Telehealth, telemedicine and related terms generally refer to the exchange of medical information from one site to another through virtual communication to improve a patient’s health. For consistency, NATA will refer to this form of care as telemedicine. Mid-March, in response to the COVID-19 pandemic, the Centers for Medicare & Medicaid Services broadened access to telemedicine services so that beneficiaries can receive a wider range of services without having to travel to a health care facility.

Telemedicine and virtual care are now at the forefront of health care and are in demand as a viable solution for continuity of patient care while we manage public health emergency policies for social distancing and essential care. While the implementation of telemedicine services is normally a lengthy process, requiring considerations such as hardware, software, employee and patient workflow, risk management and quality assurance, modified regulations have enabled short-term options.

Athletic trainers are experts in mobile health care and care coordination, making telemedicine a progressive approach. Whether you are currently offering virtual options in health care or are considering it, now is the time to set up the digital aspect of your practice*.

Here is a checklist to help guide implementation of telemedicine into your organization/practice.

*Given the current public health crisis and national pandemic, policies, guidelines and best practices are quickly changing. It is therefore the responsibility of the health care professional to identify and follow national, state and insurance rules governing the provisions of telemedicine.

Updated April 16, 2020
TELEMEDICINE IMPLEMENTATION CHECKLIST
FOR ORGANIZATIONS PROVIDING ATHLETIC TRAINING SERVICES

01 CHECK YOUR STATE PRACTICE ACT

Your state may have modified regulations or may implement changes in the near future because of the COVID-19 pandemic. Even if your state was restricted or silent on the practice before, now is a time to double check.

02 PRIVACY AND NATIONAL POLICY

Many national policies have been relaxed to ease the implementation of telemedicine. Although this is temporary, best practices in protected health information (PHI) that can continue post COVID-19 regulations are the gold standard. The participation in digital care requires an NPI.

03 POLICIES AND PROCEDURES

Establish written guidelines for the implementation, delivery, documentation, referral and follow-up services. Include emergency action planning for distance emergencies, as well.

04 OBTAIN TELEMEDICINE SPECIFIC CONSENT

Offer the ability to opt in or out of telemedicine. Include the patient’s consent in your documentation. Be sure to address population-specific needs.

05 DOCUMENT AS NORMAL

Record patient care interactions just as if the care was provided in person. Include documentation that telemedicine care is being provided under COVID-19 regulations when applicable.

06 REVIEW MALPRACTICE INSURANCE

Review policy coverage for telemedicine services. Ask about additional riders if coverage is not provided under standard policies.

07 ADDRESS STANDING ORDERS

Update standing orders to include the provision of telemedicine. Ensure your employer and collaborating provider approve.

08 IDENTIFY YOUR TELEMEDICINE PLATFORM

In general, there are HIPAA-compliant videoconferencing solutions and EHR management systems. Temporarily, we have the option of non-HIPAA-compliant systems. This is a critical step usually driven by patient-care goals.

09 CONSIDER TECHNOLOGY NEEDS

It is recommended that you use a bandwidth of at least 15mbs upload and 5mbs download speeds, a quality camera, microphone and adequate lighting in a professional space. It is common for patients to need assistance prior to initiating a session. They will also need adequate technology.

10 EDUCATE AND COMMUNICATE

The single greatest limitation in telemedicine is the clinical and professional education of both the HCP and the end-user. It is important to practice with your health care team and provide opportunity for onboarding of your patients. Congruent communication and messaging are needed to ensure maximum adoption and successful outcomes.