



**CALIFORNIA
MEDICAL
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Telehealth for Preventive Care

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Chapter 2

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Important Disclaimer



Materials, legal citations and all other information contained in this document are solely intended to be used for informational purposes only. Nothing herein is intended to be, and should not be interpreted as, legal advice. Furthermore, nothing herein is intended to create, and does not form, an attorney-client relationship between or among any parties. To the extent you need specific advice, you may wish to personally consult a qualified attorney.

Natasha Doshi

- Recently joined the CMA team as a Practice Transformation Specialist of the CMA-PSO
- Over 5 years of experience in public health
- Supporting 45 FQHCs through the Health Center Controlled Network (HCCN) in LA County



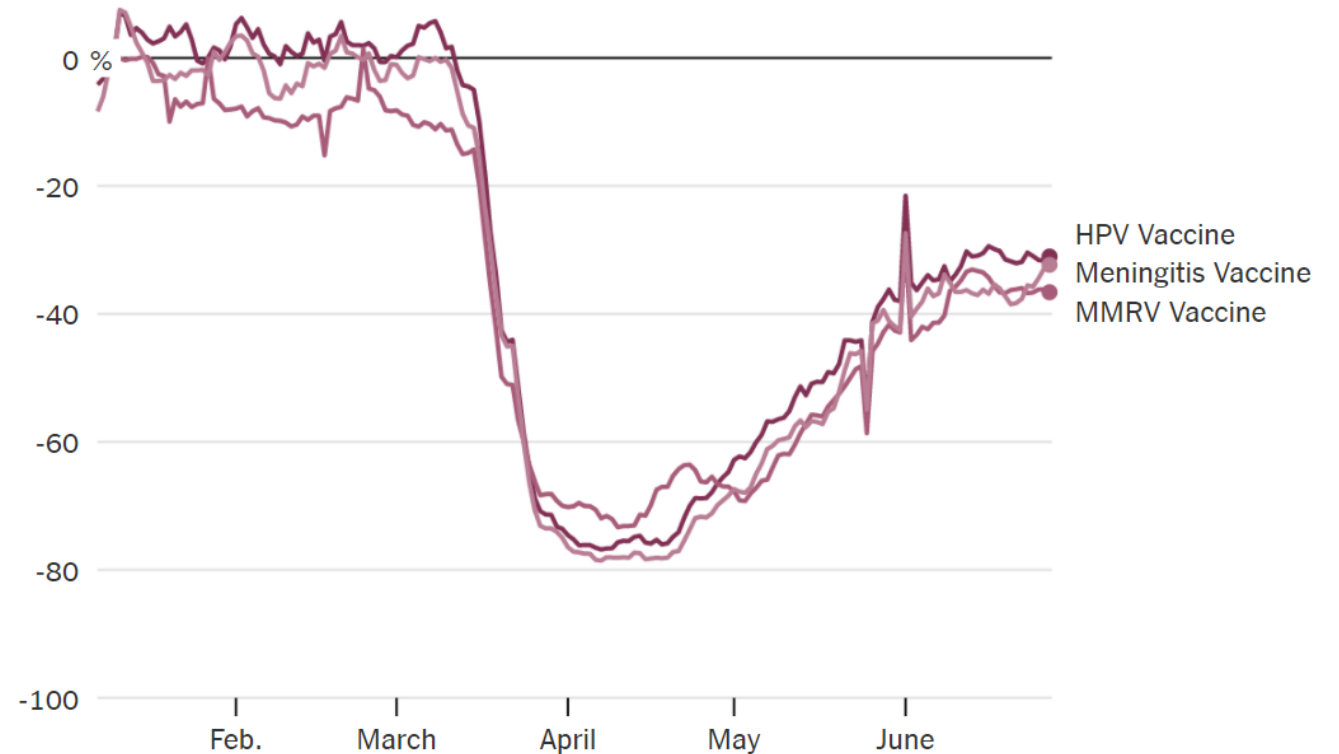


Preventive Care in 2020

- Preventive care services such as childhood vaccinations, mammograms and pap smears, colonoscopies declined significantly last year
- Measles vaccinations fell 73% in mid-April and were still down 36% at the end of June

Vaccinations for Children Declined Drastically

Critical childhood vaccines declined by as much as 75 percent during the height of the pandemic.



Source: The New York Times, Health Care Cost Institute



Telehealth for Preventive Care

- Although vaccinations need to be done in-person, there are many ways telehealth can play a part in providing preventive care...
 - Outreach and scheduling
 - Virtual screenings and assessments
 - Follow-up and counseling
 - Hybrid visits



Outreach and Scheduling

- Establish criteria for telehealth visits and identify which patients fall under each visit type
 - In-person, telephonic, televisit (televideo), hybrid
- Pediatric visits may be scheduled differently in order to conduct well-child exams in the health center
- Consider safety and patient preferences!



Outreach and Scheduling Cont.

- Eligibility may include the following visit types:
 - ER Follow-up
 - Medication Management
 - Mental Health
 - Patient Education
 - New patient intake
 - Follow-up visit (routine)
 - Same-day appointments
 - COVID-19 symptom review
 - Medication side effects
 - Chronic condition management
 - Health assessments
- Eligibility may NOT include the following visit types:
 - Immunizations
 - COVID-19 testing
 - Pre-operational appointments
 - Removing sutures
 - Lab tests and screenings
 - Diabetic retinopathy
 - Clinically urgent and serious medical emergencies (patient is complaining of chest pain, difficulty breathing, acute injury or trauma)



Outreach and Scheduling Cont.

- Identify patients who are due for immunizations, well-child exams, routine labs or screenings and schedule in-person visits
- Determine if parts of these visits can be done over the phone (new patient intake, annual health assessments)
- Conduct follow-up, consultations, and health education appointments through telehealth visits

Outreach and Scheduling Scripts



Example Messages:

Hello [insert patient name]! Your provider [insert provider's name] has indicated that you are due for a [insert in-person service]. Due to concerns about the COVID-19 virus, we have implemented precautions and strict protocols to allow you to visit the health center safely. Please contact us at XXX-XXX-XXXX or visit [insert URL] to schedule your next appointment.

Hello [insert patient name]! This is [insert provider's name, insert health center's name]. Due to concerns about the COVID-19 virus, we would like to offer you a telehealth visit instead of you coming in for an office visit. This would allow us to care for you without possible exposure to sick patients. Are you interested in scheduling a telehealth visit?

Hello [insert patient name]! Your provider [insert provider's name] has determined that your appointment can be conducted over the phone. To do this, your provider [insert provider's name] will call you at [date/time of the visit].

Outreach and Scheduling Scripts



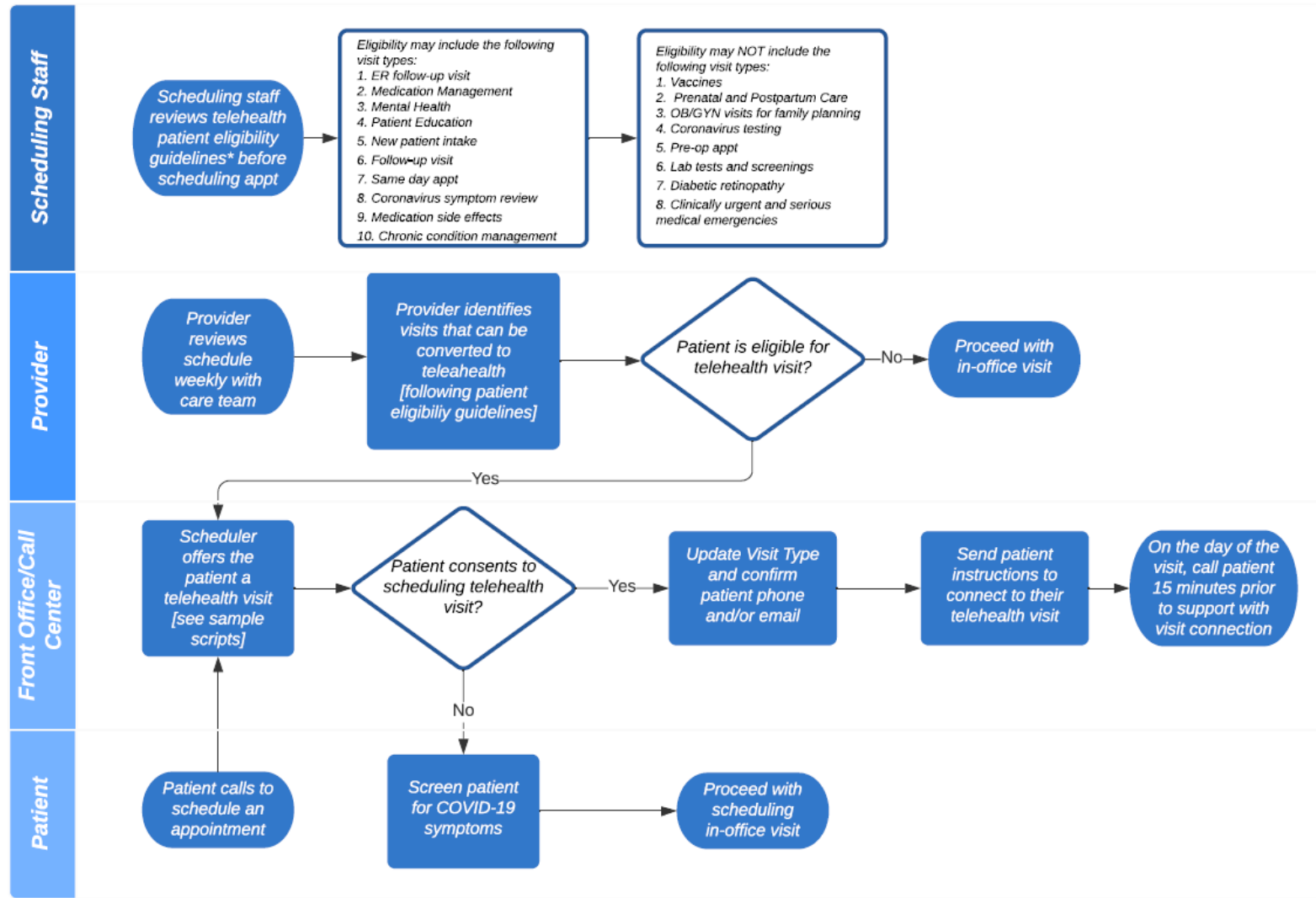
Example Responses:

Thank you, we look forward to seeing you in the office at [date/time of the visit]. [Ask COVID-19 screening questions] Please remember to bring a copy of your ID and insurance card to your visit.

Thank you for scheduling a telehealth visit. Please confirm the best phone number to reach you at your appointment time. We will call you at your appointment time or shortly thereafter. If you don't hear from us after 15 minutes, please call us at XXX-XXX-XXXX.

Thank you for scheduling a telehealth visit. You will receive instructions to prepare for your telehealth visit. 15 minutes before your appointment, please click the link here [insert link] to connect to your visit.

Telehealth Outreach & Scheduling Workflow





Virtual Screenings and Assessments

- Consider conducting screenings and assessments over a telehealth visit:
 - Alcohol, tobacco, and drug use assessments for adolescents
 - Behavioral health assessments (PHQ-9)
 - Staying Healthy Assessment, Bright Futures
 - Social determinants of health (PRAPARE)
 - Trauma-informed care (ACEs/PEARLS)



Virtual Screenings and Assessments Cont.

Tips for conducting virtual screenings and assessments:

- Ask the patient if they are in a private, quiet location
- Tell the patient that you will be conducting a routine screening
- Let the patient know that you ask every patient these questions
- Recommend that the patient wear headphones
- Provide the patient with explanations or examples
- Document all responses in the patient's chart
- Connect the patient to the necessary departments or resources
- Note if the patient declined to respond
- Let the patient know if you need a moment to document



Virtual Screenings and Assessments Cont.

Initiating a virtual warm hand-off:

- Alert the care team member via EHR alerts, phone call, or text messaging
- If available, transfer the call or have the provider call the patient back. Remind patient to stay by the phone if someone else is going to call them
- If not, have the MA schedule a follow-up visit for another time

Conducting a Physical Exam

- Some physicians may opt to provide annual checkups through telehealth
- Average to low-risk patients may be good candidates for a video physical exam

Example Normal Video Physical Exam

Objective:

General: Confirm that the patient is awake, alert, and non-diaphoretic; has no psychomotor agitation; and is not in acute distress.

Head, Eye, Ear, Nose, and Throat Exam (HEENT):

- Head: Atraumatic, normocephalic, no rashes noted, no lesions noted; some temporal thinning of hair
- Eyes: No redness, discharge, swelling, or lesions
- Nose: No redness, swelling, discharge, deformity, or impetigo/crusting
- Skin: No lesions, wounds, erythema, or cyanosis noted on face or hands
- Cardiopulmonary: No increased respiratory effort, speaking in clear sentences, I:E ratio WNL
- Neuro: Cranial nerves grossly normal, speech normal rate and rhythm, orientation arrived at appointment on time with no prompting, moved both upper extremities equally











Psychological:

- Appearance, behavior, and attitude: Well groomed, pleasant, cooperative
- Attention and concentration: Focused, linear, appropriate, attends for longer periods of time
- Higher integrative function (executive function, intellectual function): Appropriate, good vocabulary
- Thought process (thought content, thought form, delusion, obsession, abstract thought): Appropriate
- Speech: Normal rate and rhythm
- Affect: Appropriate
- Insight and judgment: Appropriate

Source: AAFP, A toolkit for Building and Growing a Sustainable Telehealth Program in Your Practice

Conducting a Physical Exam



	Step 1: Vital Signs -Weight, blood pressure, pulse, oxygen saturation, temperature
	Step 2: Skin assessment -New bruises, rash, swelling
	Step 3: Head, Eyes, Ears, Nose, and Throat -Assess vision, hearing, sense of smell; observe throat, swallowing
	Step 4: Neck -Assess pain with rotation, jugular venous distension, Corrigan's pulse
	Step 5: Lungs -Deeply inhale and hold; observe wheezing and tachypnea
	Step 6: Heart -Assess pulse; incorporate data from wearables
	Step 7: Abdomen -Assess if abdomen is firm, tender, or distended
	Step 8: Extremities -Press thumb into pre-tibial area and assess edema; perceived temperature
	Step 9: Neurological -Speech, gait, Romberg, stand from seated position
	Step 10: Social Determinants of Health -Diet, physical activity, sleep, stress, housing, transportation, safety, mood



Counseling and Follow-up

- Incorporate case managers, nutritionists to provide counseling and follow-up for at-risk patients
- Provide education on diabetes and hypertension
- Address HEDIS Measures to achieve performance goals
- Utilize Motivational Interviewing techniques

Counseling and Follow-Up Cont.



FQHCs in action:

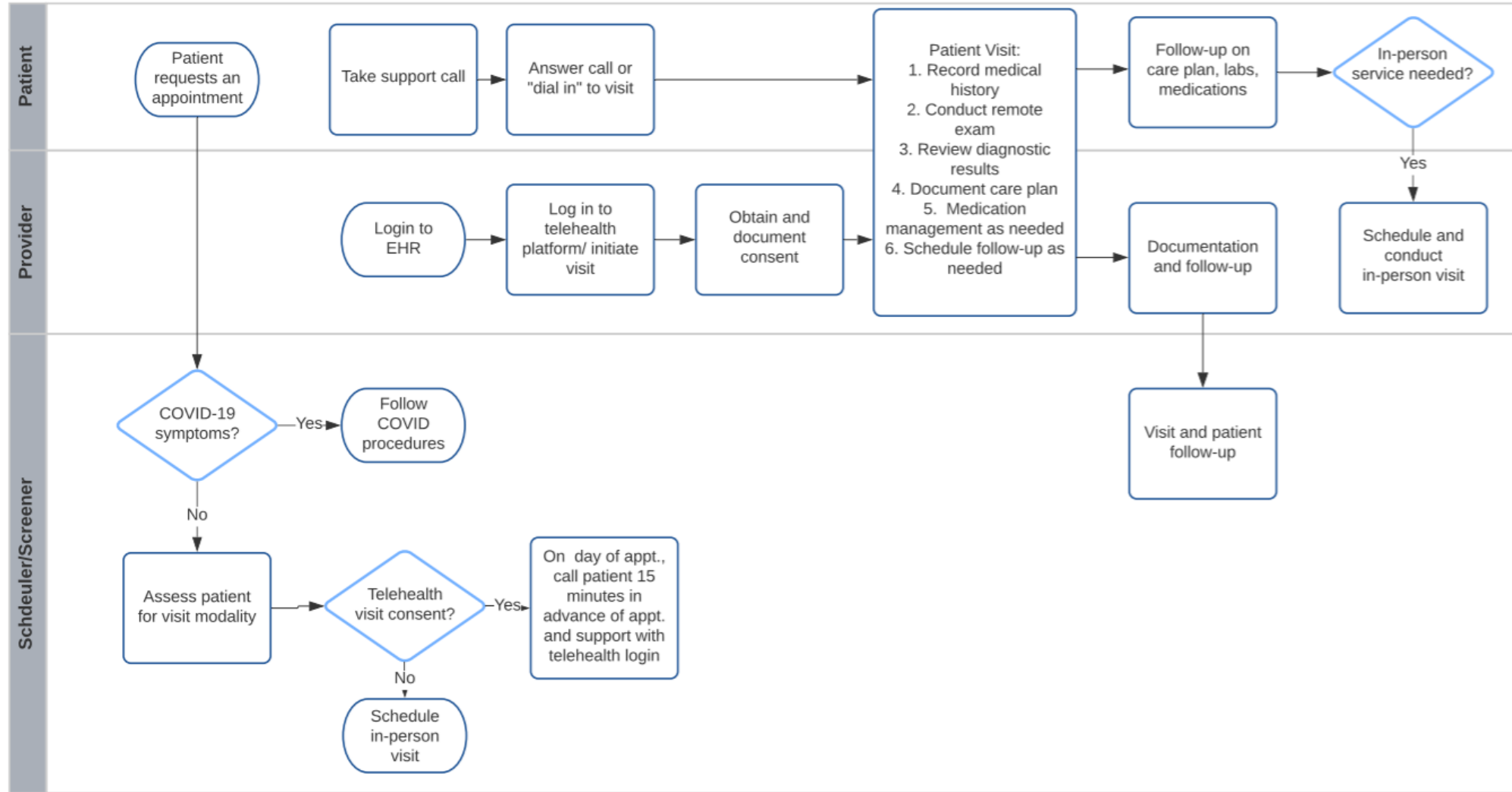
- Virtual Health Education Programming:
 - Health educators and care coordinators meet with patients once a month to address food insecurity and administer a Hunger Vital Sign (HVS) screening
- Diabetes Management Clinic:
 - Diabetes provider champion, NPs, MAs, meet with patients to discuss self-management goals, medication management, when and how to check blood sugar levels, and nutrition and exercise goals
 - HbA1c labs are still conducted within the clinic on a quarterly basis



Hybrid Visits

- Hybrid visits-combining in-person and telehealth services for patient care
- Potential for success for well-child exams, telemental services, and more
- Telehealth site-health centers may designate a “telehealth site” where patients without access to technology can participate in a telehealth visit

Hybrid Visit Workflow





Billing and Reimbursement

Current Medi-Cal Telehealth Guidance:

- Temporary flexibilities under expanded 1135 Waiver are still in place
- Audio and Video are still reimbursed at the same rate

DHCS Telehealth Proposal:

- Permanently expands telehealth payment parity to Medi-Cal managed care (synchronous only)
- Proposes to create a separate (lower) fee schedule for telephone visits, asynchronous telehealth, and remote patient monitoring



CMA Resources:

- CMA Telehealth Practice Implementation Guide

<https://www.cmadoocs.org/Portals/CMA/files/public/CMA%20COVID-19%20Telehealth%20Overview.pdf>

- CMA Telehealth Webinars

<https://www.cmadoocs.org/telehealth-webinars>

- CMA COVID-19 Resources

<https://www.cmadoocs.org/covid-19>



Coding Resources:

- AAFP COVID-19 Coding Scenarios
<https://www.aafp.org/family-physician/patient-care/current-hot-topics/recent-outbreaks/covid-19/covid-19-telehealth/coding-scenarios-during-covid-19.html>
- AMA Preventive Services Coding Guides
<https://www.ama-assn.org/delivering-care/patient-support-advocacy/preventive-services-coding-guides>
- ACP Telehealth Coding and Billing Resources
<https://www.acponline.org/practice-resources/business-resources/telehealth>

Workflow Resources:

- AAFP Telehealth Toolkit
https://www.aafp.org/dam/AAFP/documents/practice_management/telehealth/2020-AAFP-Telehealth-Toolkit.pdf
- Caravan Health Telehealth Physical Exam
https://caravanhealth.com/CaravanHealth/media/Resources-Page/Telehealth_PhysicalExam.pdf
- Caravan Health Adapting the Annual Wellness Visit
https://caravanhealth.com/CaravanHealth/media/Resources-Page/Telehealth_AWV.pdf
- San Diego Integration Institute, Conducting Sensitive Screenings Guide
<https://www.sandiegointegration.org/wp-content/uploads/2020/08/Conducting-Sensitive-Screenings-with-using-Telehealth-2020.pdf>



Questions?



Thank You