TELEHEALTH IN VESTIBULAR REHABILITATION:
Are you Ready? Or Are You Spinning?

Date and Time of Presentation: 1/24/19, 3:00 pm - 5:00 pm.
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Course Description:
Telehealth is on the frontier of our changing health care system. In 2017, Federal PT Section initiatives granted access to telehealth for nearly 700,000 veterans, and the broader health care sector continues to seek out ways to improve access to care. Telehealth has the potential to improve access by connecting patients with the appropriate specialist, eliminating transportation barriers, and reaching those with mobility limitations. Vestibular rehabilitation is an ideal population for the implementation of telerehabilitation (telerehab). Complaints of vertigo and dizziness are prevalent, ranging from 20% to 56% of the United States population, yet access to specialized vestibular rehab is limited and commuting may be unmanageable when dizzy. Telerehab with the vestibular population allows for providing the right care at the right time. The speakers will use case studies to demonstrate how vestibular rehabilitation can be delivered through telerehab. This session will include information on regulations, technology needs, compliance, and reimbursement issues in order to guide stakeholders in potential ways to implement telehealth in any setting with any patient population. Attendees will learn about the current state of evidence on telerehab, including health care cost savings, outcomes, and patient satisfaction.

Course Objectives:
Upon completion of this course, the participant should be able to:

1. Define telehealth, telerehabilitation, and its history and role as a new frontier in health care delivery.

2. Discuss regulatory practices and examples from the Federal PT Section government's successful implementation.

3. Describe how to implement telerehab in a variety of clinical settings, with focused examples in vestibular rehabilitation.

4. Demonstrate how vestibular rehabilitation can be applied, including challenges and successes from case examples.
References:


Websites: (Accessed on 9/15/18)

1. http://www.apta.org/Telehealth/
4. https://www.colorado.gov/pacific/dora/Physical_Therapy_Laws
Case 1: Total Joint Replacement Example
John Doe is a 65-year-old man with s/p TKR x 3 weeks seen in your outpatient PT practice. He is traveling to visit his grandkids in the southern part of the state for few weeks. He would like to continue his PT visits via telehealth.
(List telehealth needs and practice requirements below).

1. Informed consent: conduct a face-to-face visit to determine appropriateness for telehealth? If not, what do you recommend? 
   - You can have treatment here if you want. You can stop the telehealth session at any time.
   - The online connection we use meets privacy standards.
   - Screen out: living alone, depression, psych issues, unmotivated.
   - Use of online screen tool is discouraged for establishing provider to patient relationship.

2. Technical requirements: is the real-time video necessary? Is store-and-forward (photo) or phone call same as telehealth? Is an email communication enough?
   - The equipment used will be your home computer. It is equipped with a camera and internet connection.
   - Digital (avoid PDAs; use only high quality image capable cell phone if this is the only camera option available).
   - Minimum 800 X 600 pixels; preferred resolution of 1024 X 768 pixels or greater (about 0.8 Megapixels).
   - Email (Yahoo, Gmail) and phone calls with third party are not considered telehealth.

3. Conducting telehealth visit: If you are conducting a real-time video conference, what is necessary? HIPAA? Privacy?
   - Laws about medical information are called HIPAA. You received information about HIPAA from our center. You were told about your privacy and signed permission forms.
   - We connect with a secure connection. This makes sure your privacy is protected.
   - The only person present during your treatment will be an authorized therapist. The therapist is in a private room during treatment. The screen cannot be seen by unauthorized people.

4. Documentation: what should be in your documentation? Who should document? When?
   - You should follow the same documentation standards to clinical practice. Add the session was conducted via telehealth, Time in Time Out.
   - Who is present? Need to identify and verify all individuals in the session?
   - Any technical breaches? Lost connectivity? What was conducted to fix the issues?
   - Any emergencies? Any local provider available if needed?

5. Reimbursement/Liability: is there payment for private payer? Medicare? Medicaid?
   - Current reimbursement is only a snapshot – it requires verification and communication with payers.
   - Medicare: Live video only (GT Modifier), Current telemedicine providers (physician, nurse practitioner, physician assistant, nurse midwife, clinical nurse specialist, clinical psychologist, clinical social worker, registered diettitian), Originating site must be defined “rural” for Medicare reimbursement.
   - Medicaid: PT mentioned in AZ, KY, MN, NE, NM, WA, IN does not pay for PT telehealth.
   - Private Payer: Blue Cross Blue Shield (45%), Aetna (31%), United Healthcare (26%), Cigna (18%), and Humana (9%)-reimbursed telemedicine in 2014.
   - Do you need a rider for malpractice?

This form created by, and courtesy of, Alan Lee, PT, PhD, DPT, CWS, GCS
Mount Saint Mary’s University, Los Angeles
Recommendations extracted from the American Physical Therapy Association and American Telemedicine Association’s 2010/2017 “A Blueprint for Telerehabilitation Guidelines.” In addition, Mike Towey’s speech telepractice in MaineHealth (Waldo County General Hospital).
Case 2: Colorado Example
Patient is a 62 year old female who was in a skiing accident in April 2018 which resulted in an R ACL tear. She had her ACL repaired in May and began physical therapy in an outpatient clinic near her home in Frisco, CO. Her daughter stayed with her for 2 weeks after surgery. She is retired and lives alone.

She would like to continue therapy in order to prepare her to return to skiing this winter. However, she won’t be cleared to drive for 6 weeks and she is concerned about the cost of a taxi. Therefore, she requested after 2 weeks of therapy that she is provided with exercises to do on her own to complete her recovery on her own.

1. Is this patient appropriate for TH treatments?
   a. Treatments techniques can be performed via telehealth
   b. Cognition
   c. Technology aptitude
   d. Safety concerns
   e. Other barriers to telehealth? Hearing, vision, need person to assist patient during session, place to perform video sessions, internet connection, device/computer access

2. Regulations:
   a. Consent: CO requirements for TH practice
   b. Liability coverage
   c. PT Practice Act

3. Reimbursement:
   a. Commercial (contract allows TH and pt’s plan includes TH benefits)
   b. Self-pay: rates? (CO Parity)

4. Technology:
   a. HIPPA compliance (BAA)
   b. PT training on technology and performing therapy via video
   c. PT in secure location
   d. Patient orientation to technology

5. Interventions:
   a. What interventions would be appropriate for this patient?
   b. How can we perform them via telehealth? Are modifications needed?

6. Billing:
   a. CPT codes
   b. POS
   c. Modifiers?
   d. Other requirements per insurance contracts?
## Telehealth Resources

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<thead>
<tr>
<th>Telehealth Company</th>
<th>Website &amp; Description</th>
<th>Cost</th>
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<tbody>
<tr>
<td><strong>Anywhere Healthcare</strong></td>
<td><a href="https://anywhere.healthcare">https://anywhere.healthcare</a> HIPAA compliant video platform with scheduling, billing, and FREE patient-facing iOS and Android apps</td>
<td><a href="https://anywhere.healthcare/signup">https://anywhere.healthcare/signup</a></td>
</tr>
<tr>
<td><strong>Clocktree</strong></td>
<td><a href="https://www.clocktree.com">https://www.clocktree.com</a> Offer video appointments in a secure, HIPAA-compliant platform</td>
<td><a href="https://www.clocktree.com/pricing">https://www.clocktree.com/pricing</a></td>
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<tr>
<td><strong>Coviu</strong></td>
<td><a href="https://www.coviu.com/">https://www.coviu.com/</a> Video consults for your business</td>
<td><a href="https://www.coviu.com/products/">https://www.coviu.com/products/</a></td>
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<tr>
<td><strong>Doxy.me</strong></td>
<td><a href="https://doxy.me">https://doxy.me</a> The simple, free &amp; secure telemedicine solution</td>
<td><a href="https://doxy.me/pricing">https://doxy.me/pricing</a></td>
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<tr>
<td><strong>Google Hangout</strong></td>
<td><a href="https://hangouts.google.com">https://hangouts.google.com</a> Talk to your friends and family, video calls, phone, or message that people you love</td>
<td><a href="https://hangouts.google.com">https://hangouts.google.com</a></td>
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<tr>
<td><strong>Phzio</strong></td>
<td><a href="https://phzio.com">https://phzio.com</a> Telehealth Programs for Employees. SAVE HOURS OF TIME AND GET THE PHYSICAL THERAPY TREATMENTS YOU WANT - WHEN YOU WANT THEM.</td>
<td><a href="https://phzio.com/pricing/">https://phzio.com/pricing/</a></td>
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<tr>
<td><strong>Videotherapy</strong></td>
<td><a href="https://videotherapy.co/vt/home.php#head">https://videotherapy.co/vt/home.php#head</a> We make physical therapy smarter, efficient and optimized</td>
<td><a href="https://videotherapy.co/vt/pricing.php/?_k=l3yzug">https://videotherapy.co/vt/pricing.php/?_k=l3yzug</a></td>
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<td><strong>Vsee</strong></td>
<td><a href="https://vsee.com">https://vsee.com</a> The Only Complete Telehealth Platform To Fit Any Workflow Start doing telehealth today; configure to your workflow as you evolve</td>
<td><a href="https://vsee.com/contactsales">https://vsee.com/contactsales</a></td>
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<tr>
<td><strong>Zoom</strong></td>
<td><a href="https://www.zoom.us">https://www.zoom.us</a> Enterprise video conferencing and web conferencing</td>
<td><a href="https://www.zoom.us/pricing">https://www.zoom.us/pricing</a></td>
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Additional Notes: