

PURPOSE:

To describe telecommunications systems and provide guidance in the use of technology as permitted in the provision of hospice services during the COVID-19 health emergency.

DEFINITIONS

- I. The following definitions are provided by the Office for Civil Rights (See “FAQs on Telehealth and HIPAA during the COVID-19 nationwide public health emergency”):
 - A. Non-public facing remote communication product:

A “non-public facing” remote communication product is one that, as a default, allows only the intended parties to participate in the communication. Non-public facing remote communication products would include, for example, platforms such as Apple FaceTime, Facebook Messenger video chat, Google Hangouts video, Whatsapp video chat, Zoom, or Skype. Such products also would include commonly used texting applications such as Signal, Jabber, Facebook Messenger, Google Hangouts, Whatsapp, or iMessage. Typically, these platforms employ end-to-end encryption, which allows only an individual and the person with whom the individual is communicating to see what is transmitted. The platforms also support individual user accounts, logins, and passcodes to help limit access and verify participants. In addition, participants are able to assert some degree of control over particular capabilities, such as choosing to record or not record the communication or to mute or turn off the video or audio signal at any point.
 - B. In contrast, public-facing products such as TikTok, Facebook Live, Twitch, or a chat room like Slack are not acceptable forms of remote communication for telehealth because they are designed to be open to the public or allow wide or indiscriminate access to the communication. For example, a provider that uses Facebook Live to stream a presentation made available to all its patients about the risks of COVID-19 would not be considered reasonably private provision of telehealth services. A provider that chooses to host such a public-facing presentation would not be covered by the Notification and should not identify patients or offer

individualized patient advice in such a live stream.

POLICY

- I. During the declared public health emergency for COVID-19, on an interim basis, the Agency may use telecommunications technology in the provision of patient care as allowed by the Centers for Medicare and Medicaid Services (CMS).
- II. The use of telecommunications systems is allowed as an adjunct to ordered visits if:
 - A. The patient is receiving routine home care,
 - B. It is feasible and appropriate to do so to ensure that Medicare patients can continue receiving services that are reasonable and necessary for the palliation and management of a patients' terminal illness and related conditions without jeopardizing the patient's health or the health of those who provide services during the pandemic, and
 - C. The use of technology is included on the plan of care and is tied to the patient-specific needs as identified in the comprehensive assessment and the measurable outcomes that the hospice anticipates will occur as a result of implementing the plan of care.
- III. During the declared public health emergency for COVID-19, on an interim basis, the Agency may use telecommunications technology in the provision of the face-to-face visit as allowed by the Centers for Medicare and Medicaid Services (CMS).
- IV. The Agency will provide scheduled remote services to eligible patients via an approved non-public facing remote communication product.
- V. Services provided via telecommunications systems will be provided as ordered in the patient's/client's plan of care.

PROCEDURE

- I. Services, including in-person home visits and services provided via telecommunications will be provided in accordance with physician orders.
- II. The Agency is responsible for selection of an appropriate platform, approved by the Office for Civil Rights, for providing telecommunication services.
 - A. Qualified Agency personnel will teach the patient/client to use any equipment needed or provided.
 - B. The Agency will ensure the communications product being used protects the security of protected patient/client information. If it is not HIPAA compliant, the patient/client will be informed and the patient/client will have the opportunity to consent to or opt out of telecommunications services.
 - C. The Agency will document the patient/client's and/or caregiver's initial competency in use of the telecommunications equipment.
- III. The patient will be informed regarding the plan of care and will be given telephone numbers to call in case of questions or an emergency.
- IV. The Agency will ensure the communications product being used protects the security of protected patient/client information. If it is not HIPAA compliant, the patient/client will be informed and the patient/client will have the opportunity to consent to or opt out of telecommunications services.
- V. There is no payment beyond the per diem amount for the use of technology in providing services under the hospice benefit. For the purposes of the hospice claim submission, only in-person visits (with the exception of social work telephone calls) should be reported on the claim.