

Final Telemedicine Survey Guidelines and Department of Health Survey Policy

Introduction

The Pa. Department of Health (Department) views telemedicine as a technology tool used by clinicians to facilitate the delivery of health care services. Telemedicine is not, in itself, a “service” provided by the facility. This guidance for surveyors replaces the guidance originally issued April 25, 2013, and revised Jan. 15, 2016.

Definitions

“Distant site”: A physical location from which a health care practitioner is providing health care services by means of telemedicine or telehealth.

“Originating site”: A physical location at which a patient is located at the time health care services are provided to the patient by means of telemedicine or telehealth.

“Telehealth”: A method to deliver health care services face-to-face via telemedicine technology to facilitate the diagnosis, monitoring, consultation, treatment, education, care management and self-management of a patient’s health care while the patient is at an originating site and the health care practitioner is at a distant site. Telehealth facilities direct patient care, consultations, patient self-management and caregiver support.

“Telemedicine”: The delivery of health care services face-to-face using interactive telecommunication technology during the actual time when such services are being provided to facilitate the assessment, diagnosis, monitoring, consultation, treatment, education, care management and self-management of a patient’s health care while the patient is at an originating site and the health care practitioner is at a distant site. The term does not include standard telephone conversations, facsimile transmissions and email. The interactive telecommunication shall include, at a minimum, audio and video equipment.

“Telemedicine technologies”: Synchronous, interactive audio and video equipment and systems, including secure video conferencing and store and forward technology that link a health care practitioner to a patient in person during the actual time health care services are provided. The term does not include standard telephone conversations, facsimile transmissions, email or a combination of standard telephone conversations, facsimile transmissions and email.

Applicability

- This guideline applies to health care services provided by telehealth/telemedicine where either or both the distant site and originating site are areas included under the hospital license.
- Notification to the Department and an onsite occupancy survey shall not be required if telehealth/telemedicine is being added as a method of delivery to a health care service currently offered by the hospital.

- Notification to the Department and an onsite occupancy survey shall be required if the hospital is adding a new health care service that includes telehealth/ telemedicine as a method of delivery of that new service.
- Notification to the Department and an onsite occupancy survey shall be required if, in the addition of providing telehealth/telemedicine as a method of delivery to an existing health care service, construction, alteration or renovation work will be required within premises included under the hospital license which is necessary to accommodate and support the telemedicine/telehealth services.
- When an occupancy survey is not required, the hospital shall notify the Department and, if applicable, the accreditation organization of all methods of telehealth/telemedicine being provided by the hospital at the time of the next licensure application. Upon receipt of this notification, the Department may conduct an onsite visit to inspect the telemedicine technology. If the Department is at the hospital prior to the receipt of this notification, it may inspect the telemedicine technology at that time.

Requirements

- Hospitals shall be permitted to provide telehealth/telemedicine services under the following conditions:
 - When telehealth/telemedicine services are provided to the hospital's patients through an agreement with a distant site hospital or a distant site telemedicine entity, the parties shall enter into a written agreement which meets all of the requirements of the Conditions of Participation contained in 42 CFR Part 482.
 - The hospital shall provide a description of all health care services to be rendered via telehealth/telemedicine, including location of health care practitioners, location of patients and type of service, such as store and forward or interactive.
 - The hospital shall create and maintain telehealth/telemedicine policies and procedures consistent with nationally recognized telehealth/telemedicine recommendations and guidelines. In the absence of nationally recognized recommendations and guidelines specific to a service to be provided by telehealth/telemedicine, the hospital will develop applicable policies and procedures. These policies and procedures shall, at a minimum, address: staff education and training, patient safety and security of the information being transmitted.
 - The hospital shall create and maintain a list of all participating health care practitioners covered by the telehealth/telemedicine agreement and the current medical staff privileges of each practitioner.
 - All health care practitioners who provide telehealth/telemedicine services shall currently hold a valid license, certification or registration to practice in Pennsylvania and the state in which they are physically located when rendering telehealth/telemedicine services.
 - An originating site hospital may accept the practitioner credentialing of the distant site hospital specific to the clinical specialty in which the practitioner is providing telehealth/telemedicine. The originating site hospital must demonstrate verification of provider credentials issued by the distant site hospital, including verification that each

- practitioner has sufficient training in the specified medical discipline in which the practitioner is using the telehealth/telemedicine services.
- The governing board of the originating site hospital shall approve all telehealth/telemedicine services, contracts, policies and procedures, health care practitioner authority to practice, and medical staff privileges.

Informed Consent

- The consent obtained from the patient who is to receive telehealth/telemedicine services shall comply with all applicable federal and state laws relating to informed consent.
- Patient consent shall include documentation of the patient's acknowledgment of patient rights and responsibilities with respect to accessing health care via telemedicine technologies and a description of the process for complaints that includes contact information. This documentation shall also include a description of the mechanism for obtaining additional patient consent, if needed, as in the case in which an invasive procedure may need to be performed at a later date.
- This patient consent need not be separate from any other consent for treatment.

Privacy

- The provision of telehealth/telemedicine services to a patient shall comply with all applicable federal and state laws relating to privacy and security of individually identifiable health information, including compliance with the Health Insurance Portability and Accountability Act and the Health Information Technology for Economic and Clinical Health Act.

Medical Records

- The hospital shall maintain a complete record of the patient's care in accordance with the standards applicable to traditional in-person encounters for documentation, maintenance and transmission of medical records.
- The hospital shall store and file all electronic communications related to a patient's care in the patient's medical record consistent with traditional recordkeeping policies and procedures.