

CORPORATE POLICY

TELEHEALTH SERVICES POLICY

Staff this document applies to:

Medical, Nursing, Allied Health and Administrative Support staff providing services, or assisting patients to receive clinical services, in an Outpatient setting using Telehealth Services.

State any related Austin Health policies, procedures or guidelines:

Request for Telehealth Clinic

Telehealth Billing Guideline for Medical Practitioners

Rights of Private Practice Policy

Patient Accounts - Process for Raising Outpatient Private Practice Billing

Definitions:

Medicare Benefits Schedule (MBS) – a Department of Health and Ageing (DoHA) publication that provides information on the arrangements for the payment of Medicare benefits. These benefits are payable to eligible members of the public for services provided by eligible health care professionals for a range of medical services provided in or out of hospital and is updated annually.

Right of Private Practice (ROPP) – specific for this application. Austin Health may grant a Specialist the right to use specified facilities, support services and consumables in order to allow the Specialist to see and treat private patients in return for payment of a Facility Fee.

Right of Private Practice Agreement – a record of the commercial arrangement reached between Austin Health and the doctor.

Specialist - any medical practitioner who is registered or authorised to practise as a consultant through AHPRA.

Telehealth - Any health-related activity that is conducted at a distance between two or more locations using technology that encompasses both <u>video and audio capabilities</u>, direct with the client, with or without the presence of family, carers, and/or other health providers.

Policy:

A Telehealth consultation is where a patient and the eligible specialist undertake a consultation via video conferencing technology. This may also include, but not limited to, the patient's General Practitioner. To be eligible to bill for a Telehealth Consultation the following criteria must be met:

- a) The patient:
 - cannot be an admitted patient; and
 - is eligible for Medicare rebates; and
 - is located more than 15km away from the Specialist at the time of the consultation; and
 - ✤ is located in a Telehealth Eligible Area (see <u>Telehealth Eligible Areas</u>); or
 - is a care recipient at an eligible Residential Aged Care Facility; or
 - is a patient of an eligible Aboriginal Medical Service.

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- b) A Telehealth Clinic must be established through the completion of the following:
 - a "<u>Request for Telehealth Clinic</u>" form which must be appropriately authorised
 - ✤ a "<u>New Clinic Template</u>" or "<u>Clinic Template Change</u>" form
 - ♦ a "<u>DHHS register new clinic</u>" form
 - ✤ a "Proforma for new or expanded clinics" form
 - a "<u>Rights of private practice</u>" form

All Telehealth Services being provided must be covered by a Right of Private Practice Agreement between the Health Service and the Consultant as follows:

- Where the service operates within an existing clinic the existing clinic private practice arrangement will prevail with relevant organisational splits being adhered to;
- Where the service is a completely new stand-alone clinic a new Right of Private Practice arrangement will need to be established.

Minimum requirements for a Telehealth consultation are:

- 1. Receive Patient consent Staff must discuss with patients the benefits and risks of any treatment options including consultations delivered via Telehealth to ensure the patient is fully informed about their treatment regime. No written consent is required.
- **2. Referral -** Referrals must still be gathered prior to making any booking in the Austin Health Trakcare system.
- **3. Booking -** Telehealth consultations must be booked in advance and in recognition of the particular circumstances operating.
- **4. 'Arrive' the patient -** The patient must be noted in the booking system as having "arrived" at the appointment.
- **5. Contact Delivery Mode and Method -** Must be documented within TrakCare to reflect a Telehealth consultation for VINAH reporting purposes. An appropriate entry must be made in the patient's Medical Record to indicate that the service delivery method was a Telehealth consultation and include relevant full clinical details.
- 6. There must be a both an **audible** <u>and</u> **visual** link between the patient and the specialist in order to bill a Telehealth consultation.
- **7. Billing procedures** must comply with the Telehealth Billing Guidelines and will suffice as appropriate consent.

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Legislation/References/Supporting Documents

Telehealth Program Guidelines (effective 1 January 2013)

www.mbsonline.gov.au/telehealth

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