Telemedicine at LHM

- LHM now offers telephonic (phone only) and telehealth (audio + video) visits to new and established patients
  - **Allscripts "comments" section** shows visit type. Hovering over the comments, you can see the preferred method for sending an invitation

- Huddle with your telehealth preceptor before the start of your session to confirm logistics of inviting preceptor into visit
- Always begin encounter by **CONFIRMING PATIENT'S LOCATION** and obtaining **CONSENT** for the visit. In some cases, we have to cancel if patient outside NY state.
  - Add appropriate form to note to document consent and location (see video)
  - Insert appropriate **dot phrase** (see page 2)
- Document the time spent at end of visit

Telephonic Visits (Audio Only)

- Use **Doximity Dialer** for phone calls. Instructions on page 4
- Pacific Interpreters: 800-264-1552 Access code 844304
- We can only bill for phone visits once every 7 days for the same complaint

Telehealth Visits (Audio + Video)

- Use **Amwell website** (must use Chrome): Northwell.avizia.com
- Doximity Dialer can be used for video visits, but 3-way call with preceptor not possible
- If call can't be completed with video and you switch to phone only, notify PASTeam immediately to change visit type (telephonic=RPA and video=TEB)

Confirmed or Suspected COVID Patients

- Patients with URI or other symptoms suggestive of COVID-19 should NOT be seen in-person at LHM. Known or suspected COVID-19 patients can be seen in the office when symptom-free for 14 days or more. Please see attached algorithm on page 3.
- After the visit, send a "COVID practice tracking" task for that patient to the blue team as needed. "COVID" note templates generate this type of task automatically

Update 5/29/2020

Telehealth Dot Phrases

.telephon

[Fn Ln], an established patient at this office, reached out to this provider for [ ]. No recent visit with the last 7 days. A visit is not scheduled within the next 7 days at this time.

Discussed with patient: You have chosen to receive care through the use of tele-media. Tele-media enables health care providers at different locations to provide safe, effective and convenient care through the use of technology. Please note that this is a billable encounter. As with any health care service, there are risks associated with the use of tele-media, including equipment failure, poor image and/or resolution, and information security issues. You understand that I cannot physically examine you and that you may need to come to the clinic to complete the assessment. Patient agreed verbally to understanding the risks and benefits of tele-media as explained. All questions regarding tele-media encounters were answered.

Total time spent with the patient on the phone was [ ].

.televid

Discussed with patient: You have chosen to receive care through the use of tele-media. Tele-media enables health care providers at different locations to provide safe, effective and convenient care through the use of technology. Please note that this is a billable encounter. As with any health care service, there are risks associated with the use of tele-media, including equipment failure, poor image and/or resolution, and information security issues. You understand that I cannot physically examine you and that you may need to come to the clinic to complete the assessment. Patient agreed verbally to understanding the risks and benefits of tele-media as explained. All questions regarding tele-media encounters were answered.
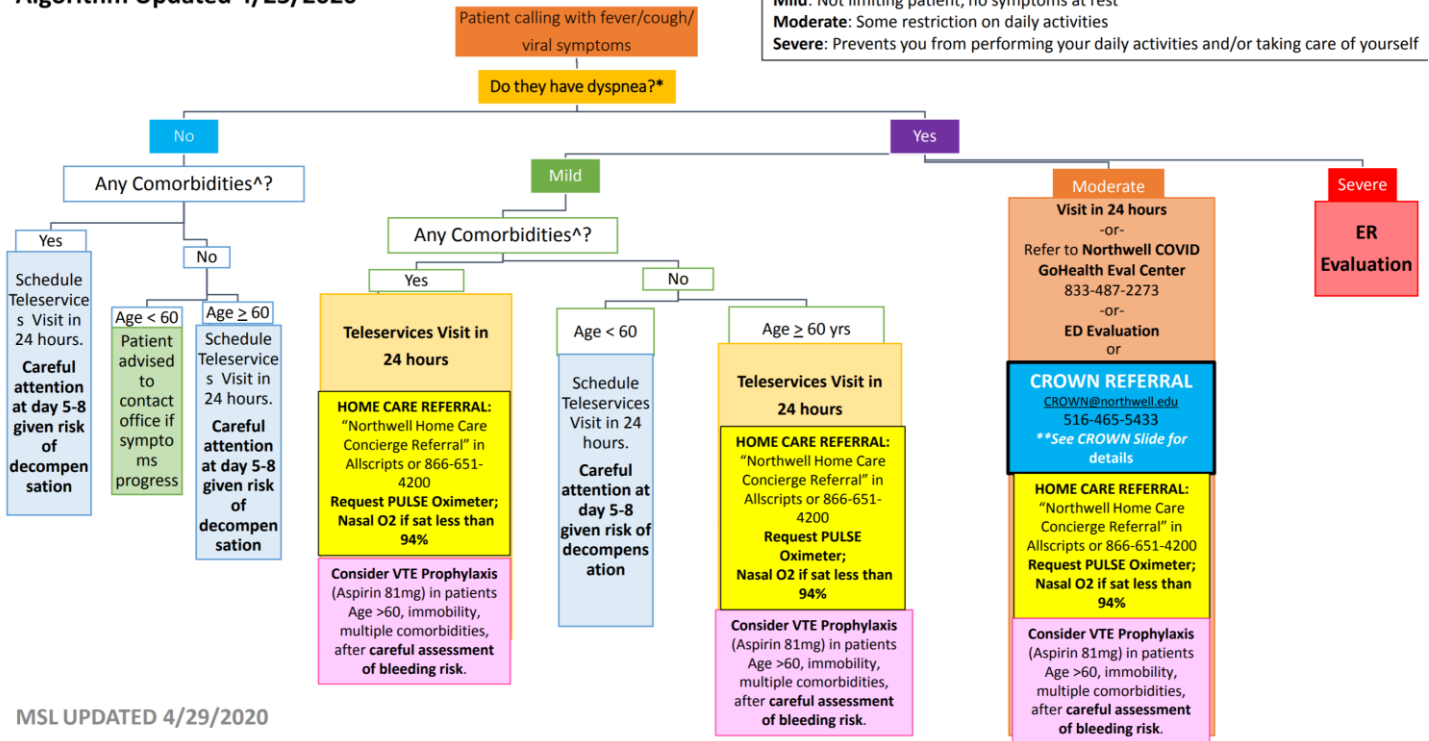
Total time spent: [ ].

COVID 19 Ambulatory Care CLINICAL Evaluation Algorithm Updated 4/23/2020

Dyspnea evaluation: **USE CLINICAL JUDGEMENT**, assess ability to speak, audible wheeze, etc.
Mild: Not limiting patient, no symptoms at rest
Moderate: Some restriction on daily activities
Severe: Prevents you from performing your daily activities and/or taking care of yourself

Patient calling with fever/cough/viral symptoms

Do they have dyspnea?*

No

Any Comorbidities^?

Yes
Schedule Teleservices Visit in 24 hours.

Careful attention at day 5-8 given risk of decompensation

No

Age < 60
Patient advised to contact office if symptoms progress

Age ≥ 60
Schedule Teleservices Visit in 24 hours.

Careful attention at day 5-8 given risk of decompensation

Yes

Mild

Any Comorbidities^?

Yes
Teleservices Visit in 24 hours

HOME CARE REFERRAL: "Northwell Home Care Concierge Referral" in Allscripts or 866-651-4200
Request PULSE Oximeter; Nasal O2 if sat less than 94%

Consider VTE Prophylaxis (Aspirin 81mg) in patients Age >60, immobility, multiple comorbidities, after **careful assessment of bleeding risk.**

No

Age < 60
Schedule Teleservices Visit in 24 hours.

Careful attention at day 5-8 given risk of decompensation

Age ≥ 60 yrs
Teleservices Visit in 24 hours

HOME CARE REFERRAL: "Northwell Home Care Concierge Referral" in Allscripts or 866-651-4200
Request PULSE Oximeter; Nasal O2 if sat less than 94%

Consider VTE Prophylaxis (Aspirin 81mg) in patients Age >60, immobility, multiple comorbidities, after **careful assessment of bleeding risk.**

Moderate
Visit in 24 hours
-or-
Refer to **Northwell COVID GoHealth Eval Center**
833-487-2273
-or-
ED Evaluation
or

CROWN REFERRAL
CROWN@northwell.edu
516-465-5433
***See CROWN Slide for details**

HOME CARE REFERRAL: "Northwell Home Care Concierge Referral" in Allscripts or 866-651-4200
Request PULSE Oximeter; Nasal O2 if sat less than 94%

Consider VTE Prophylaxis (Aspirin 81mg) in patients Age >60, immobility, multiple comorbidities, after **careful assessment of bleeding risk.**

Severe
ER Evaluation
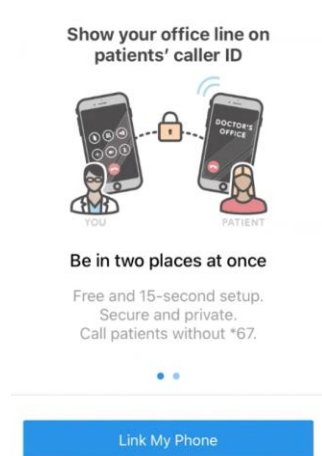
MSL UPDATED 4/29/2020

Doximity Dialer Setup

Sign in to Doximity, tap the **Dialer** icon (📞) at the bottom of thescreen

Tap the blue **Link My Phone** button on the pop-up

You will be prompted to "**Call +1 (415)-xxx-xxx, xxxxxx**", accept and call this number. If you have an office number associated with your profile, you are all done with the setup.

You should see a screen saying **You're In!**. You can start using Dialer. If you do not have an office number, it will ask you for one on the next screen. Enter the number you want to display on your patient's caller ID.

The number at the top of the Dialer screen is the phone number that will be displayed on your patient's caller ID when you use Doximity Dialer.

To place a phone call, dial your patient's phone number on the keypad and tap the green call button.

You will see **"Call +1-xxx-xxx-xxxx"** number. This is a bridge line that will connect you to your call, but hide your number. Don't worry, the number you put into Dialer is the one being   called

Using Doximity Dialer for 3 way or Conference calls

You can use Dialer to make a three-way conference call with a patient using the standard iPhone or Android "Add call" and "merge calls" tools. The caveat with Dialer: only the first call recipient will see your Office number. The second call recipient will see your cell phone number.

To place a 3 way or conference call with Dialer

1) Use Doximity Dialer to call your patient

2) Once connected tap the + "Add call" button from the iPhone interface. Find the 3rd person you'd like to add to the call or dial in their number from the dial pad.
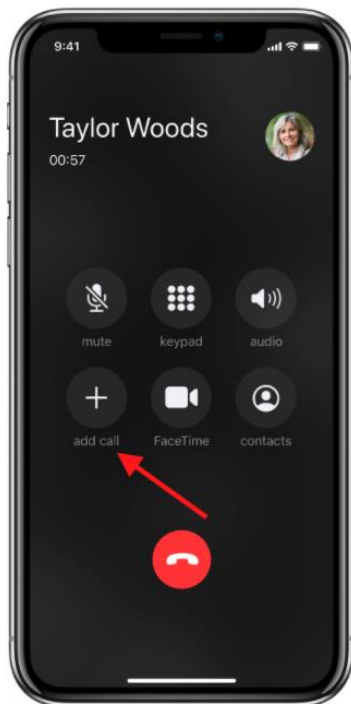
3) Call that person. Once they pick up, you should see the ability to Merge Calls.
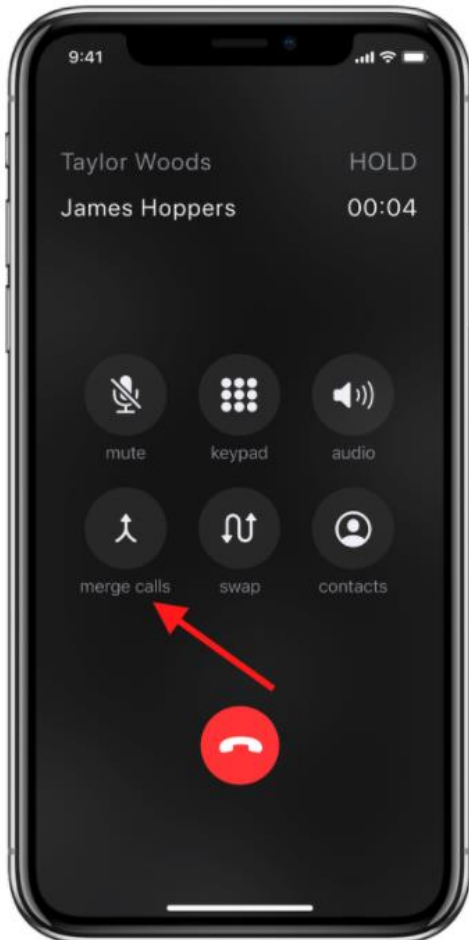
4) Tap Merge Calls

5) Once merged, the patient will be able to hear the 2nd person. You can add up to 4 call recipients for a total of 5 people in the call (including yourself)

Update 5/29/2020

<u>Guidelines for Patients outside of New York State (subject to change):</u>

New Jersey: Telehealth visit can be conducted for **established patients**. If, however, the patient is not a pre-existing patient, the provider can only screen, diagnose or treat patients for COVID-19.

Connecticut: Telehealth visits currently permitted

Florida: Telehealth visits currently permitted

All other states: TBD

<u>COVID-19 Antibody Screening:</u>

- LHM is now able to perform COVID ab testing for our patients upon request, BUT patient must be seen for an office visit or telehealth/telephonic visit beforehand
- ICD-10 Diagnoses for COVID-19 Antibody SCREENING,
    - Z11.59, Screening . . .Asymptomatic Individuals who are being screened for COVID-19 and have no known exposure to virus
    - Z03.818, Encounter for observation for suspected exposure to other biological agents ruled out.
    - Z20.828, Contact with and (suspected) exposure to other viral communicable diseases/ Exposure to someone who tested negative or test results are unknown for COVID-19

Update 5/29/2020