

Health-Care Providers Guide to Virtual Care

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HEALTH-CARE PROVIDERS GUIDE TO PROVIDING VIRTUAL CARE

Zoom for Healthcare is a secure, Government of PEI-approved virtual care video conferencing platform that connects health care providers to their patients remotely. It is intended to help health care providers meet the needs of their patients when they cannot meet in person.

The government purchased Zoom for Healthcare licences are available to:

- Community-based physicians and nurse practitioners
- Mental health and addictions
- Long-term care and home care
- Primary care programs (i.e. Diabetes and COPD programs)

Virtual care will not replace the need for all in-person meetings.

The Department of Health and Wellness will introduce a long-term virtual care framework and strategy at a later date. Aside from previous approved pilots already in use (i.e. Maple and Telemerge) health-care providers will be required to use this Zoom for Healthcare solution. If other solutions are in use, they should be replaced, including the standard Zoom application. Zoom for Healthcare offers important enhanced security features for delivering health care.

Zoom for healthcare is a secure, web-based or app based virtual care video conferencing platform that connects patients to their health care provider (HCP), via their mobile device, tablet or personal computer, in their home, or personal location of their choice. The Government of PEI has purchased licences for eligible health-care providers.

Health-care providers are responsible to understand how to appropriately provide care virtually.

Quick Points:

- Not all care can be appropriately provided virtually. Become familiar with which type of care is most appropriate, understanding that care may depend on previous (non-virtual) relationship and an understanding of their medical problems. Be sure to coach your support staff on the type of care that can be booked virtually.
- You must still work within clinical practice guidelines and College regulations.
- Spend time upfront helping to educate your patients for this new care experience.
- Patients, or their guardian, must verbally consent to receiving care virtually; they have the option to decline.
- Just as you consider your bedside manner in person, pay attention to your “web-side” manner.
- The patients’ privacy must continue to be protected. Do not disclose private information in the appointment request, your location should be secure and private.
- When communicating appointment information with your patients, you may wish to use a generic clinic email address to avoid sharing your active email with patients.
- Only certain fee codes can be used for virtual care.

Choosing Patients for Virtual Care

The scope of virtual practice is presently limited to encounters that require only history, gross inspection and/or data that patients can gather with cameras and common devices (e.g., glucometers, home blood pressure machines, thermometers and scales).

You must continue to work within clinical practice guidelines and the [College of Physician and Surgeons of PEI Telemedicine Policy](#) and [CRNPEI: Telehealth Nursing Practice](#) with specific attention to current location of your patient.

If your support staff will be deciding how to book patients be sure to coach them on the type of care that can be booked virtually.

You can typically safely use virtual care to:

- assess and treat most mental health issues, many skin problems, and many urinary, sinus and minor skin infections
- provide sexual health care
- provide travel medicine (not covered under provincially provided medical plans)
- assess and treat conditions monitored with home devices and/or lab tests
- review lab, imaging and specialist reports
- conduct any other assessments that do not require in-office physical exam

Health issues currently **not amenable** to virtual care:

- medical emergencies: including chest pain, new difficulty breathing, major trauma, gastrointestinal bleeding
- conditions requiring specific equipment or physical exam: ear pain, moderate to severe abdominal pain, many musculoskeletal injuries, unexplained congestive heart failure
- Most initial presentations of neurological symptoms or loss of neurological function
- Any red flag symptoms that would require a comprehensive physical exam.

Resource: [Scope of Practice: What Problems can be Safely Assessed and Treated](#)

Source: *Canadian Medical Association*

Privacy/Confidentiality

The Health PEI recommendation for telemedicine is express written consent from patients. Given these exceptional circumstances, the Health PEI Privacy Officer is waiving this recommendation for written consent at this time. This is waived for the duration of the pandemic response. When the circumstance changes, health-care providers will be notified. This is in compliance with the *Health Information Act*, which requires express written consent only for disclosure of personal health information to non-custodians or for a non-health care related purpose.

While the recommendation for written consent is waived you must still obtain informed verbal consent for virtual care for every visit and that consent must be explicit and documented in the medical record.

You must also:

- Ensure virtual visits are conducted from a secure/private location.
- Ensure no identifying patient information is contained in the meeting request/email invitation.
- Ensure no recording programs/devices are used without the patient's written consent. Note, the recording feature has been disabled for licences issued via Health PEI.
- As if in-person, if you share information on your screen, first double-check that you are showing the correct patient's chart and ensure that no other patient's information is visible prior to initiating the screen sharing. If another patient's information was

inadvertently shared via Zoom, it would be a breach just as it would be in the paper or electronic face-to-face world.

Email your privacy questions to healthprivacy@ihis.org.

Security

Zoom for Telehealth was selected as it provided increased security assurances for a health-care solution.

- If the video conference is initiated in Canada, a security review of Zoom for Healthcare identifies it will be hosted within Canada.
- In compliance with our privacy laws, none of your account data is stored outside Canada.
- Health-care providers are asked to not use the free version, Zoom Basic. Request a Zoom for Healthcare account from Health PEI.
- Zoom is committed to protecting the security and privacy of their customers' data.
- Recent security concerns raised in media about Zoom are mostly linked to the free version of this service (Zoom Basic).
- Features that are automatically enabled on your Zoom for Healthcare licence includes mandatory passwords for each appointment, encryption, enabling a virtual waiting room to avoid unauthorized visits and disabling the ability to record a patient encounter.
- ITSS is continuously evaluating the software configurations and best practises to ensure secure Virtual Health Visits.

Health-care providers are reminded it is their responsibility to make every effort to protect the privacy of patient information. If you have any concerns, please email VirtualCare@ihis.org

Setting up your location*:

If not providing virtual care from your standard office, ensure you:

- Place your workstation in a location that protects the patient exchange from being seen, overheard or interrupted by others.
- Use a professional/neutral backdrop and good lighting and be mindful of your attire.
- Position your web camera on the computer monitor directly above the patient video image, so you're looking directly at them. Consider a separate web camera.
- Attempt to eliminate all distractions (e.g., notifications) from your computer and surroundings.
- Engage with the patient at all times using eye contact and body language to assure them they have your full attention.
- Collect/create relevant patient education texts and weblinks to share with the patient after the encounter, to replace material you would usually share with them in person

*Source: [CMA's Virtual Care Playbook](#)

Starting the Visit / Patient Identity

Ensure patients are provided the [Patient Information Guide](#) when setting up the appointment.

At the beginning of each appointment:

- Authenticate the patient's identity (verify health insurance number)

- Receive and document verbal consent for video conference use. They may opt to not use the technology at any point during the appointment.
- Confirm the patient is in the province where you hold your license.
- Ask if they are in an appropriate and private location and alone.

Note: Your support staff may support you in these tasks, if they have appropriate permissions. However, consent, must be documented.

Billing and Documentation

Virtual care is eligible for billing when using approved Health PEI technologies (telephone, secure videoconferencing, and secure email/text). The eligible fee codes are as follows:

- Limited Office Visit – fee code xx13 (including at a walk-in clinic)
- Health Promotion Counseling – fee code 2505
- Psychotherapy – fee code 2501 or 2504
- Diagnostic and Therapeutic Interview – fee code 2588, 2586, 2886
- Consultation – fee code xx60
- Repeat consultation – fee code xx62
- Geriatric follow up visit – fee code 2863
- Postnatal visit – fee code 0705
- **FOR SPECIALIST USE ONLY:** Comprehensive Office Visit – fee code xx10 for patients who have been initially referred for consultation and a subsequent visit relates to the same diagnosis
- Family Physician Consultation – fee code 0160

With the signing of the 2019-2024 Master Agreement, the following codes are also eligible to be billed for services delivered via virtual care:

- Multi-Issue Office Visit – fee code 0122
- Complex Chronic Disease Management – fee code 0126
- New Patient Intake Visit – fee code 0011
- Addictions Care Consultation – fee code 0051
- Addictions Initial Assessment – fee code 0052

Billing Instructions:

- These services are only billable for medically necessary services that can be safely and competently delivered via virtual care.
- Physicians must continue to document as per the requirements as listed in the Master Agreement.
- Service must be direct patient care by a physician to a patient, in lieu of a face-to-face visit.
- Service can be initiated by either the physician or the patient.
- Physical examination not required when completed by virtual care for fee code xx13.
- Postnatal visit will not require pelvic exam when completed by virtual care. Pelvic exam can be delayed until non-pandemic times.
- For time-based codes (2501, 2504, 2505, 2586, 2588, 2886, 0052) please make sure the time of day is on the claim. Also, these codes are a minimum of 15 minutes.
- Patient chart must document that it was a telemedicine (telephone, secure email/text, and secure videoconferencing) in lieu of physical visit for COVID-19.

- Physicians must continue to document in patient chart as per Tariff of Fees Preamble requirements.
- For patients in self-isolation, the billing claim must include “COVID-19 self-isolation”.
- **For all other patient care delivered via virtual care, the billing claim must include a comment “COVID-19 virtual care”**

Additional Resources

Physician Resources for Delivering Virtual Care:

[CMPA: Principles of Assistance: Practicing Telemedicine](#)

[CPSPEI: Telemedicine Policy](#)

[CMA: How to Set Up Virtual Care in Your Practice](#)

[CMA: Virtual Care](#)