The MedBridge Telehealth Implementation Guide

A step-by-step guide to successfully operationalize the MedBridge Telehealth Virtual Visits platform at your organization.
What Are Telehealth Virtual Visits?

MedBridge Telehealth Virtual Visits provide a HIPAA-compliant, efficient, and safe way for providers to expand remote healthcare access to patients. Organizations and providers can use Telehealth to virtually triage patients, efficiently manage patient care, and extend post-discharge care through live, synchronous video visits.

This Implementation Guide will walk you through the process of preparing, initiating, and supporting the adoption of MedBridge Telehealth Virtual Visits across your organization in 5 easy steps.

**STEPS TO IMPLEMENTATION**

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Telehealth: Implementation Visualization

1. Organization Setup
   - Sign Documents
   - MedBridge Creates Demo Clinic

2. Technical Testing & Setup
   - Conduct Technical Testing & Setup
   - Complete Testing with Demo Clinic

3. Adoption
   - Step 1: Preparation & Planning
   - Define Provider Best Practice
   - Develop Provider Training Plan
   - Establish Support Plan
   - Step 2: Initiation & Enablement
   - Inform Providers about Telehealth
   - Deliver Training and Resources
   - Practice & Iterate

4. Launch
   - Inform Patients about Telehealth
   - Share Providers & Locations that Need Telehealth Access
   - MedBridge Enables Telehealth

5. Support, Maintenance & Feedback
   - Monitor Provider Adherence
   - Celebrate Wins
   - Collect Feedback
Appendix B: Provider FAQs

Your providers will likely have questions for you as you roll out Telehealth Virtual Visits at your organization. Many questions can be answered by directing your providers to MedBridge’s Provider FAQ guide. We’ve also included answers to some common questions below.

Common questions your providers may have:

Q: Why are we rolling out this new technology?
   
   A: Your response might be, “To continue to provide exceptional care to our patients through this crisis.” Or “To more effectively triage patients before they come in for a visit.”

Q: How will I reimburse Telehealth Virtual Visits?
   
   A: For up-to-date information on reimbursement, please visit the MedBridge blog article: What We Know So Far About E-Visit Reimbursement for Therapy Providers Billing Medicare.

Q: How will we document services?
   
   A: Follow the updated guidance on documenting and billing Telehealth services available from APTA, AOTA, and ASHA. Please also review your payor’s policies and coverage regarding telehealth services for more information.

Q: What will my patients do if they get disconnected?
   
   A: If a visit gets disconnected by the provider or patient, they can rejoin the call by returning to the Patient Portal.
   
   A: As an organization, determine who would be best to contact if a patient has trouble connecting. Make sure to circulate this information with your staff so they can inform their patients.

Q: How do we schedule appointments?
   
   A: Determine what works best for your organization. We recommend using whatever system you use for scheduling in-person appointments also be used for Telehealth Virtual Visits.

Q: What platforms can we and our patients use (desktop, laptop, browsers)?
   
   A: MedBridge recommends conducting Telehealth Virtual Visits from a desktop or laptop computer using Windows or Mac OS. We also recommend that you use the newest version of Google Chrome or Mozilla Firefox. Patients can also connect with their provider using the MedBridge Go app on their mobile device.

Q: What training resources do we have (both provider and patient)?
   
   A: Many training resources can be found at MedBridge’s Training and Resources page.
Appendix F: Creating an Ideal Space for a Virtual Visit

Place your device’s camera at eye level, with your subject centered and filling the frame. Use books or boxes to raise up your device so you are not looking down at the camera.

Make sure you have ample lighting so providers are easy to see during the Virtual Visit.

- Avoid overhead lighting. This can cast unflattering shadows and make the provider hard to see. Instead, rely on lamps and window light if possible.
- Make sure light sources are in front of the provider, not behind them.
- If you’re using window light, make sure there will be adequate lighting regardless of weather or time of day.

Set up in a quiet space. You want to avoid any areas where there will be foot traffic, open windows, or fans running.

- Even quiet noises like an air conditioner can be picked up by a microphone, so please avoid these if possible.
- Make sure you are close enough to your device that the microphone will pick up your voice and your patient will hear you.

Be mindful of what your space looks like. Make sure that anything visible in the Virtual Visit is appropriate for the patient to see and that there won’t be any unexpected interruptions (such as someone entering the room).

Do: Set your camera up with a neutral background and good lighting. Use what you have to raise your device up to eye level.

Do: Position yourself in front of a neutral background with a light source in front of you and make sure you are centered in the frame.

Don’t: Position yourself in front of a bright light source or position your device below eye level.