Please be advised that UMTRC only provides guidance on billing issues based on experience, anecdotal information we have heard in the field, and through research. Following our advice does not guarantee payment. We always recommend you check with the payer (or your Medicare Administrative Contractor) to verify UMTRC’s information.

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National Consortium of Telehealth Resource Centers
NCTRC Website

https://www.telehealthresourcecenter.org/
UMTRC Services

• Virtual Librarians
  • Individual Consultation
  • Technical Assistance
  • Connections with other programs

• Presentations & Trainings
  • Project assessments
  • Updates on reimbursement policy and legislative developments
Broadband is the foundation of any telehealth program
• Without it your program will be washed away
Broadband Recommendations

- Single physician practice – 4 Megabits per second (Mbps)
- Small physician practice (2-4 physicians) – 10 Mbps
- Nursing home – 10 Mbps
- Rural health clinic (5 physicians) – 10 Mbps
- Hospital – 100 Mbps

https://www.healthit.gov/faq/what-recommended-bandwidth-different-types-health-care-providers
United States Department of Agriculture

- USDA Community Facilities
  - Rural areas with no more that 20,000 residents
  - Funds can be used to purchase, construct, and/or improve essential community facilities, purchase equipment and pay related project expenses
    - Health care facilities such as hospitals, medical clinics, dental clinics, nursing homes or assisted living facilities
  - [https://www.rd.usda.gov/programs-services/community-facilities-direct-loan-grant-program](https://www.rd.usda.gov/programs-services/community-facilities-direct-loan-grant-program)
United States Department of Agriculture

- USDA Distance Learning and Telemedicine (DLT) Program
  - DLT program
  - Non-profit and for-profit businesses
  - Funds can be used for acquisition
    - Capital assets
    - Instructional programming
    - Technical assistance and instruction for using eligible equipment
  - 15% match
Federal Communications Commission

- Administered by the Universal Service Administrative Co. (USAC)
- Rural Health Care (RHC) Program
  - $400 million per year
- Telecommunications Program
  - Provides eligible rural health care participants with discounts for telecommunications services using the urban/rural differential
- Healthcare Connect Fund (HCF) Program
  - Provides eligible rural health care participants and consortia with up to 65-percent flat discount on eligible expenses related to broadband connectivity

https://www.usac.org/rural-health-care/
Highlights of the Telecommunications Program

Eligible Health Care Providers
Rural, not-for-profit or public entities of the following types are eligible:

- Hospitals
- Community health centers or health centers providing health care to migrants
- Rural health clinics
- Local health departments or agencies
- Community mental health centers
- Post-secondary educational institutions offering health care instruction, such as teaching hospitals or medical schools
- Dedicated emergency departments of rural for-profit hospitals
- Consortia of HCPs consisting of one or more eligible entities
- Skilled Nursing Facilities (SNFs) effective January 2017

Eligible Expenses
Telecommunications services

Discount Rate
Urban/rural differential of cost of service

Competitive Bidding Exemptions
Applicants are exempt if the Health Care Providers (HCP) site has a Rural Health Care Program-endorsed evergreen contract
Highlights of the Healthcare Connect Fund (HCF) Program

Eligible Health Care Providers
- Consortia of eligible rural and non-rural public/nonprofit healthcare providers (HCPs)
- Individual rural public/nonprofit HCPs

Non-Rural Health Care Providers
Non-rural HCPs are eligible as a member of a consortium made up of more than 50 percent rural Health Care Provider sites

Eligible Expenses
- Telecommunications and broadband services/network equipment
- Consortium applicants: Health Care Provider (HCP) — constructed and owned — network facilities
- Consortium applicants: Upfront payments

Discount Rate
65 percent flat-rate discount on all eligible expenses

Competitive Bidding Exemptions
Applicants are exempt if:
- Annual undiscounted cost for services is $10,000 or less
- HCP site participating in a Government Master Service Agreement (MSA)
- HCP site has an MSA approved under HFC Pilot Program or HCF Program
- HCP site has an HCF Program-endorsed evergreen contract
- HCP site has a contract negotiated under Schools and Libraries Program
Federal Communications Commission

- COVID-19 Telehealth Program
  - $200 million from CARES Act
  - Limited to nonprofit and public eligible health care providers
    - Post-secondary educational institutions offering health care instruction, teaching hospitals, and medical schools
    - Community health centers or health centers providing health care to migrants
    - Local health departments or agencies
    - Community mental health centers
    - not-for-profit hospitals
    - Rural health clinics
    - Skilled nursing facilities; or
    - Consortia of health care providers consisting of one or more entities above

https://www.usac.org/rural-health-care/
Federal Broadband Assistance Programs

Federal Communications Commission

- COVID-19 Telehealth Program
  - Provides funding to purchase telecommunications, information services, and connected devices necessary to provide telehealth services to patients in response to the coronavirus pandemic
  - Devices must be integral to patient care
  - Devices must be connected devices (e.g., pulse oximetry, blood pressure monitoring devices, etc.)
  - May include devices with Bluetooth or WiFi connectivity

https://www.fcc.gov/covid-19-telehealth-program
Federal Broadband Assistance Programs

Federal Communications Commission
- Connected Care Pilot Program
- Adopted final rules 3/31/2020
- Actual program participation still pending

Pending

Federal Communications Commission

• Lifeline Program
  • Consumers qualify if their income is 135% or less than the federal poverty guidelines, or if they participate in:
    • SNAP
    • Medicaid
    • Or other federal programs

• Benefits may be applied to:
  • Home phone (landline)
  • Mobile phone (cellular)
  • Or high-speed broadband

https://www.usac.org/lifeline/
Institutional and Socially Determinant Barriers to Telehealth Access

- Technology Access and Literacy
  - Devices
  - Stable connection
  - Sufficient speed
  - Comfort and trust

- Interoperability

- Geography

- Sustainability

- Institutional Buy-in
  - Comfort and trust
  - Workflow
Institutional and Socially Determinant Barriers to Telehealth Access (cont’d)

- Socioeconomic and Cultural
  - Cultural competence
  - Class
  - Education
  - Accessibility
  - Language
  - Insurance coverage

- Lack of Research Base/Discrepancy in Existing Literature
Policy Barriers to Telehealth Access

- Reimbursement
- Originating Site Designation
- Malpractice Coverage
- Licensing/Credentialing
- HIPAA/Security
- Prescribing
For more information on barriers and how to address them, please use these sources:

- Center for Connected Health Policy brief
- KFF’s brief
- RHIHub toolkit
According to the American Hospital Association, as of 2017, 76% of hospitals have fully or partially implemented telehealth, an increase from 35% in 2010.

The research base for telehealth isn't nearly as comprehensive as it could be, but recent studies have shown that increased telehealth adoption has some promise:

- COVID-19
- Emergency Department (ED) utilization
- Cost savings
- Mental health care coordination
- Managing chronic conditions
- Store-and-forward

Still need more funding mechanisms for research and optimization