

In many cases, telehealth and virtual care can keep people safely at home and out of hospitals, doctors' offices and urgent care centers by triaging those who have questions and need medical care, providing timely access to diagnosis and treatment, and monitoring patients with chronic conditions, while also limiting the person-to-person spread of COVID-19.

Tips to simplify your telehealth journey

- Continue to follow the Centers for Medicare & Medicaid Services' (CMS') "[General Provider Telehealth and Telemedicine Tool Kit](#)," which includes coding and billing guidelines, along with the American Medical Association's "[Quick Guide to Telemedicine in Practice](#)" for physicians and physician practices. Also monitor CMS's "[COVID-19 Emergency Declaration Blanket Waivers for Health Care Providers](#)" and "[Hospitals: CMS Flexibilities to Fight COVID-19](#)" documents to stay up to date on waivers related to the delivery of and billing for telehealth services.
- In light of the Office for Civil Rights (OCR) of the Department of Health and Human Services' (HHS) announcement that it would exercise enforcement discretion and waive certain HIPAA penalties during the public health emergency, clinicians may use popular applications that allow for video chats, including Apple FaceTime, Facebook Messenger video chat, Google Hangouts video, or Skype to expand their reach to patients. To the extent that providers wish to use HIPAA-compliant application vendors, such as Zoom for Healthcare, Skype for Business and Updox, OCR will not impose penalties for a lack of a business associate agreement between the provider and vendor.
- Hospitals can partner with local digital companies to leverage resources for the health care team like access to virtual platforms, digital toolkits, chatbots, additional laptops and iPads to create a virtual care system.
- As inquiries and the need for further medical evaluation increase, providers may consider posting communications on their webpages about high e-visit volume and wait times to help ease concerns regarding clinician availability to triage and care for patients who are at home.
- Ensure that health care workers are trained on existing or potential virtual platforms, patient portals, patient-monitoring tools, messaging apps, etc.
- For patients without virtual platform capabilities or those in rural communities with little access to broadband, establish a system of telephone triage, pre-visits and visits, so patients don't have to physically go into the hospital or clinics for care, whenever possible. Set up communication with the patient or a caregiver, based on preference — phone, email or text messaging — for appointment reminders, questions and concerns, and alerts concerning test results.

Hospitals and health systems are leveraging telehealth and online tools in many ways to combat novel COVID-19

Assessment tools and virtual triage

As COVID-19 cases become more widespread in communities, providers increasingly are using coronavirus assessment tools, online screening tools or COVID-19 telephone and email hotlines as a first step in assessment.

These tools can help hospitals assess and improve their preparedness for responding to a communitywide outbreak of COVID-19. [Providence St. Joseph Health is using a chatbot](#), a computer program built with Microsoft services and designed to provide answers to questions about potential symptoms. Through the chatbot, people at high risk of infection are directed to seek immediate care, and other at-risk patients are connected with the health system's nurse via telephone or they can schedule a telemedicine appointment.

A number of health tech companies are offering free tools. [Bright.MD](#) offers a free COVID-19 screening tool for hospital websites. [Vivify Health](#) offers unlimited use of the COVID-19 screening pathway to providers at no cost, along with deeply discounted and rapid deployment to providers new to the Vivify Pathways™ platform. Designed by Vital software, Emory Healthcare helped to build [C19check.com](#), a self-triage tool, embedded with Centers for Disease Control and Prevention (CDC) guidelines on COVID-19, for the public to assess their symptoms and risk of contracting the coronavirus.

- **e-Visits:** Hospitals and health systems also are using e-visits to triage anyone who has COVID-19 symptoms or has been exposed to someone who has traveled to major hotspots and, if clinically appropriate, referring for COVID-19 testing. MultiCare is offering free e-visits to those with symptoms and the use of the promo code COVID19 (in the payment section) to waive the regular fee. Additionally, [UW Medicine](#) is triaging potential COVID-19 patients through its existing virtual clinic, and training clinicians across its 45 specialties to conduct video calls for non-COVID-19 patients.

[Spectrum Health is offering free virtual screenings](#) for people in Michigan who are concerned that they may have the virus. Individuals schedule a free screening through its COVID-19 hotline and are scheduled for a virtual video visit and assisted in downloading the Spectrum Health Now app. It is not necessary to be a Spectrum Health patient to use the service and receive the screening.

- **Toolkits:** Rx.Health, the digital startup of [Mount Sinai Health System](#), created a digital COVID-19 toolkit to help hospitals screen for COVID-19 and care for those with symptoms. It includes checklists for health care workers to prepare for potential COVID-19 diagnoses and cases, telehealth platform and tools for front-line workers to digitally monitor cases and guidelines to identify high-risk patients.

Caring remotely for persons with suspected or confirmed cases of COVID-19

The CDC urges patients with suspected cases and mild COVID-19 symptoms to be cared for at home and monitored closely using telecommunication devices. Telehealth also is being used by patients with other conditions who do not want to be exposed to the virus. Kaiser Permanente is using telehealth to care for members who are quarantined at home. Patients stay in touch with doctors via video, phone and text messaging.

Protecting health care workers with virtual tools and putting quarantined clinicians to work

As more clinicians are exposed to and infected with COVID-19, [telehealth is a way to limit exposure of health care workers](#) and lessen the use of masks, gowns and other personal protective equipment that are in short supply. Health systems with existing telehealth technology can leverage it in ambulatory settings for patients who test positive and for hospitalized patients to reduce exposure risks to visitors and staff, among other uses. [Jefferson Health](#) is experimenting with televisit systems, including having providers use video calls to communicate with patients from room to room in a hospital setting. If clinicians are quarantined but are still able to work, they may be able to provide telehealth from their homes. [Intermountain Healthcare](#) uses video visits for COVID-19-infected patients who are in one of its hospitals. Patients in isolated rooms are cared for by nurses in person, but doctors see them via a live video feed. [Kaiser Permanente](#) is issuing laptops to more physicians who can do visits from home during late hours or if they are isolated due to potential infection.

Expanding telecritical care

Health systems that provide e-ICU services are expanding to help other hospitals cover critical care units remotely and provide support to hospitals face a staffing shortage. [The University of Alabama at Birmingham \(UAB\)](#) already provides critical care via telehealth to four hospitals around the state. However, if COVID-19 spreads further as expected, additional providers will be needed to care for patients considered to be critical or in need of an intensive care unit. UAB is working to expand the number of sites to support hospital staff when necessary.

Leveraging the use of telehealth technology vendors and coordinating care handoffs

Many hospitals have established relationships with telehealth providers that can be expanded and coordinated for patients who need medical attention. Even the main telehealth vendors — [Teladoc Health](#), [Amwell](#), [Doctor on Demand Inc.](#) and [MDLive Inc.](#) — are seeing high visit volumes and wait times. [PlushCare](#), a San Francisco-based company, is expanding its focus from providing birth control and other drugs to patients to helping patients identify risk factors for COVID-19, and monitoring positive cases remotely. Part of the increase is from people who are worried about COVID-19, but also is driven by patients with other conditions seeking to avoid being exposed. Even without having established relationships with telehealth providers, health systems need to be ready for handoffs. When Amwell has patients who meet CDC guidelines for testing and refers them to hospitals, the company contacts the hospital regarding each patient's arrival, and tells them to remain in their cars until hospital personnel meet them. It also ensures that local public health officials are contacted to make sure the patients were treated.