



MidAtlantic AIDS Education and Training Center Best Practices and Tips for Clinicians Providing Care for Patients with HIV via Telehealth



The Health Resources and Services Administration (HRSA) defines telehealth as the use of electronic information and telecommunications technologies to support and promote long-distance clinical health care.

General Considerations:

- For healthy patients with a new HIV diagnosis, the first meeting with case manager, nurse and provider may occur using telehealth in order to see the patient and begin HIV treatment as soon as possible.
- For newly diagnosed ill patients, an in-person visit should be considered.
- Consideration should be given regarding the patient location to participate in a telehealth visit for confidentiality and privacy reasons.
- Telehealth can:
 - * Facilitate patient's access to their health care team
 - * Decrease patient missed appointment and no-show rates
 - * Facilitate employed patients who cannot take time off work
 - * Helps to maintain social distancing recommendations for COVID-19
 - * Useful in clinical situations when a physical exam is not warranted
 - * Useful for psychosocial support, mental health counseling
 - * Useful for medication adherence coaching

Before the visit:

- Confirm the appointment a week before the call.
- Obtain patient consent to participate in a telehealth visit as per your institution's policies and procedures.
- Provide specific written instructions for the patient to connect with the visit.
- Assure data security: at login, during session, etc.
- Pre-test audio and video connections before the visit.
- Internet bandwidth may be slower in rural areas.
- Obtain back-up phone number in case connection is lost.
- Make sure insurance is up to date and clearance for payment for telehealth.

During the visit:

- Display clinician credentials with professional background
- Have a quiet and safe setting for the call; avoid distractions
- Inform patient that sensitive, personal information may be discussed
- Verify psychological safety: no one else present & private space
- Inquire if the patient has vital signs available
- Verify access to emergency services if needed
- Review and discuss medication adherence
- Review current health and life issues that may impact quality of life
- Ask about any health/sexual risk behaviors
- Review of systems, conduct limited physical exam if needed
- Review lab results or other clinical reports if available
- Discuss follow-up visit or referral to specialist or support services.
- Discuss need for follow-up with other medical providers, tests or counselors
- Reconfirm address and contact information and schedule next appointment
- Schedule follow-up labs and vaccines if needed

After the visit:

- Document in the EMR or chart:
 - * medical encounter as telemedicine service and reason (COVID-19 pandemic) for billing purposes
 - * Both patient and provider locations
 - * Duration of the virtual call
 - * Other staff involved in the visit (nurses, case managers etc.)
- Update case managers/social workers on any changes with job status, insurance coverage, Ryan White Program updates

Starting Telemedicine Visit Sample Script

- *“Good morning _____, this is _____ and we’ll be doing our visit via telehealth today.”*
- *“Can you confirm your full legal name, date of birth, and medical ID number?”*
- *“Are you able to see and hear me?”*
- *“Are you in a private place so that we can discuss your visit today?”*
- *“Is there another phone number to call you if we are disconnected?”*
- *“Before we start our visit, were you able to get any vital signs today such as your blood pressure, temperature or your heart rate? Do you have a recent weight?”*
- *“Are there any issues about your health that you want to make sure we discuss today?”*
- *“Do you have any other concerns that may make it difficult to maintain your health and follow your treatment plan?”*
- *“Are you in need of community resources for you and your family, loved ones?”*

Ending Telemedicine visit Sample Script:

“It’s been great seeing you today---do you have any questions about our visit?” “Let’s try to see each other again in _____ days/weeks/months. If we can’t meet in person, we will meet by telehealth again. Please contact our office if you have any changes in your health or contact information.”

HIPAA:

- Patient privacy continues to be extremely important even during the COVID-19 pandemic.
- Due to current social distancing recommendations, the federal Office of Civil Rights has relaxed some standards temporarily to help healthcare providers use video/audio services to provide medical care to their patients.
- It is a best practice to assure HIPAA compliance of technology used in telehealth and maintain confidentiality and privacy.
- If patient privacy cannot be assured at the time of the visit, it may be best to reschedule the visit.
- Telehealth policies vary by state, no two states are alike in how telehealth is defined, reimbursed or regulated. Please refer to your institutional policies and legal departments as well as state health department for state regulations.

References:

Northwest Regional Telehealth Resource Center <https://www.nrtrc.org/covid-19-detail-117>
Clinical Education Initiative <https://ceitraining.org>
Health and Human Services (HHS) Telehealth Services <https://telehealth.hhs.gov/>
Health Resources and Services Administration (HRSA), Telehealth Programs <https://www.hrsa.gov/rural-health/telehealth>
Centers for Disease Control and Prevention: Telehealth Preventions to Improve Chronic Disease <https://www.cdc.gov/dhdsp/pubs/telehealth.htm>

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