INTRODUCTION

The purpose of this procedure is to establish guidelines for use of telehealth services.

BASIS FOR PROCEDURE

It is the policy of the UNMC to comply with all applicable federal, state, and local regulations governing telehealth. These regulations and guidelines include, but may not be limited to:

- Health Insurance Portability and Accountability Act of 1996 (HIPAA) [Specifically, 45 CFR §164.502(e)(1)]
- Nebraska Telehealth Act, 71-8501 through 8508
- UNMC Policy, Privacy, Confidentiality and Information Security
- UNMC Policy, Use and Disclosure of PHI

POLICY

Telehealth services include telemedicine (patient care) and education. These services may occur in four forms:

1. Established UNMC patients at a UNMC location receiving telemedicine services from a provider at another location; or
2. UNMC healthcare provider providing telemedicine services to a patient or physician at another location; or
3. Consultation between healthcare providers; or
4. Educational services from a UNMC location to another location.

UNMC in conjunction with UNMC ITS Video Services strives to ensure that telehealth capability is available for the faculty and staff. All technical and connectivity aspect of telehealth services should be coordinated with UNMC ITS Video Services to ensure a successful delivery of the service. (See Video Services for a technical description of available services.)

This policy does not cover a telephone conversation, electronic mail message or facsimile transmission between a health care provider and a patient. (Reference: UNMC Policy IM.21, Facsimile Transmission, and UNMC Policy IM.18, Electronic Mail with Patients)
DEFINITIONS:

*Telehealth* is the use of electronic information and telecommunication technologies to support long-distance clinical health care, patient and professional health-related education, public health preparedness, public health and health education.

*Telemedicine* is a subset of Telehealth. It means the use of electronic communication and information technologies to provide or support clinical care at a distance. This would include teleconsultations, telemonitoring, teleradiology, etc.

*Grand Rounds* is a series of teaching conferences typically offered in one-hour recurring sessions and designated to credit as one activity. The format does not change and maintains the same time period, meeting day, structure, etc., for the duration of the series.

*Telemedicine consultation* means any contact between a patient and a health care provider relating to the health care diagnosis or treatment of such patient through telemedicine but does not include a telephone conversation, electronic mail message or facsimile transmission between a health care provider and a patient.

*Information* is data presented in readily comprehensible form. (Whether a specific message is informative or not depends in part on the subjective perceptions of the person who receives it) Information may be stored or transmitted via electronic, media on paper or other tangible media, or be known by individuals or groups.

*Information technology resources (system)* include but are not limited to voice, video, data and network facilities and services.

*Privacy* is defined as the right of individuals to keep information about themselves from being disclosed.

*Confidential information* means protected health information and proprietary information.

*Proprietary information* refers to information regarding business practices, including but not limited to, financial statements, contracts, business plans, research data, employee records and students records.

*Protected Health Information (PHI)* is individually identifiable health information. Health information means any information whether oral or recorded in any medium.

*Information security* is defined as the ability to control access and protect information from accidental or intentional disclose to unauthorized persons and from alteration, destruction or loss.

*Workforce* refers to faculty, staff, volunteers, trainees, students, independent contractors and other person whose conduct, in the performance of work for UNMC, is under the direct control of UNMC, whether or not they are paid by UNMC.
Patient Health Information (PHI) is individually identifiable health information. Health information means any information whether oral or recorded in any medium.

Telemedicine Privileges means the authorization granted to physicians or other practitioners to render a diagnosis or otherwise provide clinical treatment to a patient registered at the Nebraska Medical Center via telephone, fax, video or other selected electronic communication technologies.

PROCEDURE

1) Established UNMC patients at a UNMC location receiving telemedicine services from a provider at another location.
   a) Telemedicine Privileges
      i) Physicians or other practitioners who diagnose or treat individuals who are registered as either inpatients or outpatients at UNMC via telemedicine link are subject to the credentialing and privileging process of Nebraska Health System and its medical staff.
      ii) The medical staff shall recommend the clinical services to be provided by telemedicine. The Medical Staff office shall maintain a comprehensive list of services provided via telemedicine link.
      iii) If FDA-approved electronic communication technology is available, it should be used.
   b) Patient Confidentiality during Teleconsults
      i) Prior to an initial telemedicine consultation the healthcare provider will have the patient complete and sign the Telehealth Consultation Form. The completed form will be filed in the legal Medical Record.
      ii) The healthcare provider who is consulting will ensure that only individuals who have a need to know (patient, family, providers) attend the consultative conference. All other individuals will be asked to leave the room.
      iii) The camera will pan the room to show the patient who is in the room prior to the start of the consultation.
      iv) All medical data presented will remain confidential.

2) UNMC healthcare provider providing telemedicine services to a patient or physician at another location
   a) Telemedicine Privileges
      i) Physicians or other practitioners who diagnose or treat individuals via telemedicine link are subject to the credentialing and privileging process of the organization where the patient is receiving care.
      ii) If FDA-approved electronic communication technology is available, it should be used.
   b) Healthcare providers who diagnose or treat individuals must comply with the licensure requirements of the state where the patient is receiving care (See Exhibit)
   c) Patient Confidentiality during Teleconsults
i) Prior to an initial telemedicine consultation the healthcare provider will have the patient sign a Telehealth Authorization form.
ii) The healthcare provider who is consulting will ensure that only individuals who have a need to know (patient, family, providers) attend the consultative conference. All other individuals will be asked to leave the room.
iii) The camera will pan the room to show the patient who is in the room prior to the start of the consultation.
iv) All medical data presented will remain confidential

3) Consultation between healthcare providers.
   a) Healthcare providers who diagnose or treat individuals must comply with the licensure requirements of the state where the patient is receiving care
   b) Documentation to demonstrate medical justification and provide a legal record will be created and maintained.
   c) A signed patient authorization is not required for a consultation between two healthcare providers.

4) Educational services from the UNMC location to another location
   a) Telehealth conferences shall only be attended by people with a need to know the material and content of the program as determined by the person presenting the material. The presenter is responsible for ensuring that the audience is appropriate.
   b) Patient Confidentiality during Grand Rounds (i.e. Teleconferences)
      i) It is important to maximize the educational experience while protecting the confidentiality of patient information.
      ii) The Conference leader will ensure that an individual is assigned the responsibility of taking attendance at the conference and confirming that the conference is attended only by individuals who have a bona fide interest in the material and content of the conference.
      iii) The individual presenting at the conference will announce at the start of each education session that the session is intended only for those persons who have a professional interest in the material being presented.
      iv) Any reference to the identity of the patient shall be retracted from the record utilized during the conference.
      v) All medical data presented (i.e. radiology films, EKG reports etc) will have the patient’s name and medical record number masked.
      vi) A disclaimer about the conference should be stated at the start of each session. “This educational conference is meant only for those persons with a direct interest in the topic (or patient, or material, etc) being discussed at this time
## State Physician Licensure Laws Related to Telemedicine

<table>
<thead>
<tr>
<th>State</th>
<th>Statute</th>
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<tbody>
<tr>
<td>Nebraska</td>
<td>Neb Rev. Stat. 71-1,103</td>
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<tr>
<td></td>
<td>Practice of medicine in NE not unauthorized if:</td>
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<td>1) Physician is incidentally called into Nebraska for consultation with a physician or surgeon licensed in NE;</td>
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<td>2) MDs who reside in and are licensed in a state bordering NE but who do not open an office, or maintain or appoint a place to meet patients or receive calls within NE</td>
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<tr>
<td>Colorado</td>
<td>CO Rev. Stat. 12-36-106</td>
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<td>Practice of medicine definition includes telemedicine, which means the delivery of medical services and any diagnosis, consultation, treatment, transfer of medical data, or education related to health care services using interactive audio, interactive video, or interactive data communication.</td>
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<td>Physicians lawfully practicing medicine in another state may provide occasional consultation or cases in Colorado without being licensed in Colorado as long as it is not pursuant to any contract or agreement</td>
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<tr>
<td>Iowa</td>
<td>Iowa Code Annotated 148.2</td>
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<td>Physicians licensed in another state, when incidentally called into Iowa in consultation with a physician licensed in Iowa are not deemed to be engaged in the practice of medicine in Iowa</td>
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<tr>
<td>Kansas</td>
<td>Kansas Statutes Annotated 100-26-1 (1996)</td>
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<td>Physicians, regardless of their location, who perform acts constituting the “practice of medicine” in Kansas must be licensed. Exceptions exist for out-of-state physicians called into the state on consultations, or physicians in bordering states, unless they open an office, appoint a place to meet patients, or receive calls in the state.</td>
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<tr>
<td>Minnesota</td>
<td>MN Stat. 147.032</td>
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<td>Interstate Practice of Telemedicine. Telemedicine means the practice of medicine when the physician is not in the physical presence of the patient. A physician not licensed to practice medicine in Minnesota may provide medical services to a patient located in Minnesota through interstate telemedicine if the physician meets several requirements listed in the statute, including annual registration with the board on a form</td>
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<tr>
<td>State</td>
<td>Statute</td>
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<tr>
<td>Missouri</td>
<td>334.010 RSMo.</td>
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<td>A physician located outside of Missouri shall not be required to obtain</td>
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<td>a license when in consultation with a physician licensed to practice</td>
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<td>medicine in this state; and the physician licensed in Missouri retains</td>
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<td>ultimate authority and responsibility for the diagnosis and treatment of</td>
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<td>the patient located within Missouri.</td>
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<tr>
<td>South Dakota</td>
<td>S.D. Codified Laws 36-4-41 &amp; 36-2-9</td>
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<tr>
<td></td>
<td>Any nonresident physician who, while located outside South Dakota,</td>
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<td>provides diagnostic or treatment services through electronic means to a</td>
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<td>patient located in South Dakota under a contract with a licensed health</td>
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<td>care provider, a clinic in South Dakota, a HMO, a PPO, or a health care</td>
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<td>facility is engaged in the practice of medicine in South Dakota.</td>
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<td>Consulting practitioners from other states are exempt.</td>
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Note: the citations above are excerpts from state laws. Please consult legal counsel if you have questions about what constitutes the practice of medicine in another state.
Consent to Participate in a Telehealth Consultation  
University of Nebraska Medical Center  
Final – 7/24/03

Patient Name: _____________________ Medical Record No.: ________________

1. I understand that my health care provider, ______________________________ wishes me to engage in a telemedicine consultation with __________________. This means that I and my health care provider or a designee will, through an interactive video connection, be able to consult with the above named practitioner about my condition.

2. My health care provider has explained to me how the video conferencing technology will be used.

3. I understand that this consultation will not be the same as a face-to-face visit since I will not be in the same room as the consulting physician, and that some parts of a physical exam may be conducted by individuals present with me at the direction of the consulting physician. I also understand individuals may be present at either location to operate the audio/video equipment and that these individuals must maintain the confidentiality of health information disclosed.

4. I understand there are possible risks of an incomplete or ineffective consultation because of the technology, and that if any of the risks occur, the consultation may terminate. The risks may include:
   a. Failure, interruption or disconnection of the audio/video connection;
   b. A picture that is not clear enough to meet the needs of the consultation;
   c. A minor risk of access to the consultation through the interactive connection by electronic tampering

5. I understand that in place of this telemedicine session I may seek face-to-face consultation with a health care provider.

6. I understand that I will not receive any royalties or other compensation for taking part in this telemedicine session or for the authorized use of any consultation images or audio.

7. I release University Medical Associates, its employees, agents and assigns from any and all liability which may arise from this telemedicine consultation, the use of interactive audio/visual connections, or from the taking or authorized use of any images or audio obtained.

8. I have read and understand this consent and all of my questions have been answered to my satisfaction. I understand the risks, benefits, and alternatives of the telemedicine consultation and consent to it.

_____________________________  _________ ____________________
Patient/Representative Signature   Date

_____________________________  _________ ____________________
Relationship to Patient      Witness Signature