Forging Ahead With Telehealth: A Roadmap for Physical Therapists

Combined Sections Meeting 2014

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Forging ahead with telehealth. A roadmap for physical therapists.

Introduction: Overview of the toolkit
The American Physical Therapy Association has identified that new models of care and standards of practice are emerging in the US healthcare system. Examples include adoption of electronic medical records (EMR), patient centered medical home (PCMH) and telehealth. To respond to these changes work groups have been formed with the key objective of compiling helpful guidelines and examples in these areas.

The APTA staff workgroup on telehealth was formed in June of 2012 and is comprised of physical therapists. Since its inception the group has designed a podcast series, an online learning experience and the telehealth toolkit.

The telehealth toolkit summarizes the key elements to consider when establishing a physical therapy telehealth program. It includes National examples of telehealth, consideration of HIPAA, State and Federal practice acts, billing and coding, research and start up checklists.

The information in this handout gives an overview of the telehealth toolkit, for more information in any of the areas discussed here please reference the toolkit on line:

http://www.apta.org/telehealth/

Best Lessons in Telehealth Research – Good, Bad, and Real.

In short, there is a difference in the research outcomes for telehealth, telemedicine, and telerehabilitation. When we say “telehealth” we are talking about the delivery of health-related services and information via telecommunications technologies.3

American Physical Therapy Association (APTA) defines telehealth3 as the use of electronic communications to provide and deliver a host of health-related information and health care services, including, but not limited to, physical therapy related information and services, over large and small distances. Telehealth may be used to provide health education and advice, communicate patient reminders, monitor clinical status, or deliver interventions.

American Occupational Therapy Association (AOTA) defines telerehabilitation4 in the larger realm of telehealth as the application of communication technology for supporting rehabilitation services.

The American Speech-Language Hearing Association (ASHA) defines Telepractice5 as the use of telecommunications and information technologies for the exchanges of information from one site to another for the provision of health care to an individual from a provider through hardwire or Internet connection (Maryland regulations at 10.41.06).

With the triple aim of health reform, it may behoove practitioners to consider telehealth research in the framework of health, healthcare, and dollars spent on delivery models.

For access to care research, Silva et al.6 and Chumbler et al.7 provide additional examples. For delivery of healthcare, Russell et al.8 and Scalvini et al.9 provide excellent telehealth models in the musculoskeletal and cardiopulmonary rehabilitation, respectively. In terms of cost savings for dollars spent, recent article in BMJ by Pinnock et al.10 have provided thoughtful evidence while cost savings demonstrated by Armstrong et al.11 points to key variables to telehealth implementation.

3. http://www.apta.org/PatientCare/Technology/  
Getting started in Telehealth: Important considerations and checklists

1. Access your state practice act and determine if telehealth is incorporated into it.
2. Specify the type of program/service that will be provided. Search the literature and gather as much evidence as you can to support your program.
3. Contact your state Medicaid agency and find out if telehealth provided by Physical therapists will be covered.
4. Establish an informed consent.
5. Establish policies and procedures that comply with HIPPA. A script that outlines the content of the session to be private and identifies who will be in the room at the distant site.
6. Choose a HIPAA compliant video over the internet protocol (VOIP)
7. Establish a procedural manual for telehealth complete with downtime procedures.

Regulatory issues in Telehealth
The Federation of State Board of Physical Therapy provides helpful guidelines for the development of telehealth through the Model Practice Act. Teleconsultation is specifically cited in the model practice act suggesting that physical therapists both licensed in the state where the client is located during a session can interact via live video stream or telehealth. Ultimately the state practice act of the originating site, where the patient is located, governs whether or not telehealth is viable.

Practitioners should be mindful of potential guidelines for intra-state practice and inter-state practice since current telemedicine providers may or may not provide inter-state practice. Currently, there are no states allowing inter-state practice in physical therapy.

Washington and Alaska were two states to institute specific reference to telehealth in the physical therapy practice acts which allows for intra-state practice only.

Before starting a telehealth program in your state, first check the practice act. For an example of how to approach a state board of physical therapy regarding telehealth (refer to part 2 of the telehealth podcast series by visiting the APTA telehealth page).

Integrating Telehealth into existing models of care: A discussion about how telehealth fits into current models of care such as the patient centered medical home.

Conclusion

Physical therapy provided via telehealth can enhance access to service and address provider shortage in certain settings. As adoption of technology increases, therapists should collaborate with providers in medicine, nursing, and rehabilitation engineering to generate best practices in telehealth research, practice, and education.

Speakers for the course:

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Postscript

This handout corresponds to the presentation, mostly for those of you who couldn’t make the session. Obviously, these are not our slides, because they wouldn’t be very helpful to you - they are designed to supplement the presentation, not substitute for the presentation.