

## Guidelines for Telehealth Training as Outlined in SB 6061

This document outlines the guidelines for alternative telemedicine trainings in Washington State to meet the requirements of Senate Bill 6061. As of Jan 1, 2021 all certified, licensed, or registered health care professionals in Washington State, excluding physicians, are required to complete telehealth training prior to offering telemedicine services. The bill stipulates health care professionals can complete the telemedicine training developed by the Washington State Telehealth Collaborative or complete an alternative training which covers similar material.

### What is considered an alternative training?

“Alternative trainings” means training that includes components that are substantively similar to the telemedicine training developed by the telemedicine collaborative under subsection (2) of this section. "Alternative telemedicine training" may include, but is not limited to (i) Training offered by hospitals and other health care facilities to employees of the facility; (ii) Continuing education courses; and (iii) Trainings developed by a health care professional board or commission. ([S.B. 6061 §4.a \(2020\)](#))

### What needs to be included in an alternative telehealth training?

#### Telehealth Background

- Definition of Originating Site and Distance Site
- How is telemedicine defined in your organization? If relevant, what is the defined scope of practice for your profession/organization?

#### Telehealth Policy & Regulations

- Generally, providers can only see patients located in states where the provider is licensed or certified. However, during the Covid-19 public health emergency, many state policies have changed temporarily. How does your organization handle out of state patients?
- Are there any additional credentialing or privileging protocols for patients located in another institution?
- Telemedicine visits are reimbursed at an equal rate to in person visits. Are there any relevant reimbursement limitations or documentation requirements that apply to your organization, payors, or patient population?
- Ryan Haight Act 2008

#### Telemedicine Readiness

- If applicable, telemedicine standards of care for healthcare profession
- Protocols of what type of visit is appropriate for telemedicine/guidelines on when to refer the patient to in person
- Process on how patient will receive the proper telemedicine appointment
- General overview/guide of the telemedicine software and its uses
- Guide on approved hardware to use for the telemedicine consult
- If applicable, guide for how to download or install necessary telemedicine software
- Protocols for obtaining patient consent for telemedicine

## **Telehealth** Collaborative

- Guidance on technology used for telemedicine (hardware and software) as well as IT support services. Encourage providers to practice using their telemedicine set up before first visit.
- Your organization's Emergency Outage plan or who to contact in case of an outage
- Patient information security and HIPAA protocols
- How to connect interpreter services to telemedicine platform and where patients can find telemedicine resources translated from English
- Billing and documentation protocols

### During the Visit

*(if your telemedicine program include synchronous video visits between providers and patients)*

- Guidelines for proper Webside manner
  - Same standards as in-person care
  - Professionally dressed
  - Ensure lighting, camera location/angle, and background are set up
- How to start a telemedicine visit
  - Have badge or professional identification within camera shot
  - Ask patient for phone number or alternative communication channel in case of disconnection
  - Obtain consent if first telemedicine visit
  - Confirm patient is alone or is comfortable beginning the visit
  - Confirm patient location