



2.7.13 TELEMEDICINE SERVICES

POLICY:

Title X projects must provide for medical services related to family planning (including consultation by a clinical services provider, examination, prescription and continuing supervision, laboratory examination, contraceptive supplies), in person or via telehealth, and necessary referral to other medical facilities when medically indicated, and provide for the effective usage of contraceptive devices and practices 42 CFR § 59.5(b)(1)

Telemedicine/Telehealth is defined as the use of electronic information and telecommunication technologies to support and promote, at a distance, health care, patient and professional health-related education, health administration, and public health. (HRSA, 2021) Telehealth and telemedicine are often used interchangeably. Telemedicine is usually defined narrowly by insurers to include technologies like live videoconference and remote patient monitoring, while telehealth is often defined more broadly to include basic telecommunication tools, as simple as phone calls, text messages, emails, or more sophisticated online health portals that allow patients to communicate with their providers. (Weigel, et al., 2020).

PROCEDURE:

Service sites must be in compliance with the Title X statute, as well as the program regulations, as applicable. (42 CFR part 59, subpart A).

Services sites will implement telehealth infrastructure designed to improve sexual and reproductive healthcare services, with priority given to persons from low-income families or medically underserved populations in urban, rural, and frontier communities.

Telehealth services are expected to be high-quality, client-centered, and increase access to critical family planning and reproductive services and supports, and increase equity in family planning such that it adheres to the choices of clients with regard to preference for service delivery modality, choice of contraceptive method, does not decrease or make burdensome clinic-based services for clients, and narrows rather than widens the equity gap in family planning services among different segments of the population.

Service sites using telemedicine must develop a local policy to outline responsibilities for all staff involved. [fpntc telehealth visit staffing steps outline 2020-08-21.docx \(live.com\)](#)

Service sites must allow for training and technical assistance of staff and clinicians in an effort to build and/or enhance and/or expand capacity of telehealth services.

The platform used for telemedicine must be HIPAA compliant and every effort be made to protect the confidentiality of the patient. (Pexip with Renovo Scheduling is the program recommended for



FP programs. ND DHHS Information Technology Division will set up account with login and passwords and provide online scheduling training.)

Telemedicine encounters must include:

- Location of Patient
- Who is present
- Location of Provider
- Provider Name
- Statement indicating the service was provided via telemedicine
- Verbal consent of the patient for telemedicine visit.

Clinic forms must reflect telemedicine encounters (charge slip, CVR, billing software, EMR)

Documentation of the visit must address components of all Title X requirements and follow CPT guidelines. The provider should use best clinical judgement while providing care to the patient.

Documentation must address:

- All diagnoses managed during the visit, including ICD-10 codes that support services being billed.
- Rationale for ordering any diagnostic testing.
- Clearly describe management, client education and follow-up plans provided to the patient.
- Documentation of total time spent, including time face to face via telehealth with patient and time spent for coordination of care.
- Follow CPT Coding guidelines to support the E&M level billed.

RESOURCES:

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ND HIT - Barry Stein bastein@nd.gov (Pexip with Renovo Scheduling)

gpTRAC (Great Plains Telehealth Resource & Assist Center www.gptrac.org)

HHS

- [What is telehealth? | HHS.gov](https://www.hhs.gov/telehealth/what-is-telehealth/)
- [Billing and coding Medicare Fee-for-Service claims | Telehealth.HHS.gov](https://www.hhs.gov/telehealth/billing-coding-medicare-fee-for-service-claims/)
- [HIPAA and COVID-19 | HHS.gov](https://www.hhs.gov/telehealth/hipaa-and-covid-19/)
- [Telehealth.HHS.gov: How to get or provide remote health care](https://www.hhs.gov/telehealth/how-to-get-or-provide-remote-health-care/)



NFPRHA

- [Telehealth - National Family Planning & Reproductive Health Association](#)
- [NFPRHA---Telehealth-Resource-List---FEB-20.pdf \(nationalfamilyplanning.org\)](#)
- [Mailing-Prescriptions-to-Patients_05112022.pdf \(nationalfamilyplanning.org\)](#)

RHNTC Telehealth <https://rhntc.org/search?keys=telehealth>

AAP [The Use of Telemedicine to Address Access and Physician Workforce Shortages | Pediatrics | American Academy of Pediatrics \(aap.org\)](#)

ACOG [Implementing Telehealth in Practice | ACOG](#)

AMA [American Medical Association \(ama-assn.org\)](#)

AANP [Telehealth \(aanp.org\)](#)

CMS <https://www.cms.gov/medicare/medicare-general-information/telehealth>

ND Medicaid <https://www.hhs.nd.gov/healthcare/medicaid/provider/manuals-and-guidelines>