RSABill, Inc.

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Readying for Telemedicine Post Pandemic

"It's been said, rightly and tragically so, that it took a pandemic to prove the value of telehealth to the American healthcare system.

As health systems and hospitals adjust their workflows to deal with the corona virus pandemic, they're learning some valuable lessons on how to best use connected health technology. With inperson care reduced to emergencies and an emphasis on keeping patients and providers separated, they're using telemedicine platforms and mHealth devices – including the telephone to deliver care.

And they're planning beyond the COVID-19 crisis, with telehealth front and center."-mHealthIntelligence.com. (Full article <u>https://mhealthintelligence.com/features/covid-19-gives-providers-a-blueprint-for-new-telehealth-strategies</u>)

I applaud our private practices for the way you have responded to the sudden changes that we faced in March 2020. Many adopted use of mHealth to continue care for your patients as provided for by the emergency declaration from both Federal and State governments to temporarily expand access to telemedicine and telephone visits with relaxed rules. This was instrumental to public safety, continuity of care and survival for our 2nd quarter P&L. Corona virus is not gone, telemedicine will not be gone, and however, these temporary provisions will be. I expect new mHealth guidelines coming soon. Take action now to be prepared.

Proper Telemedicine Platform

The medical industry has security and privacy guidelines in place for very good reasons. The temporary relaxing of HIPAA during the emergency was needed to not stop the delivery of medicine until providers could properly adopt a telemedicine program of compliance, establishment of practice guidelines, and daily workflow. This is precisely what you should be working on now. What is your plan to integrate a proper telemedicine platform to your practice?

1. Subscribe to a HIPAA compliant service provider. Your EHR may offer a telemedicine option. Additionally, there are several independent service providers available to choose from. Cost varies greatly, but it doesn't have to be a significant new overhead to be effective. Look for a service provider that offers a (BAA) Business Associate Agreement, is easy to use for both your patients and the providers, priced to your budget. *RSA has partnered with MyRemoteDr. I have a 19 year business history with the creator and they have a great product that is priced very favorably. See the promotional products at the end of the article. Please call me to discuss more about https://myremotedr.com/en and I can give you a demo.*

- 2. Establish practice guidelines of what types of visits will be offered for a telemedicine visit. This is specific to each practice. Types of visits to consider: triage for a new problem, follow-up for results, medication review and update, post procedure check, patient education and counseling. Your front office and medical assistants need to have clear guidelines of what they are to handle or what needs to be given to the provider. Should it be a telephone message for today, vs. a scheduled telemedicine visit, vs. an in-office visit?
- 3. The daily workflow will be very similar for telemedicine as it is for in-office visits. Establish the provider's schedule availability for telemedicine hours separate from in-office appointments. You may offer the first hour of the day as telemedicine, then 3 hours of in-office appointment, followed by a lunch break and then another hour of telemedicine, followed by 2 hours of in-office appointments, ending with an hour of telemedicine. You may prefer to schedule a full morning of telemedicine and the afternoon in-office appointments. Think about telemedicine to possibly expand your hours beyond 9-5, M-F. This can be an opportunity to treat patients with little to no overhead. For example, one provider can be in the office utilizing the exam rooms and medical assistants, while another provider can be working the telemedicine schedule from the private consultation room.

Whatever your schedule, be sure to have the **proper patient forms** prior to the visit. Some telehealth service providers have the consent form for telemedicine built into the appointment. **Call to remind** these patients of the upcoming appointment. Appointment reminder services are extremely effective. **Collect patient co-pay** and be sure the patient understands that this is a billed visit to their health insurance.

4. Lastly, do not forget to notify your malpractice insurance carrier. When you obtained your policy, there was a question asking if you perform remote medicine and you likely responded, no. Coverage for telemedicine is not to be assumed. Call your agent to be sure you have coverage for telemedicine visits.



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MyRemoteDr is a cloud-based subscription telemedicine service provider. The creator is experienced and a proven innovator in technology for medical practices. What I like most about MyRemoteDr is that it works seamlessly on any smart phone, and the likelihood is that your patients have access to a smart phone.

- Patient is given an appointment; staff adds patient name, smart phone cell number, and DOB to MyRemoteDr schedule.
- Link to consent forms are texted to patient, patient opens link, signs forms via docusign, MyRemoteDr updates that forms completed.
- Day of appointment, link is texted to patient; patient opens link, confirms identity with DOB, and is now waiting for provider to join meeting.

It is that simple! Your patients can see you, anywhere, anytime, without having to be technosavvy or own special computer equipment. Yes, it will work with any devise that has sound, camera, and internet browser.

- For the provider office: Sign in to your account via internet to access schedule, forms and appointment history with date/time stamp and duration of video telemedicine visit. (No recording of the actual session.)
- Click on patient name in schedule to start video call. No concern if patient has IOS vs. Android, connection is seamless.
- Chart your SOAP note in your usual charting system. Integration to some PMS and more to be added.

Pricing is the best part.....flat rate/mo equivalent to about 3 reimbursed in-office visits

Call Juli (714) 903-7767 or <u>juli@rsabill.com</u> for a demo and special offers available to RSABill clients.