Pediatric Telehealth Services Questionnaire

TABLE OF CONTENTS

PART I: PROGRAM DESCRIPTION

INTRODUCTION

Partnership HealthPlan of California (PHC) and UC Davis Health joined forces in 2020 to provide pediatric specialty care access to patients and network providers through telehealth services. Telehealth improves access to quality health services in rural areas, other medically underserved areas, and in areas where access to specialty care is limited. We define telehealth as the mode of delivering health care services using information and communication technologies to enable the diagnosis, consultation, treatment, education, care management and self-management of a patient's care.

Our telehealth program provides access to more than 15 pediatric specialties ranging from allergy and immunology and dermatology to nephrology and urology. The program helps to decrease patient travel time and costs, shortens appointment wait times and can assist providers in meeting timely access standards. Health care organizations interested in participating in our telehealth program must complete the telehealth questionnaire and work directly with PHC's telehealth team and UC Davis Health to implement telehealth services.

Please note: Program implementation is dependent upon a health care organization's readiness, which allows for greater flexibility when incorporating telehealth into existing organizational workflows.

SPECIALIST HISTORY

UC Davis Health harnesses the power of an entire university's nationally-ranked resources and research to tackle the most pressing health care issues facing the world today. The organization has one of the strongest and most robust telehealth programs in the United States and one of the largest pediatric telehealth programs in the country. Since 1992, the academic organization's telehealth program has encompassed a dedicated, multidisciplinary team of physicians, clinicians, nurses, researchers, technology experts and administrators working together to provide high-quality care. Using secure, state-of-the-art telecommunications technology, UC Davis Health connects medical facilities and primary care providers (PCPs) with specialists via real-time, HIPAA-compliant consultations to provide care when patients need it most.

AVAILABLE SPECIALTIES

(Specialties are subject to specialist availability)*

Allergy and Immunology
Cardiology
Dermatology (store and forward)
Endocrinology
ENT/Otolaryngology (cleft and craniofacial)
Gastroenterology
Infectious Disease
Neonatology

Nephrology
Neurology
Neuromuscular Disease Medicine
Orthopedics
Palliative Care
Pulmonary
Rheumatology
Urology

*Recommend starting with one or two high-priority specialties for initial implementation.

PARTICIPATION REQUIREMENTS

- Providers must be contracted with PHC for primary care and in good standing.
- Providers must have access to existing, functioning telehealth hardware and equipment with a video camera. ***Important note***: Laptops and tablets with video cameras are sufficient for certain specialties.
- Providers must have and/or be able to acquire access to a HIPAA-compliant video software application platform.
- Providers must have and/or acquire high-speed internet bandwidth.
- Providers must have designated coordinators or staff in place to facilitate and/or schedule telehealth appointments and visits.
- Providers must have a designated space available to host telehealth visits.
- Providers must share their anticipated PHC patient referral volume with PHC and UC Davis Health.
- Providers must submit a Referral Authorization Form (RAF) for all UC Davis referrals.
- Providers must send a complete referral packet with all the information requested, adhering to requirements as outlined in the corresponding specialty referral guidelines located here: https://health.ucdavis.edu/cht/clinic/telehealth/child-new.html
- Providers are responsible for carrying out the recommended treatment plan and recommended prescriptions. Under this consultative telehealth model, UC Davis Health pediatric specialists provide recommendations only. This also applies to any care provided in a direct-to-patient model. UC Davis Health pediatric specialists provide verbal and written recommendations to the PCP for treatment plan execution.
- Providers must work with the UC Davis Health telehealth team to access documentation and recommendations for each telehealth visit. Providers can also sign up for PhysicianConnect to access and download documentation and recommendations at: https://ucdconnect.ucdmc.ucdavis.edu/index.cfm

PATIENT ELIGIBILITY REQUIREMENTS

Eligible:
- All PHC patients 20 years of age and younger with PHC primary or dual coverage.
- Adolescent and pediatric patients must be accompanied by an adult parent or guardian.

Not Eligible:
- Non-PHC patients, private insurances or other coverages.
- Patients 21 years of age and older.
- Patients covered by California Children Services (CCS).
- Mental and Behavioral Health including neuropsychology.

PART 2: PROGRAM LOGISTICS

BILLING INFORMATION

UC Davis Health bills PHC for the specialty services they provide through telehealth. Health care organizations will not be billed by UC Davis Health unless the health care organization has a separate agreement in place for services. Health care organizations that participate in PHC's telehealth program are also able to bill PHC for originating site fees.

Please note: While Medi-Cal and Medicare patients are eligible to receive telehealth services, health care organizations must bill Medicare first prior to billing PHC for facility site fees. For specific telehealth billing guidelines, please refer to PHC's telehealth policy located on PHC's web portal at www.partnershiphp.org, keyword: telehealth services. Health care organizations can also request a copy of the telehealth policy be sent by contacting telemedicine@partnershiphp.org.

TRAINING AND TECHNICAL ASSISTANCE

Health care organizations participating in PHC's telehealth program with UC Davis Health can receive implementation training and education prior to starting the telehealth program. Health care providers needing additional telehealth program development assistance can contact the California Telehealth Resource Center (CTRC) directly. CTRC is a leading source of expertise and comprehensive knowledge in the development and operation of telehealth programs. They are nationally recognized as one of 14 federally-designated Telehealth Resource Centers around the country. CTRC offers extensive hands-on experience in telehealth program development. They understand the larger health care delivery system and work with policy makers, corporate and industry leaders, and community organizations to develop an environment that supports the optimal use of telehealth. The CTRC offers consulting, telehealth project planning, site assessments, grant opportunities, sample forms and much more. CTRC has developed extensive resources which are located on their website at www.caltrc.org. Contact CTRC directly for more information.

TELEHEALTH COORDINATION SUPPORT

Health care organizations that participate in PHC's telehealth program are eligible to receive telehealth coordination support through PHC's telehealth access grant. The telehealth grant can help offset some of the costs associated with telehealth utilization and implementation.

Please note: The telehealth grant is subject to availability and is not guaranteed. Health care organizations with more than one location providing telehealth are not awarded separately for participation in the program. Total program utilization across the health care organization will be tallied.

Is the health care organization interested in receiving telehealth grant support from PHC?

Yes ☐ No ☐

PART 3: HEALTH CARE ORGANIZATION QUESTIONNAIRE

LOCATION INFORMATION

Health Care Organization Name: _____

Main Address: _____

City: _____ State: _____ County: _____

Does the health care organization have more than one participation location? Yes ☐   No ☐

If yes, please duplicate this page and complete for each participating clinic.

Has the health care organization done any telehealth in the past?   Yes ☐   No ☐

If yes, please explain prior experience:

ORGANIZATIONAL CONTACTS

Role/Title	Name	Phone Number	Email
Primary Contact			
Secondary Contact			
Secure Fax Number			
CEO			
COO			
CMO/Medical Director			
Office Manager or Equivalent			
Coordinator Staff 1			
Coordinator Staff 2*			
IT Staff			

*PHC strongly recommends having primary and secondary coordinator staff to assist with telehealth program coordination.

PARTICIPATION CONFIRMATION

Instructions: Please select Y (yes) or N (no) for each question. If no, please explain.

Provider is contracted with PHC for primary care and in good standing.	☐ Y/ ☐ N
If no, please explain:	
Provider has access to existing, functioning telehealth hardware and equipment with a camera.	☐ Y/ ☐ N
If no, please explain:	
Provider has access to a laptop or tablet with a camera.	☐ Y/ ☐ N
If no, please explain:	
Provider has access to a HIPAA-compliant video software platform.	☐ Y/ ☐ N
If no, please explain:	
Provider has access to high-speed internet connectivity and bandwidth.	☐ Y/ ☐ N
If no, please explain:	
Provider has a designated coordinator or staff to facilitate and schedule telehealth visits.	☐ Y/ ☐ N
If no, please explain:	
Provider has designated space available to host telehealth visits.	☐ Y/ ☐ N
If no, please explain:	
Provider will share their anticipated PHC patient referral volume with PHC and UC Davis Health.	☐ Y/ ☐ N
If no, please explain:	
Provider will utilize PhysicianConnect to access telehealth visit recommendations and documentation.	☐ Y/ ☐ N
If no, please explain:	

EQUIPMENT STATUS

Instructions: Please answer the following questions in detail.

Please describe the type of telehealth hardware and equipment that will be used. Please include the year, make and model of the equipment in the description.
Description:

Please describe the type of connectivity that will be used. (For example: Wi-Fi, CTN backbone, other).
Description:

Please indicate if any auxiliary equipment will be used for telehealth visits.
Description:

Please indicate the number of exam rooms or space that will be available for telehealth visits.
Description:

Please describe the electronic health record (EHR) used.
Description:

Please indicate if remote access to health records is permitted.
Description:

SPECIALTY INTEREST

Instructions: Please indicate the top two to three high-priority specialties needed for implementation based on existing PHC patient referrals. ***Please note:*** Specialties are subject to availability while access to additional specialties can be implemented over time.

# each 1, 2 or 3	Specialty	Estimated # of PHC patients to be referred	Estimated monthly time needed for each specialty clinic *Example: Two 4-hour clinics per month*
	Allergy and Immunology		
	Cardiology		
	Dermatology (store and forward)		
	Endocrinology		
	Gastroenterology		
	Infectious Disease		
	Nephrology		
	Neonatology		
	Neurology		
	Neuromuscular Disease Medicine		
	Orthopedics		
	Otolaryngology (cleft and craniofacial)		
	Palliative Care		
	Pulmonary		
	Rheumatology		
	Urology		

PART 4: ADDITIONAL TELEHEALTH RESOURCES

Resource Organization	Website or Contact Information
California Telehealth Network	caltelehealth.org
California Telehealth Resource Center (Sample Forms and Materials)	caltrc.org
Center for Connected Health Policy	cchpca.org
Medi-Cal and Telehealth Services Department of Health Care Services (DHCS)	dhcs.ca.gov Keyword: telehealth
PHC eConsult Team	eConsult@partnershiphp.org
PHC Telehealth Policy and Billing	See PHC Policy: MCUP3113
PHC Telehealth Services Web Portal	partnershiphp.org Keyword: Telehealth Services
PHC Telehealth Team	telemedicine@partnershipho.org
Telehealth Program Development	Rebecca Picasso, picassor@ochin.org
UC Davis Health Clinical Telehealth Team	telehealth@ucdavis.edu (877) 430-5332; Press 1 for Clinic Coordinator
UC Davis Health Center for Health and Technology	health.ucdavis.edu/cht