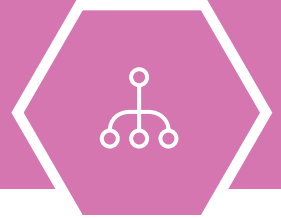


# Key Considerations When Designing a Telehealth Workflow



Although each practice or organization's workflow may look different, there are key questions and criteria to keep in mind when building a telehealth-inclusive workflow.

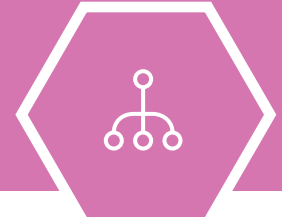
Below are the key questions and criteria to keep in mind:

## GENERAL CONSIDERATIONS

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- How will the telehealth technology integrate with the EHR if it isn't through your existing EHR setup?
- How will clinicians document telehealth visits?
- How will telehealth visits fit into the clinic/clinician schedule?
- Where will telehealth visits take place in the clinic (e.g., administrative office, specific exam room)?
- How do patients first hear about telehealth? (e.g., from health care practitioner (HCP) during appointment, read in waiting room, read on website, email announcement)
- How do patients learn more about telehealth? (e.g., designated staff, website, email)
- How do patients register for telehealth?
- What reimbursement model makes most sense for your practice (e.g., bill insurance, flat fee for patient)?
- Who will keep track of developing reimbursement policies?
- Are the appropriate codes available in the EHR system?
- Do the care team members know what documentation is required for telehealth billing?

# Key Considerations When Designing a Telehealth Workflow (Cont.)



## PRE-VISIT

### Identification

- How will eligible patients be identified for telehealth appointments?
- How do patients know if they and/or their case is eligible for a telehealth appointment? (e.g., digital triaging of patients to in-person or telehealth)
- When there is coordination between providers, how will information exchange occur?
- How do we ensure the clinician is licensed in the patient's state?

### Education

- What type of preparation education is needed? (e.g., how to download and use platform, visit expectations)
- Who educates the patient on telehealth?

### Communication

- How will patients be reminded of appointments?
- Who sends appointment reminders?
- Who will field patient questions?
- How are appointments scheduled? (e.g., time blocks vs. throughout the day; digitally vs. manually)
- How will you ensure eligible and interested patients are covered?

### Managing Coding and Billing

- Who will verify insurance eligibility and manage authorization?

## DAY OF/DURING VISIT

### Administrative

- How will patients "check in" for their appointment?
- Who will get patients set up on the platform (e.g., "room" them)?
- How will patient consent be obtained and stored?
- Who ensures the HCP's room is set up? (e.g., clean, quiet, Wi-Fi working)
- Who troubleshoots with the patient and/or HCP?
- How many people need to be ready to answer patient and/or HCP questions?
- How does the handoff to the provider take place?

### Clinical

- Which care team member(s) is providing virtual care?
- What is the record-keeping workflow? (e.g., codes and modifiers to include in note)
- What are the protocols for telehealth patients?

## POST-VISIT

### Clinical

- How are prescriptions or follow-up tests ordered?
- How is the care plan entered?

### Administrative

- When and how will patient follow-up be conducted?
- How often are patients expected to have an in-person visit and how is that communicated to patients?
- How is feedback collected?

### Managing Coding and Billing

- How is payment collected?
- Who will manage reimbursement paperwork?
- Who will track reimbursement status?
- Who will work with insurance companies to ensure billing is correct?
- Who will follow up on rejected reimbursements?