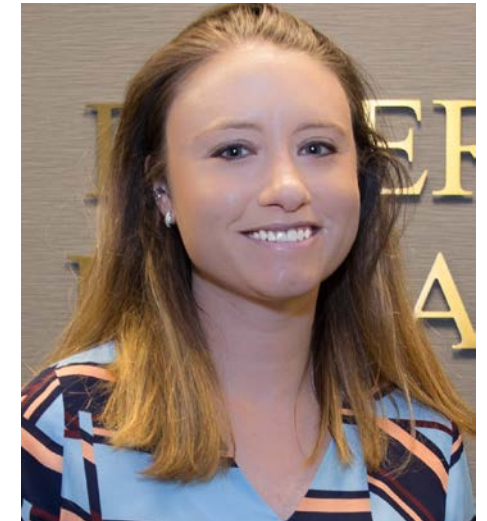
Edward Williams



Kimberly Lamb



Vida Tolerson



Lisa Bothwell

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What we will cover

- Definitions of telehealth, telemedicine and digital health
- Review the basics of telemedicine
- Discuss how COVID-19 has changed access to telemedicine
- Explore the benefits for providers, people with TBI and related disabilities, and caregivers
- Discuss some federal resources available on telehealth and maintaining accessible services

Disclaimer

The images and examples of telehealth equipment used in this presentation are for illustrative and instructional purposes only and are not intended to endorse any specific product or service.

We have nothing to disclose.



THE BASICS



Telehealth



“The use of technology to deliver health care, health information or health education at a distance.”

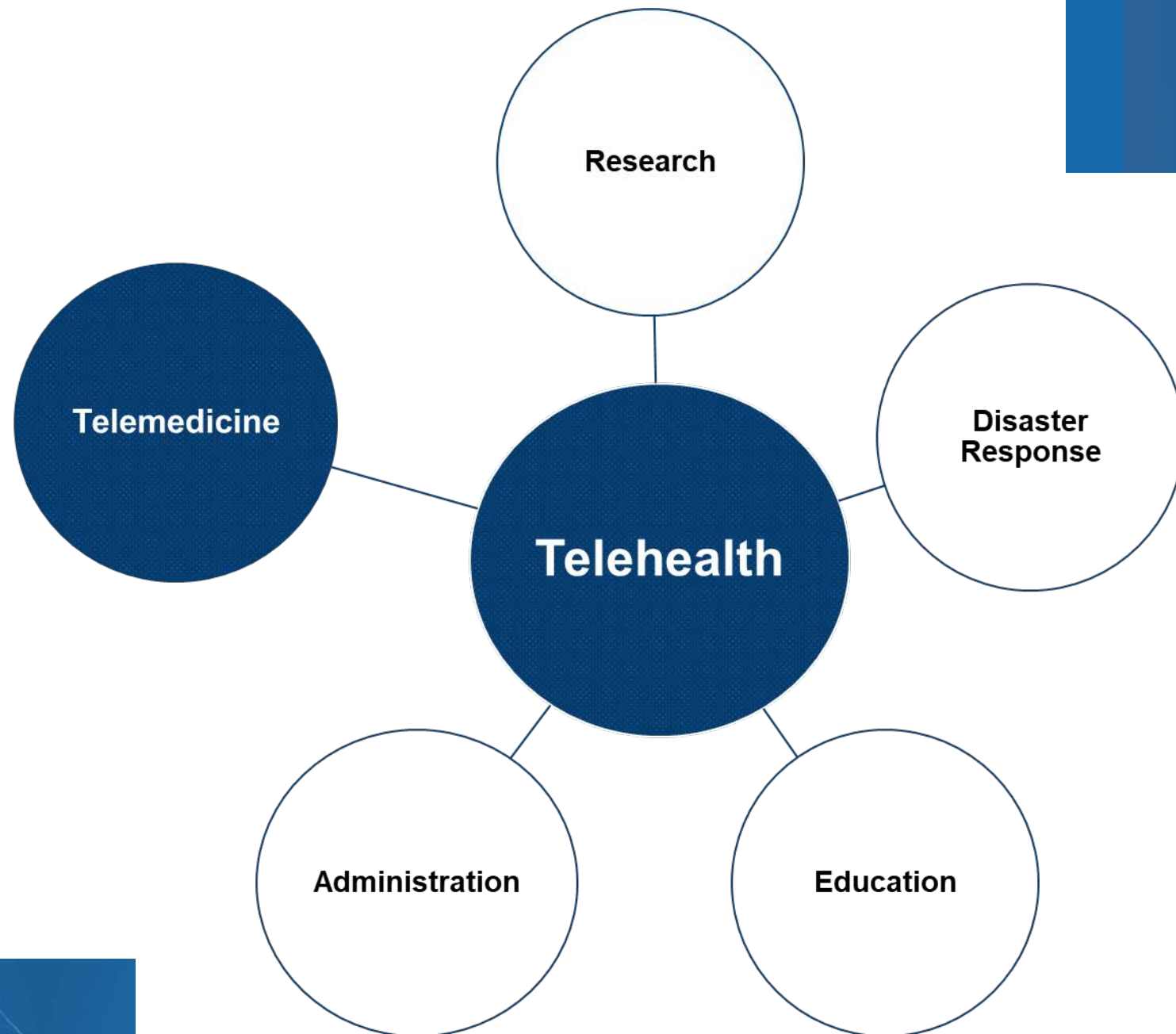
— Health Resources & Services Administration

Telemedicine

“The use of medical information exchanged from one site to another via electronic communications to improve a patient’s clinical health status.”

— American Telemedicine Association





Telemedicine Delivery Methods

Live (synchronous)

Store and Forward (asynchronous)

Remote Patient Monitoring

Live (synchronous)

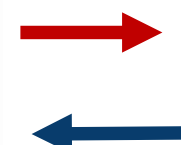
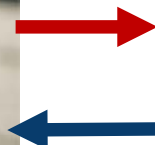
Originating Site
Location of Patient



Distant Site
Location of Clinician



Can view images or
x-rays
(asynchronous)

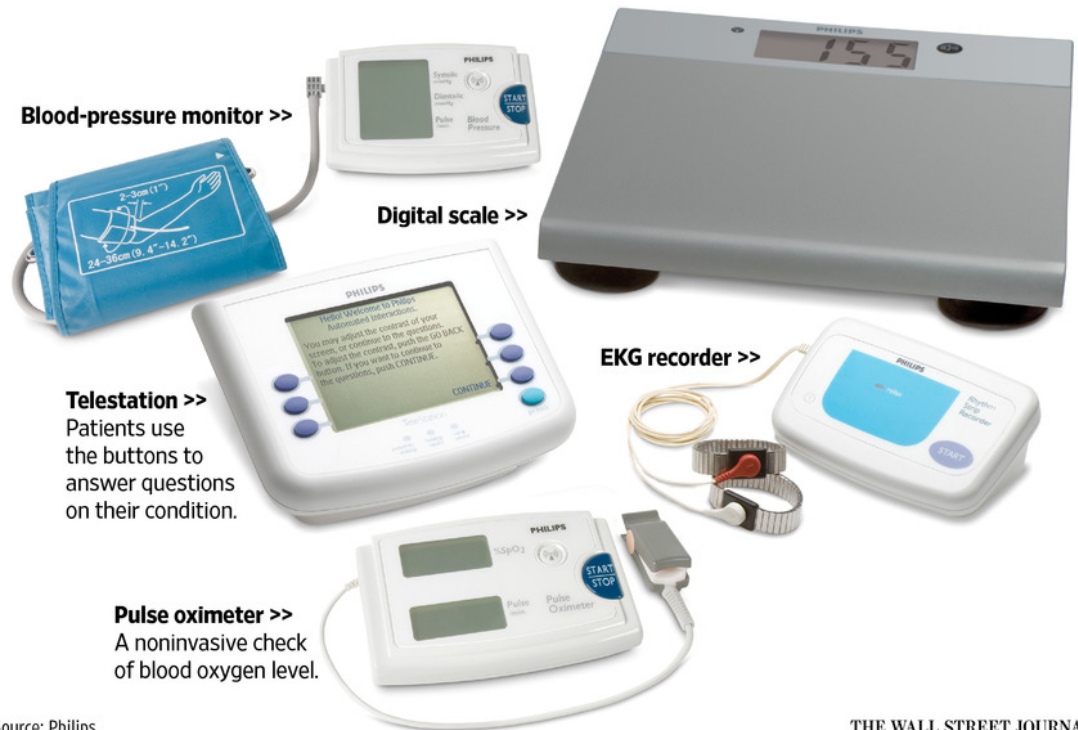


Remote Patient Monitoring (RPM)



Long Reach

Wireless devices for remote patient monitoring



Source: Philips

THE WALL STREET JOURNAL

However, with Covid-19

- Relaxed rules and regulations
- HIPAA rules were relaxed
- The telephone was an acceptable method of delivering care
- Text messaging and emails are being used to exchange information regarding care

All 50 states and D.C. reimburse for some type of live video Telehealth Services

(slide 1 of 2)

Medicaid and private insurances in some states may allow for reimbursement for:

- Store and Forward
- Remote Patient Monitoring (RPM)
- Telephone check in



All 50 states and D.C. reimburse for some type of live video Telehealth Services

(slide 2 of 2)

- Some states have parity laws with regard to reimbursement
- Visit with your state representatives to move toward changes in telehealth and telemedicine laws
- Physicians should follow their state rules
(State laws applied)

During the public health emergency

- Physicians can be paid at the same rate as in-person visits for all diagnoses, if the services can be provided as if in person
- Patients can be in their home, or in any other non-medical setting, to receive telehealth services
- Patients do not need to have an existing relationship with the physician who is providing telehealth assistance

Providers need to be aware

- Review your state Medical Associations Rules and Regulations
- Ensure your devices are able to encrypt connection
- HIPAA rules have relaxed but patient privacy as well as financial transactions need to be protected
- Informed consent is required in some states; however, some states do not
- See: [Working from home during the pandemic: What physicians need to know](#), from the American Medical Association, and the [AMA Telehealth Quick Guide](#)



Benefits to people living with TBI and other disabilities

- Patients should be informed of their choices for treatment methods
- Caregivers should ask for what is convenient for all parties
- Access should not be a barrier for treatment, education, or job training

Equipment needed to provide care

- Most telemedicine equipment used for evaluation of well-being can be as simple as a personal cell phone with video capabilities
- More extensive exams may require other equipment and a person with knowledge to help with the assessment
- Many times, a family member can be instructed in providing assistance to the provider to provide the needed exam of the patient



Home health can be the interface

- When the patient requires more extensive exam, the visiting nurse, physical therapist, or home health care person can assist the provider with instructions.
- The exam can be carried out without traveling to the clinic.

Where you live should not determine whether you live or whether you die.

—U2, “Crumbs From Your Table”



The Tolerson Family

The screenshot shows a YouTube video player interface. On the left side, there is a vertical label 'TBI TARC WEBINAR'. The main video area displays a red title card with the text 'The Tolerson Family' in a large white serif font. Below the title, it reads 'Conversation with Vida Tolerson' and 'Wife and Caregiver of TBI Survivor, Alex, and Mother of Three'. At the bottom of the red card, there is a thin white line followed by the text 'TELEHEALTH DURING A PANDEMIC: MAINTAINING ACCESSIBLE SERVICES'. The video player's control bar at the bottom includes a play button, a progress bar showing '0:00 / 24:53', and several logos: UAMS (University of Alabama at Mobile), ACL (Alabama Children's Learning Center), TBI SPP (Traumatic Brain Injury State Partnership Program), and TBI TARC (Traumatic Brain Injury Technical Assistance Resource Center). There are also icons for settings, full screen, and other video controls.

<https://youtu.be/-IJH-lqI000>

American Medical Association states:

“Because of the coronavirus and temporary waivers on Medicare limitations, physicians saw between 50 to 175 times more patients”

Many health care providers were given a crash course in providing telemedicine to their patients.

The patients seemed to adapt more quickly than the providers in many cases.

Our institution had about 10 clinics seeing patients via telemedicine to every outpatient clinic using some form of telemedicine for follow-up visits.

— From [“5 huge ways the pandemic has changed telemedicine”](#)



Telemedicine Health Policy

- The National Telehealth Policy Resource Center
- State Telehealth Laws and Reimbursement Policies
- Center for Connected Health Policy
- Telehealth Technology Assessment Resource Center
- South Central Telehealth Resource Center

Resources

[Center for Connected Health Policy](#)

[National Telehealth Technology Assessment Resource Center \(TeleHealth.org\)](#)

[National Telehealth Technology Assessment Resource Center - Toolkits](#)

[South Central Telehealth Resource Center](#)

[AMA: "5 huge ways the pandemic has changed telemedicine"](#)

[Telehealth webpages from the Centers for Medicare & Medicaid Services](#)



Federal Government Resources on Telehealth

Lisa N. Bothwell

Administration for Community Living

December 18, 2020

Applicable Laws

Both Section 504 and the ADA state that no qualified individual with a disability shall, by reason of his or her disability, be excluded from the participation in, denied the benefits of, or subjected to discrimination under any services, programs, or activities of the covered entity.

Effective Communication

In the context of [telehealth], a provider who takes appropriate steps to furnish individuals with disabilities auxiliary aids and services when scheduling or holding virtual telemedicine appointments helps to ensure that its patients are afforded effective communication.

“Hacks” for Accessible Telehealth

(slide 1 of 2)

- In the context of [telehealth], a provider who takes appropriate steps to furnish individuals with disabilities auxiliary aids and services when scheduling or holding virtual [telehealth] appointments helps to ensure that its patients are afforded effective communication.
- As you invest in permanent changes to include [telehealth] in your practice, consider using a [telehealth] platform that has capacity to add a third party, for example an interpreter for someone who is deaf, or a remote care provider for a patient with an intellectual disability.

“Hacks” for Accessible Telehealth

(slide 2 of 2)

- Consider reasonably modifying your pre-[telehealth] appointment practices to allow for additional time to provide a patient with a visual or intellectual disability extra assistance with using the video platform technology.

LINKS

Electronic Information Technology

Guidance and Resources for Electronic Information Technology: Ensuring Equal Access to All Health Services and Benefits Provided Through Electronic Means (12.21.26)

telehealth.hhs.gov

“Telehealth for People with Disabilities” Section of
[“Increasing telehealth equity and access”](#)

WEBINARS

Telehealth Webinar for Community-Based Organizations Series

[Part 2: Promising Practices - Accessibility
and Language Access](#) (08.26.20) from
PublicHealthEmergency.gov

Telehealth Hack Series

Building Accessible Telehealth for Patients with Disabilities from the Ground Up (10.26.20), from the National Consortium of Telehealth Resource Centers

QUESTIONS?





Real-Time Evaluation Questions

- Please take a moment to respond to these seven evaluation questions to help us deliver high-quality TBI TARC webinars.
- If you have suggestions on how we might improve TBI TARC webinars, or if you have ideas or requests for future webinar topics, please send us a note at tbitarc@hsri.org

Thank You.

The Traumatic Brain Injury Technical Assistance and Resources Center (TBI TARC) is an initiative from the Administration for Community Living that helps TBI State Partnership Program grantees promote access to integrated, coordinated services and supports for people who have sustained a TBI, their families, and their caregivers. The Center also provides a variety of resources to non-grantee states, people affected by brain injury, policymakers, and providers.



TBI SPP
Traumatic Brain Injury
State Partnership Program