



Telemedicine Study and Recommendations

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Programs at Office of Rural Health



Placement and HPSA Services

Recruit providers and designates health professional shortage areas



NC Rural Health Centers

Supports state designated rural health centers that serve the entire community



NC Community Health Grants

Supports the primary care safety net system with increasing access to health care for vulnerable populations



NC Farmworker Health Program

Supports medical, dental and educational services for members of the North Carolina agricultural labor force and their families



Provides technical assistance to improve the use of Electronic Health Record (EHR) Systems and the use of health information

exchange



NC Rural Hospital Program

Funds operational improvement projects for the benefit of all critical access hospitals and eligible small rural hospitals



NC Medication Assistance Program

Provides free and low-cost medications donated by pharmaceutical manufacturers to patients who cannot afford them



NC Statewide Telepsychiatry Program

Supports psychiatric evaluation of patients through videoconferencing technology in emergency departments



NC Integrated Health Systems

Supports community health initiatives and demonstration projects that benefit vulnerable populations

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DHHS firmly believes that telemedicine can improve the health of our population if we respond effectively to two opportunities:

- 1) 1115 Medicaid Waiver
- 2) Broadband Infrastructure

To Effectively Respond to these Opportunities:

(1) Adopt a Uniform Definition of the Term Telemedicine

Adopt the Health Resources & Services Administration (HRSA)'s definition of telehealth and telemedicine.

(2) Describe the scope of services that can be covered by telemedicine

- Support the development of telemedicine programs that:
 - Increase access to care
 - Uphold the standard of care
 - Improve patient satisfaction
 - Reduce costs
 - Engage practitioners to provide care at the top of their licenses.

(3) Determine acceptable communication and data transfer speeds necessary to ensure the privacy of health information and appropriate for insurance reimbursement

- North Carolina Office of Broadband Infrastructure 2017 Broadband Report recommendations should be enacted as quickly as possible
- Eligible providers and institutions should participate in NC HealthConnex
- Covered entities and business associates must follow all federal and state regulations to secure protected health information

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(4) Informed Consent Standards

Adopt the American Telemedicine Association's standards for informed consent

(5) Online Prescribing Standards

- Telemedicine practitioners must abide by all federal regulations for E-Prescribing
 - Ryan Haight Online Pharmacy Consumer Protection Act
 - Controlled Substances Act

(6) Telemedicine provider licensing standards

- Provider licensing standards regarding telemedicine should promote and support a patient-centered model
 of care, enhancing access to quality care and continuity of care. Further study is needed to outline specific
 care guidelines with input from provider/consumer stakeholders and regulating entities.
- Consistent with the language in the 1115 Waiver submitted by DHHS, a standardized and centralized credentialing process should be developed and adopted for all providers, to include those who practice telemedicine, to ensure parity across care delivery models."
- Further study is needed to consider the impact of participation in the Interstate Medical Licensure Compact as formulated by the Federation of State Medical Boards.

(7) Private payer telemedicine reimbursement standards

Further study and stakeholder input are needed

(8) Psychology Interjurisdictional Compact (PSYPACT)

 DHHS supports the position of the North Carolina Psychological Association, that North Carolina should create legislation to participate in PSYPACT