



Quick Guide to Implementing Telehealth in Nursing Homes During the COVID-19 Pandemic

COVID-19 Regulatory Changes

CMS (Centers for Medicare & Medicaid Services) is waiving the requirement (42 CFR 483.30) for in-person visits for nursing home residents allowing providers, such as doctors, nurse practitioners, clinical psychologists, and licensed clinical social workers, to offer visits via telehealth options, per the [CMS 1135 waiver guidelines](#). **The CMS 1135 waiver is TEMPORARY in order to increase access to medical services during the time of a national emergency.** Continue to check CMS guidelines as regulations are evolving rapidly. Nursing homes do not need to apply for a Federal waiver to use telehealth and telemedicine services.

The 1135 waiver authority applies to Federal requirements and does not apply to State requirements for licensure or conditions of participation. Check with the state Medicaid, individual Medicare Advantage plan or other third-party payers for their COVID-19 telemedicine guidelines and billing codes.

What is Telehealth and Telemedicine?

- Telehealth refers to the exchange of medical information from one site to another through electronic communication to improve a patient's health.
- Telemedicine is the practice of medicine using technology to deliver care at a distance.

Three Types of Virtual Services

Medicare Telehealth Visits	Considered the same as in-person visits but uses real-time audio and video telecommunications systems between a provider and a resident.
Virtual Check-Ins	A brief check-in with a provider with a telephone or other telecommunication device to decide whether an office visit is warranted OR a remote evaluation of recorded video or images submitted by a resident.
E-Visits	Communication between a resident and their provider through an online portal (the patient must generate the initial inquiry and communications can occur over a 7-day period).

Note: Per [CMS regulation](#) issued on March 31, 2020, the requirement to have an established provider and patient relationship for telehealth visits has been removed. For clinician's questions regarding billing for telehealth, refer to the CMS letter to clinicians, available [here](#).



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Five Steps to Implementing Telehealth in Nursing Homes During the COVID-19 Pandemic

CMS provided a [Long-Term Care Nursing Homes Telehealth and Telemedicine Tool Kit](#). As a complimentary resource to the toolkit, the following steps are intended to support nursing home efforts to work with providers and rapidly deploy telehealth during the COVID-19 pandemic. Once the 1135 waiver expires, nursing homes should refer to previous guidelines when performing telehealth. A nurse will need to facilitate the telemedicine experience between the resident and clinician by managing the technology on-site at the nursing home.

5 Step Checklist

1. Rounding providers review their upcoming appointments for the week and create a list of all follow-up items or information the provider needs the nurse to collect for each patient prior to the appointment.
2. Provider sends the follow-up items/needed information to the designated nurse that will be conducting the appointment onsite.
3. Upon receipt of the information, the nurse schedules a brief check-in meeting between the provider and nurse to review the follow-up items/needed information and address any questions or clarify information such as the what is listed to the right. →
4. Prior to the appointment, the nurse should make sure all necessary information, supplies, etc. are collected and ready prior to beginning the telehealth call.
5. At the appointment start time, the nurse initiates the call with the provider and then enters resident's room with the provider on the video and begins the appointment.

Suggestions

Agree on the app or device that will be used during the appointment, devices that can easily move around the patient such as Smartphone or Tablet are recommended.

Consider available apps on Apple and Android (Note: Facebook Live, Twitch, TikTok, and similar video communication applications are public facing, and should not be used for telehealth)

Complete a technology test including practice using the apps and video, so both the physician and nurse are comfortable with the technology prior to the telehealth appointments.

Set a date/time the nurse will send all the follow-up information to the provider

Agree on how the information will be sent to the provider – email, text, phone (Note: [The Office for Civil Rights \(OCR\) at the Department of Health and Human Services \(HHS\)](#) will not impose penalties for noncompliance under the HIPAA Rules in connection with the good faith provision of telehealth during the COVID-19 nationwide public health emergency.)



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Tips for Successful Implementation of Telehealth

Use a telehealth resource, [National Consortium of Telehealth Resource Centers](#) (NCTRC) and consider the following suggestions to ease the roll-out of telehealth visits in your nursing home:

- Ensure senior leadership advocates the use of telemedicine.
- Ensure clinical team is fully invested in telemedicine use.
- Designate a small team as telehealth “super users” – this team has autonomy to make decisions quickly to ensure launch as soon as possible and keep the program moving from beginning through implementation.
 - a. This table shows key team members, roles, and responsibilities to include in the “super user” team or work-group:

Team Member	Telehealth Work-Group Role	Responsibilities may Include:
Senior leader (Administrator)	Project Manager	<ul style="list-style-type: none">• Convenes and organizes the work-group (schedules meetings, takes notes, assigns tasks, etc.)• Leads development of policies and procedures with input from the work-group.
Clinical Champion	Provider or Nurse Practitioner conducting the visit remotely	<ul style="list-style-type: none">• Collects pre-appointment needs and works with on-site nurse to exchange needed information.• Be comfortable using the technology required for the appointment.• Conduct visits remotely.• Accountable for required documentation following the visit.
Supervisor Nurse or floor nurse	On-site clinical staff member conducting the visits with the resident	<ul style="list-style-type: none">• Collects all requested information for the clinical champion.• Provides care services on site for residents, as instructed and facilitated by provider
IT champion	Vendor researcher and implementer	<ul style="list-style-type: none">• Researches vendors and shares pros/cons for each so the work-group can determine the best option.• Implements necessary IT requirements for selected vendor.



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Tips for Successful Implementation of Telehealth (Continued)

- Create messaging for residents and family members about telehealth, why it is useful, and what they can expect during the appointment. Make sure to discuss with the resident prior to initiating a telehealth appointment.
- Consider documentation needs during the appointment and determine if another team member should be in the room during the appointment to serve as a scribe. This may vary based on each provider's preferences, the provider may be able to document while carrying out the appointment.
- Select vendor, software, and/or hardware with the input of senior leadership, providers, nurses and IT
 - a. To narrow the selection, connect with partnering/affiliated hospitals to identify which equipment they already use
 - b. A mobile device at the bedside loaded with Zoom, Skype, or FaceTime will suffice while the 1135 waiver is in place, consider other vendor options for sustainability of the program.
 - c. A device or camera that can easily move around the patient is best.
- Develop telemedicine policies that are incorporated into existing policies.
 - a. Cite CMS waiver regs and other helpful resources to consider when developing policies
- Work with staff to delineate the step-by-step operational details that are consistent and non-disruptive to existing clinical and operational processes.
 - a. Access the checklist from gpTRAC (Great Plains Telehealth Resource & Assistant Center) for ideas on what to include in the process (<https://www.telehealthresourcecenter.org/wp-content/uploads/2019/07/checklist190508-gpTRAC.pdf>)
- Create a training program for staff – emphasize the facility's policy, goals and include tools to ease adoption
- Create an informational telehealth document for residents and caregivers or download as available on Telligen QIN-QIO website, <https://www.telligenqinqio.com>.
- Complete PDSA (Plan Do Study Act) cycles to confirm effectiveness of process with the “super user” group – evaluate and adjust processes and training program, as necessary.
- Once the program has successfully launched, the “super user” team can train their peers for spread and sustainability.