



PARTNERSHIP HEALTHPLAN OF CALIFORNIA

Tele-Video Specialty Care Program

PART I: PROGRAM DESCRIPTION	2
INTRODUCTION	2
SPECIALIST HISTORY	2
AVAILABLE SPECIALTIES	2
PARTICIPATION REQUIREMENTS.....	4
PATIENT ELIGIBILITY REQUIREMENTS	4
PART 2: PROGRAM LOGISTICS.....	5
BILLING INFORMATION	5
TELEHEALTH COORDINATION SUPPORT.....	5
PART 3: HEALTH CARE ORGANIZATION QUESTIONNAIRE	6
LOCATION INFORMATION	6
ORGANIZATIONAL CONTACTS	6
PARTICIPATION CONFIRMATION.....	7
SPECIALTY INTEREST	8
PART 4: ADDITIONAL TELEHEALTH RESOURCES.....	9

PART I: PROGRAM DESCRIPTION

INTRODUCTION

Partnership HealthPlan of California (PHC) and partner TeleMed2U (TM2U) have been providing specialty care access to patients and network providers through telehealth services since 2014. The goal of telehealth is to improve access and 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 patients care. Our telehealth program provides access to over 15 specialties ranging from dermatology to urology through a combination of asynchronous and synchronous services and provides care to patients who are 18 and older. Our program helps to decrease patient travel and costs, lowers appointment wait times and can assist providers in meeting timely access standards. Health care organizations interested in participating in our telehealth program will need to complete the telehealth questionnaire to follow and will work directly with PHC's telehealth team and TM2U to implement telehealth services. **Please note:** Program implementation is dependent upon a health care organizations readiness, which allows for greater flexibility when incorporating telehealth into existing organizational workflows.

SPECIALIST HISTORY

TeleMed2U is a transformative telemedicine-based multi-specialty clinical practice with access to over 50 medical and behavioral health specialists across a variety of specialties. The TM2U clinical care model allows for continuity of care for patients in need of chronic disease management as the specialist monitors the patient's specialty diagnosis and keeps the PCP involved by faxing over every clinical note. Through this model of care, patients can remain in their local communities thereby eliminating the need for costly and time-consuming travel to seek specialty medical care. TM2U follows the guidelines and standards of credentialing and verifies the qualifications of their specialists on an ongoing basis. TM2U specialists are California licensed and Medi-Cal approved. Telehealth is a vehicle of health care specialty delivery and does not change the standard of care. Clinic personnel and patients served through TM2U specialists find that their quality of health care delivery is held to the highest levels of satisfaction, which we consistently measure and monitor through patient and provider satisfaction surveys.

AVAILABLE SPECIALTIES*

(Specialties are subject to specialist availability)

- Cardiology***
- Dermatology***
- Pediatric Dermatology***
- Endocrinology
- Gastroenterology/
Hepatology***
- Infectious Diseases
(HIV & Hep B/C)
- Nephrology
- Neurology
- Nutrition
- Pain Management***
- Pulmonology
- Rheumatology
- Tele-psychiatry**
- Transgender Care
- Urology***

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

**Available for mild to moderate conditions only. Services must be billed to Beacon Health Options and not to PHC.

***Only available for eConsult

PARTICIPATION REQUIREMENTS

- Providers must be contracted with PHC for primary care and in good standing.
- Providers must have access to existing functioning telehealth hardware/equipment with camera. **Important note:** *Laptops/tablets with cameras are sufficient for certain specialties.*
- Providers must have and/or acquire high-speed internet bandwidth.
- Providers must have designated coordinators or staff in place to facilitate and/or schedule telemedicine appointments and visits.
- Providers must have a designated space available to host telehealth visits, if a patient is coming into the clinic for their scheduled visit.
- Providers must share their anticipated PHC patient referral volume with PHC and TM2U.

PATIENT ELIGIBILITY REQUIREMENTS

Eligible

- All PHC patients 18 years and older with some exceptions for 17 years and younger for pediatric Psychiatry, Dermatology (asynchronous only) and Nutrition
- PHC primary or dual coverage

Not Eligible

- Non-PHC patients, private insurances or other coverages
- Patients covered by California Children Services (CCS)
- Moderate to severe tele-psych patients. Moderate to severe patients should be referred to the county.
- Psychiatry patients seeking Benzodiazepine or short-acting stimulants.
- Note, TM2U Psychiatrists do not treat patients with eating disorders or patients on Clozapine through telemedicine.

PART 2: PROGRAM LOGISTICS

BILLING INFORMATION

TM2U bills PHC for the specialty services they provide through telehealth. Health care organizations will not be billed by TM2U 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-Medi 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 via email by contacting telemedicine@partnershiphp.org.

TELEHEALTH COORDINATION SUPPORT

PHC's telehealth access grant can help offset some of the start-up costs associated with implementing a successful telehealth program.

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

Is the health care organization interested in receiving telehealth access 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 location? Yes No

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

Has the health care organization provided 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			
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 check Y (yes) or N (no) for each question. If no, please explain.

Provider is contracted with PHC for primary care and in good standing.	<input type="checkbox"/> Y / <input type="checkbox"/> N
If no, please explain:	
Provider has access to existing functioning telehealth hardware/equipment with camera.	<input type="checkbox"/> Y / <input type="checkbox"/> N
If no, please explain:	
Provider has access to a laptop/tablet with a camera.	<input type="checkbox"/> Y / <input type="checkbox"/> N
If no, please explain:	
Provider has access to high-speed internet connectivity and bandwidth.	<input type="checkbox"/> Y / <input type="checkbox"/> N
If no, please explain:	
Provider has a designated coordinator or staff to facilitate and schedule telehealth visits.	<input type="checkbox"/> Y / <input type="checkbox"/> N
If no, please explain:	
Provider has designated space available to host telehealth visits, if a patient is coming into the clinic for their scheduled visit.	<input type="checkbox"/> Y / <input type="checkbox"/> N
If no, please explain:	
Provider will share their anticipated PHC patient referral volume with PHC and TeleMed2U.	<input type="checkbox"/> Y / <input type="checkbox"/> N
If no, please explain:	

SPECIALTY INTEREST

Instructions: Please indicate top 3 high-priority specialties needed, based on your existing PHC patient referrals. Please note, specialties are subject to availability and access to additional specialties can be implemented over time.

# each 1, 2 or 3	Specialty	Estimated # of referrals	Estimated monthly clinic time needed <i>(Ex: Two 4-hour clinics per month)</i>
	Endocrinology		
	Infectious Diseases (Ex: Covid, Hep-B, Hep-C, HIV/AIDs)		
	Nephrology		
	Neurology		
	Nutrition		
	Psychiatry		
	Pulmonology		
	Rheumatology		
	Transgender Care		

PART 4: ADDITIONAL TELEHEALTH RESOURCES

PHC Telehealth Team	telemedicine@partnershiphp.org
PHC Telehealth Services program page	http://www.partnershiphp.org/Providers/Quality/Pages/Telehealth-Services.aspx
PHC Telehealth Policy & Billing	See PHC Policy: MCUP3113
Medi-Cal & Telehealth Services	www.dhcs.ca.gov Keyword: telehealth
Center for Connected Health Policy	https://www.cchpca.org/
TeleMed2U scheduling	scheduling@telemed2u.com P#: 855-446-8628 F#916-527-0770
TeleMed2U Webpage Web Portal	https://www.telemed2u.com/
Interested in being a TeleMed2U Specialist	info@telemed2u.com
TeleMed2U Additional Business Opportunities: TeleMed2U Sales	sales@telemed2u.com
California Telehealth Network	https://ochin.org/california-telehealth-network
California Telehealth Resource Center	https://www.caltrc.org/resources/