

# Patient, Family and Caregiver Telehealth Guide

## Introduction

Telehealth has been around for many years, but more people are using it since the COVID-19 pandemic. Telehealth is a great option for people with transportation issues, difficulty taking time off from work, challenges with arranging caregiver coverage and more. This guide provides basic information about telehealth and other virtual options for you and your loved ones. You will also find information on what to expect and how to make the most of your telehealth visit. Options besides telehealth for providing virtual health care are also included in this guide.



## Telehealth Basics

Telehealth has been around for many years, and more people are using it since the COVID-19 pandemic. Telehealth visits are the same as going to the clinic to see a provider only you use a device with a camera to see them and use the phone or mic on your device to talk with them. Telehealth is great for any of the following.

- Office visits
- Annual wellness visit
- Advance care planning
- Transitional care management – These are visits after a hospital discharge.
- Diabetes self-management training
- Medical nutrition therapy – These are trainings for self-management support for people with diabetes or chronic kidney disease.
- Counseling
- Psychological or neuropsychological test administration
- Health behavior assessment or reassessment
- Therapeutic exercise
- Gait training therapy
- Behavior identification assessment and plan of care development
- Wheelchair management training

## Twenty Things to Know about Telehealth

Telehealth or telemedicine can both be used to describe health care services that are not in person and that use technology for visits with your provider or care team. Other terms are digital medicine, virtual visits, video visits, e-health or m-health (for “mobile”). Patients, family members and caregivers have identified that these are important things to know about telehealth.

1. **A telehealth visit can save you time** because you don't have to go to the clinic or wait in the waiting room.
2. When you call to make an appointment, **ask if you can schedule for a telehealth visit.**
3. **Telehealth visits usually cost the same** as an in-person visit with the same copays and deductibles. The difference could depend on your insurance. Don't hesitate to ask what you will have to pay out of pocket and when it is due.
4. **Ask in advance how to pay your copay** in case you can pay on the day of your visit rather than waiting for a bill.
5. **If you have Medicare, your provider is required to get your consent** before starting a telehealth visit.
6. When you schedule a telehealth visit, if you are unsure what you need to do for the telehealth visit **ask if someone from the clinic can help get you set up for your visit.** Some clinics will even do a test with you before your visit.
7. If your provider allows it, **you might be able to have other people** like a family member or care giver **join your virtual visit.**
8. **You will need** a device with **audio**, such as a speaker and mic and **video**, such as a webcam or a camera that is part of your computer, smartphone or tablet **for a telehealth visit.**
9. **You will need an internet connection, data plan, email or something else to connect for your telehealth visit.**
10. **Make sure you have a quiet, private place** to have your telehealth visit.
11. If you are not in a private area and are in place where others might be able to listen in, **protect your privacy and use a headset or earbuds.**
12. **Do not multitask during your telehealth visit.** Treat it just like an in-person visit.
13. **Make sure your provider has a back-up plan**, like calling you on your phone, if the telehealth visit doesn't work.
14. **Have your list of questions written down** so you don't forget what to ask. It's easy to get distracted when you're trying to figure out how to do your telehealth visit.
15. **Get all your medications** and have them with you for your telehealth visit.
16. When your visit starts, **if you can't tell who a person on the health care team is at any time, ask them who they are.** They should have identification badges or a sign behind them saying who they are. They often forget so you might have to remind them to tell you who they are.
17. **Ask how long your visit is** if you are unsure. You can do this when you schedule or once you connect for your telehealth visit.
18. Once your video is connected, take a look at where you are in the frame. **Can the provider see your entire face?** If you can't tell, ask your provider or care team if they can see you okay.
19. During the visit, **if ANYTHING is not working for you for any reason, let the provider or care team know** – if it's because the video is glitchy, you can't hear them, you don't feel comfortable or any other reason.
20. At the end of the visit, **ask your provider or care team for a copy of your treatment plan or summary**, including when they want to see you next.

## My Telehealth Checklist

Before you know it, you won't even need this checklist! The more telehealth visits you have, the easier it is to take use this option for visits with your providers.

### *Before the telehealth visit*

- I have a device with a camera, speaker and microphone. *A device might be a computer, tablet, laptop or a smartphone.*
- I have a quiet and private place with good lighting for my telehealth visit.
- I have internet (or other connection such as my phone data plan) for a telehealth visit. *Being able to stream movies means my internet should be good enough for telehealth.*
- My provider's office has confirmed that a telehealth visit is OK for my visit reason or concern; I don't need an in-person visit.
- I've asked my provider's office to do a test connection with me to make sure everything works okay. *Not always needed but can be helpful.*
- My provider's office knows if I need translation or other support during my telehealth visit, including having a family member or caregiver join the telehealth visit.
- I've submitted any forms or information – either paper or online – that my provider's office needs me to fill out or provide.
- I have my list of questions ready.
- I have all my medication bottles nearby for when they ask me what I'm taking.
- I have closed all extra windows, tabs and applications on my device and asked everyone else in my house not to use the internet during my telehealth visit.
- My device is either plugged in or fully charged.
- I know how I will receive the link to join my telehealth visit, and I know how to find it. *The link may be sent by email, text, or online portal or some other way.*
- They gave me instructions on how to start or join the telehealth visit.

### *During the telehealth visit:*

While I won't be able to check this list during the visit, these are things to think about.

- I have my questions, concerns and issues organized and listed by importance (if possible). (If it's an option, I have sent my list to my provider BEFORE the meeting.)
- I've made sure neither I nor others in my household are using the internet for streaming (for example - YouTube, Netflix or other movies, gaming)
- My face is centered in the screen. The camera is aimed at me, not at the ceiling or just showing my forehead or chin. My device is placed in a stable position – not wobbling about.
- The provider or care team has clarified how much time we have.
- I can see and hear the provider and the care team members. If not, I need to let them know.
- They gave me back-up plan in case we have technical problems. *I have a phone number to call.*

- I know what the treatment plan is and have asked the provider to send me a copy of the treatment plan for future reference.
- If tests or referrals to specialists are ordered, I know why I am getting them and where I need to go.
- My provider told me when I need schedule my next or follow-up visit.
- I have a number to call with any follow-up questions.
- I have a number to call if I have problems after hours.
- My provider’s office has told me what my copay or fees are for the telehealth visit and how to pay.

### **Additional Options for Virtual Care**

Below is more information on your range of options in addition to telehealth. **DO NOT HESITATE** to ask your provider if they or their office offers these services. Your provider may not know and may ask you to speak to someone else such as the clinical or office manager. Consider checking off the options available to you and/or your loved ones once you know whether your provider offers these services. Medicare pays for all of these services, and you may still have to pay copays and deductibles. If you do not have Medicare, you may need to check with your providers office or insurance plan to know what they will cover.



#### **Telephone Office Visits**

Only during the public health emergency, there is an audio-only or phone option for having an office visit with your provider.

#### **Virtual Check-Ins**

These are short patient-initiated phone calls to talk to a provider about a health concern or issue. This is a great option if you are unsure whether you need to bring yourself or your loved one into the office for a visit, to urgent care or to the emergency department.

#### **Remote Evaluation of Images**

This service is also patient-initiated and involves sending an image to your provider to evaluate – once you know that they provide this service. This could be helpful for skin problems or wound management – examples include rashes, incisions after a surgery, foot ulcers, cuts and bruises. If your provider offers this service, you will need to know how to send those images

#### **Chronic Care Management**

If you or your loved one have two or more chronic conditions expected to last six months or more, you are probably eligible for chronic care management services, which are usually provided over the phone. A care manager or care coordinator spends at least 20 minutes per month helping you and your loved one coordinate care and manage health conditions.

### □ **Principal Care Management**

This service is a bit newer, and some providers and clinics don't know about it yet. It's basically the same as chronic care management but for individuals with a single high-risk condition.

### □ **Behavioral Health Integration**

These services are just like the chronic care management services – monthly support – for individuals with mental health issues or substance use disorder.

### □ **Remote Physiologic Monitoring**

This virtual care service has been shown to prevent emergency department visits and hospital admissions. It involves electronically submitting data like oxygen level, weight, blood pressure or glucose level to your provider. This is a great option for people with lung issues who need their oxygen levels monitored, people with heart failure who need to monitor their weight every day and people with diabetes who need close monitoring of their blood glucose levels.

### □ **E-Visits**

Because this option requires an online patient portal, fewer people use this option, but it can be helpful if your provider will communicate with you through secure messaging. Provider offices are often not familiar with this option or haven't quite figured out how the process could work for them and their patients. Medicare defines e-visits like this "E-visits allow you to talk to your doctor using an online patient portal without going to the doctor's office." It doesn't hurt to ask, though, as this can be another tool in your toolbox to care for both yourself and your loved ones.

## **Conclusion**

Remember – you are the consumer or customer. It is your right to ask about your options to receive health care services in ways that work for you and your loved ones.

