



COVID-19 GUIDANCE ON GETTING STARTED WITH TELEHEALTH

Under the Coronavirus (COVID-19): National Health Plan, MBS items are available from 13 March 2020 to deliver services via telehealth. They are bulk billed video and phone consultations with fees the same as for in-person consultations. More detail [here](#). They are for certain vulnerable or isolated patients for consultations provided by GPs, specialists, consultant physicians, consultant psychiatrists, nurse practitioners and allied mental health workers. Plus some health services performed by GPs and other doctors working in general practice who are in isolation for COVID-19 to enable them to continue to treat their patients. See ACRRM [press release](#).

KEY CONSIDERATIONS FOR REMOTE CONSULTATIONS

TECHNOLOGY

- The technology that you use ensures the privacy and confidentiality of patient information and no information is retained by the technology provider. Your practice should always conduct remote consultations using a specific practice account to avoid patient identity being exposed to any other organisation, members or subscribers to a commercial service.
- Appropriate technology is often recommended by, and/or available from your Primary Health Network (PHN) or health organisation.

EASY TO USE RESOURCES

- Ensure you have easy-to-use instructions for patients who will be accessing remote consultations, including how to join the consultation and how to prepare.
- Have step-by-step instructions, and a checklist of requirements, for providers who are providing the remote consultations
- Examples and templates are available on the [ACRRM eHealth website](#) and [video channel](#).

MANAGING APPOINTMENTS, RECORD KEEPING AND BILLING

- As far as possible use your existing systems, with minor changes to identify remote consultations. Keep an accurate contemporaneous record of your consultation in your medical software.

To find out more, visit us online at acrrm.org.au or call 1800 223 226



RISK AND CHANGE MANAGEMENT

- Ensure you assess the clinical appropriateness of remote consultations for each patient based on their condition(s), nature of the appointment, and their personal circumstances.
- Make sure you assess the likelihood and magnitude of foreseeable clinical, management or technical problems and that you have options in place. Such as changing the appointment to the phone, rescheduling, or using an interim paper process.
- Ensure that you have a plan in place for assisting a seriously ill patient.
- Check that health professionals providing remote consultations are covered by insurance and professional indemnity.
- Consult with and provide appropriate training for your staff.
- Contact experienced telehealth providers or a telehealth mentor identified in the [ACRRM provider directory](#)

The following resources provide additional information to help you set-up telehealth services in your practice:

[ACRRM eHealth website](#)

[Australasian Telehealth Society Resources](#)

[ACRRM National Telehealth Provider Directory](#) – look for providers or register your service

[ACRRM Online Education Module – Introduction to telehealth](#)

[ACRRM Telehealth standards framework](#) and [Telehealth Guidelines for Primary Care](#)

[ACRRM Webinar recording – incorporating telehealth into rural general practice](#)

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