



# Improving Access to Quality Medical Care Webinar Series

*Presented by*

The UArizona Health Sciences Genetic Counseling Graduate Program, the Southwest Telehealth Resource Center, & Arizona Telemedicine Program

# Welcome

- SWTRC region - AZ, UT, CO, NM & NV
- Fellow HRSA Grantees
- All other participants from the US & abroad



**The University of Arizona Health Sciences Genetic Counseling Graduate Program, the Arizona Telemedicine Program, and Southwest Telehealth Resource Center welcome you to this free webinar series!**

The series will discuss the the use of telegenetics to improve access to genetics services for patients & providers.

**Telemedicine can help you achieve these goals!**

# Webinar Tips & Notes

- When you joined the webinar your phone &/or computer microphone was muted
- Time is reserved at the end for Q&A
- Please use the **Chat function** to ask questions
- Please fill out the post-webinar survey
- Webinar is being recorded
- Recordings will be posted on the ATP website
  - <http://telemedicine.arizona.edu/webinars/previous>







# Defining and Discussing Telegenetics

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*Clinical Coordinator*  
*University of Arizona Genetic*  
*Counseling Graduate Program*  
*Coordinator, MotherToBabyAZ*

# Conflict of Interest- None to report

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*"Try this—I just bought a hundred shares."*

# My Background

- Genetic counselor
  - MS in Human Genetics
  - Certified
  - Licensed (CA, CT, IL, MN, NE, NJ, PA)
- Specialist in exposure information during pregnancy and breastfeeding
- Program Coordinator, MotherToBaby AZ
  - Counsel via phone, email and chat
  - Tele-education
- Clinical Coordinator, UAHS Genetic Counseling Graduate Program



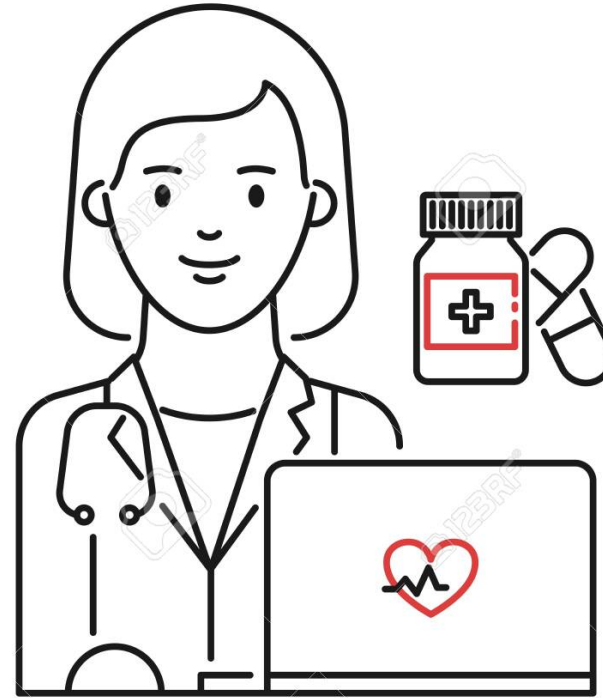
# Learning Objectives

- Describe telegenetics and the role of genetic counselors in telegenetics
- Discuss the growth of the Telegenetics field and current trajectories
- Review standardized guidelines for telegenetic counseling



# Terms

- Telehealth
- Telemedicine
- Telegenetics



# Telehealth

**Telehealth** is a broader scope of remote healthcare services. It can refer to remote non-clinical services (trainings, administrative meeting, medical education).

VS

# Telemedicine

**“Telemedicine** is a subset of telehealth that refers solely to the provision of health care services and education over a distance, through the use of telecommunications technology. “

*Smith, 2015*

# Arizona Revised Statutes (A.R.S.)

- “Telemedicine is defined as the interactive use of audio, video, or other electronic media for the purpose of diagnosis, consultation, or treatment. The definition **excludes** the sole use of an audio-only telephone, video-only system, a facsimile machine, instant messages, or electronic mail(A.R.S. §§ 20-841.09; 20-1057.13; 20-1376.05; 20-1406.05).”

# The Center for Connected Health Arizona (2019)

- “Telehealth includes such technologies as telephones, facsimile machines, electronic mail systems, and remote member monitoring devices, which are used to collect and transmit member data for monitoring and interpretation. **While they do not meet the Medicaid definition of telemedicine they are often considered under the broad umbrella of telehealth services. Even though such technologies are not considered telemedicine, they may nevertheless be covered and reimbursed as part of a Medicaid coverable service.**”

# Telemedicine is Growing in the US

- “76% of U.S. hospitals connect with patients and consulting practitioners using video and other technology” (American Hospital Association, 2019)
- According to a 2018 JAMA study, annual telemedicine visits have increased at an average annual compound growth rate of 52% from 2005 to 2014 – (Barnett, et al. 2018)





# Key Components of Successful Telemedicine Programs

- Controlling costs
- Ability to use the technology for a variety of services
- Ease of use
- High comfort and convenience levels
- Quality of transmission

# Telegenetics



- Using telemedicine technology to provide clinical genetic services
  - Can be genetic counselor or medical geneticist
- “Comprehensive genetics services to patients when travel, distance, and shortage of genetics professionals interfere with access” and “uses interactive video and a secure high-speed connection” – (National Society of Genetic Counselors, 2019)



- More genetic services are needed
  - Not enough genetic professionals to meet demand
    - Especially problematic in underserved areas (not just rural)
  - Other providers may not have ability to obtain training to perform such services
- Increased patient access
  - Reduces travel time/costs

# Medical Geneticists

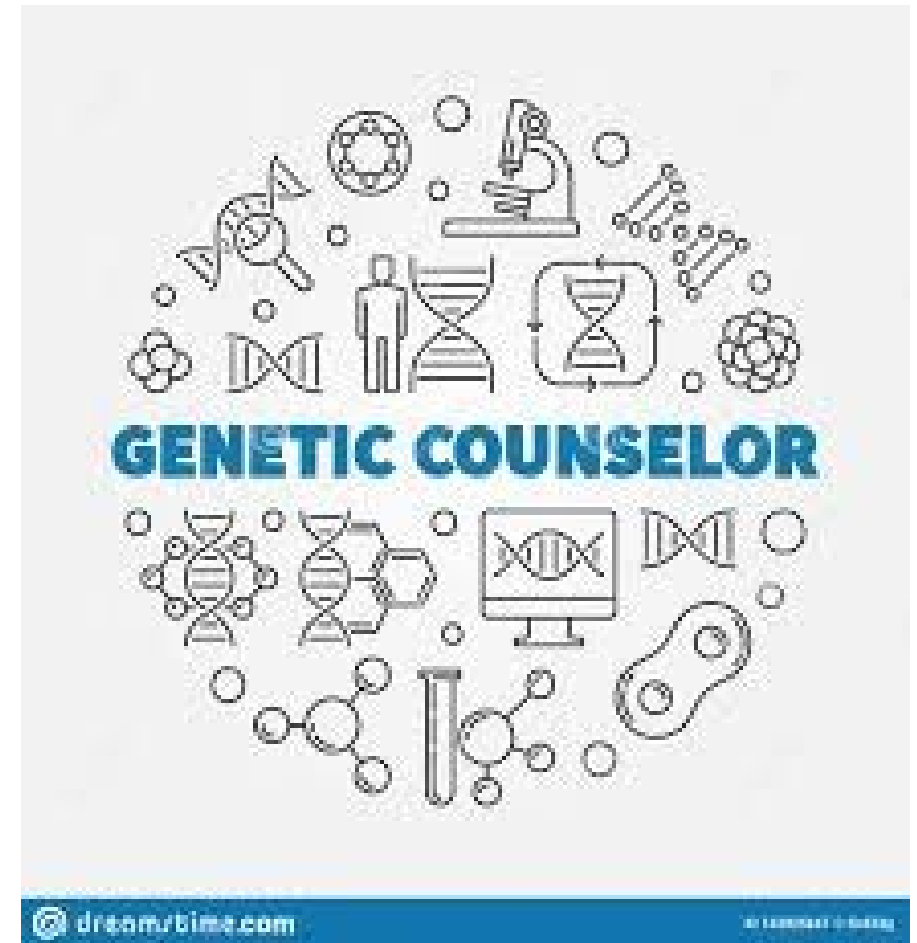
- Disease-specific:
  - Evaluations
  - Management
  - Monitoring
- Exams
  - Dysmorphology



Robert Marion, M.D

# Genetic Counselors (GCs)

- “Professionals who have specialized education in genetics and counseling to provide personalized help patients may need as they make decisions about their genetic health.” (NSGC, 2019)
- Common methods for GC service delivery
  - In-person
  - Telephone
  - Video





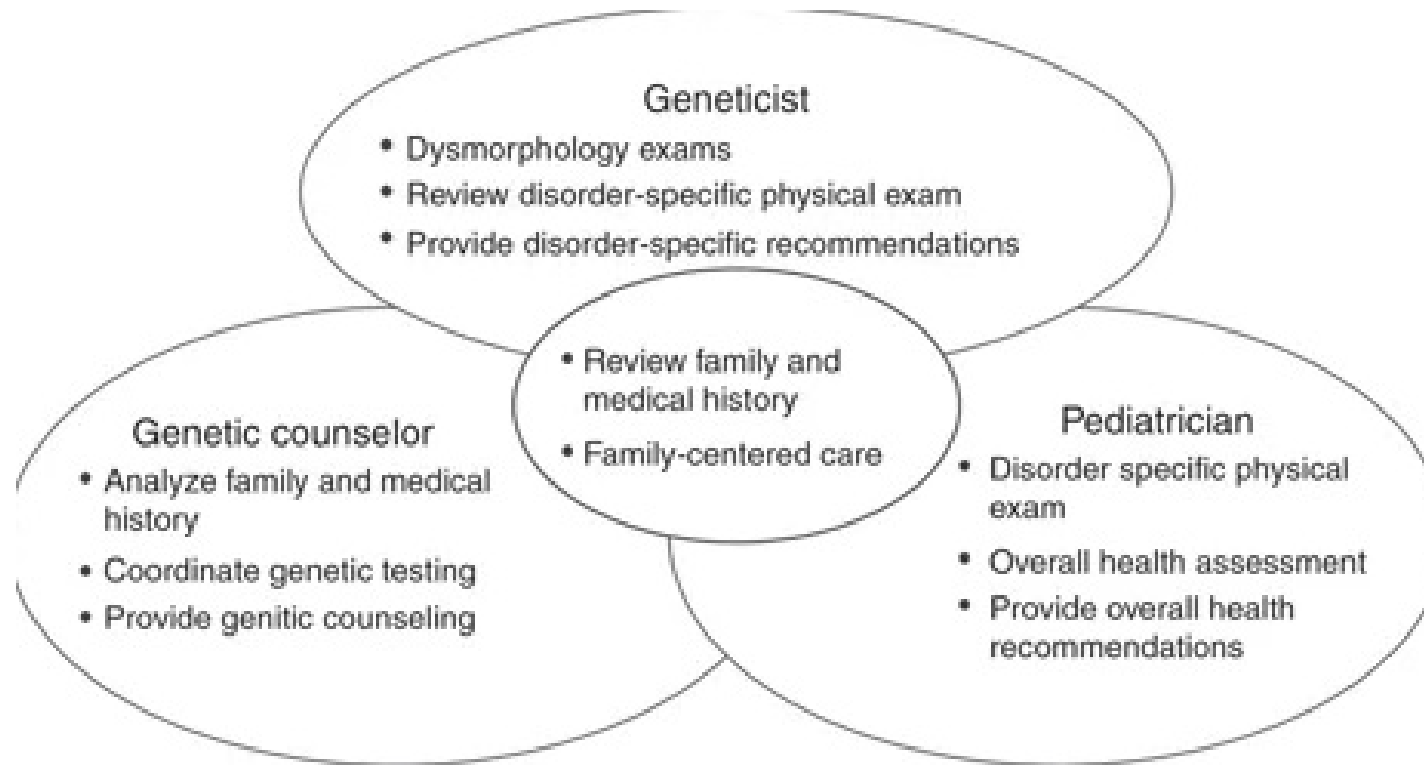
# Role of the Genetic Counselor

- Document family history
- Provide risk assessment for disease or other health-related issues
- Discuss benefits and limitations of screening/testing
- Explain test results
- Facilitate autonomous decision making by the patient
- Provide psychosocial support and counseling
- Offer resources

# Role of Genetic Counselor

- Can counsel in many different specialties
  - Adult
  - Cancer
  - Cardiac
  - DTC/Industry/Lifestyle
  - IVF/ART
  - Pediatrics
  - Pharmacogenetics
  - Prenatal
  - Teratology

# Example: Pediatrics



*Kubendran, S, et al. 2017*



# Licensure/Credentialing

# Licensure/Credentialing

- In general, the originating site (where the patient is) is considered the site where the service is being provided.
  - Licensure is needed for the state in which the patient is located.
- If the originating site is in a health care facility that requires privileging of the telemedicine provider, the telemedicine provider must have such authorizations as well.



# Licensure/Credentialing

- All states require that any physician who provides medical care for a patient holds a valid license in the state in which the patient is located.
- Genetic counselors are required to be licensed (if applicable) in the state in which the patient is located at the time of consultation.

### States Issuing Licenses:

California	General Information	Application	Rules & Regulations	Licensure Law
Connecticut	General Information	Application	Rules & Regulations	Licensure Law
Delaware	General Information	Application	Rules & Regulations	Licensure Law
Idaho	General Information	Application	Rules & Regulations	Licensure Law
Illinois	General Information	Application	Rules & Regulations	Licensure Law
Indiana	General Information	Application	Rules & Regulations	Licensure Law
Iowa	General Information	Application	Rules & Regulations	Licensure Law
Kentucky	General Information	Application	Rules & Regulations	Licensure Law
Louisiana	General Information	Application	Rules & Regulations	Licensure Law
Massachusetts	General Information	Application	Rules & Regulations	Licensure Law
Minnesota	General Information	Application	Rules & Regulations	Licensure Law
Nebraska	General Information	Application	Rules & Regulations	Licensure Law
New Hampshire	General Information	Application	Rules & Regulations	Licensure Law
New Jersey	General Information	Application	Rules & Regulations	Licensure Law
New Mexico	General Information	Application	Rules & Regulations	Licensure Law
North Dakota	General Information	Application	Rules & Regulations	Licensure Law
Ohio	General Information	Application	Rules & Regulations	Licensure Law
Oklahoma	General Information	Application	Rules & Regulations	Licensure Law
Pennsylvania	General Information	Application	Rules & Regulations	Licensure Law
South Dakota	General Information	Application	Rules & Regulations	Licensure Law
Tennessee	General Information	Application	Rules & Regulations	Licensure Law
Utah	General Information	Application	Rules & Regulations	Licensure Law
Virginia	General Information	Application	Rules & Regulations	Licensure Law
Washington	General Information	Application	Rules & Regulations	Licensure Law

### States with Bills Passed/In Rulemaking:

Alabama	Licensure Law
Arkansas	Licensure Law
Georgia	Licensure Law
Hawaii	Licensure Law
Michigan	Licensure Law

# GC Licensure

State	Genetic Counseling License
AZ	No
CO	No
NM	Yes
NV	No
UT	Yes



# Billing and Reimbursement

# Insurance Coverage - Telehealth

- **Does Medicare or Medicaid pay for telehealth services?**
  - *Medicare* – Yes, in certain circumstances.
  - *Medicaid* – Every state Medicaid plan covers at least some telehealth services; however, states vary greatly in their coverage.
- **Do private insurance plans usually cover telehealth services?**
  - Thirty-two states and the District of Columbia have parity laws that require private insurers to cover telehealth the same as in-person services. Most insurance providers cover at least some telehealth services.



# Telemedicine Reimbursement AZ

- “Current law requires a Corporation, HCSO, disability insurance, and group and blanket disability insurance providers to cover health care services delivered through telemedicine if those services would be covered in an in-person consultation.
- Services provided through telemedicine must comply with Arizona licensure requirements, accreditation standards, and any practice guidelines of relevant national medical provider associations. Telemedicine may be limited to providers within the insurer's network”

(A.R.S. §§ 20-841.09; 20-1057.13; 20-1376.05; 20-1406.05).

# Services Covered- AZ

Arizona requires private payers to cover the following health services when they are delivered via live telemedicine to patients in rural areas (defined as cities and towns less than 900,000 people):

- Trauma
- Burn
- Cardiology
- Infectious disease
- Mental health disorders
- Neurologic diseases including strokes
- Dermatology
- Pulmonology
- Pain medicine (starting 2019)
- Substance abuse (starting 2019)
- Urology (starting 2020)

# Arizona Medicaid (AHCCCS) will reimburse for medically necessary services provided via live video, including:

- Cardiology
- Dermatology
- Endocrinology
- Hematology
- Home Health
- Infectious diseases
- Neurology
- Obstetrics/Gynecology
- Oncology
- Ophthalmology
- Orthopedics
- Pain clinic
- Pathology
- Pediatrics and pediatric sub-specialties
- Radiology
- Rheumatology
- Surgery follow-up and consults
- Behavioral health services, including:
  - Diagnostic consultation and evaluation
  - Psychotropic medication adjustment and monitoring
  - Individual and family counseling
  - Case management
  - Inpatient consultation
- Medical Nutrition Therapy
- Surgery follow-up consultations
- Pain management
- Pharmacy management

# List of the eligible providers under Arizona Medicaid

- Physician
- Registered nurse practitioner
- Physician assistant
- Certified nurse midwife
- Clinical psychologist
- Licensed clinical social worker
- Licensed marriage and family therapist
- Licensed professional counselor
- Providers also must be licensed in Arizona and currently enrolled in the Arizona Medicaid program

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**What's missing?**



# Telegenetics Coverage

- Health insurance often pays for in-person genetic counseling and genetic testing when it is recommended by a genetic counselor or doctor. (Coverage should be verified).
- Genetic counseling is a covered benefit under Medicare.
- The Centers for Medicare and Medicaid Services (CMS) does not currently recognize certified genetic counselors as healthcare providers.
  - Genetic counselors cannot independently bill for and be reimbursed for counseling Medicare beneficiaries



# Federal Advocacy

## Frequently Asked Questions: CMS Recognition of Genetic Counselors

Soon, Representative Erik Paulsen (R-MN) should be introducing legislation that would allow CMS (Centers for Medicare and Medicaid Services) to recognize genetic counselors as providers. This recognition will improve access to genetic counselors for Medicare beneficiaries and allow reimbursement by CMS for the service.

The following are some frequently asked questions we have received from NSGC members:


### *Why is this taking so long?*

Rather than introduce a bill and then work to build support, NSGC has worked closely with the House Ways and Means Committee to develop a bill with committee input. Because of the preparation done on the front end, both Democrats and Republicans should support the legislation broadly. This process certainly has taken time but should pay off once the legislation is introduced.

With Committee buy-in, the bill has a greater possibility to move through the legislative process. The House Legislative Counsel, which drafts official bill language, is currently adding the last Committee recommendations to the bill. The bill will move to introduction shortly after we receive it back from Legislative Counsel.

## Summary: H.R.7083 — 115th Congress (2017-2018)

[All Information](#) (Except Text)

 Listen to this page



There is one summary for H.R.7083. [Bill summaries](#) are authored by [CRS](#).

### Shown Here:

Introduced in House (10/23/2018)



Access to Genetic Counselor Services Act of 2018

This bill provides for coverage under Medicare of certain genetic counseling services.

CONGRESS.GOV



**Summary: H.R.7083 — 115th Congress**

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**Shown Here:**  
**Introduced in House (10/23/2018)**  
**Access to Genetic Counselor Services Act of 2018**  
  
This bill provides for coverage under Medicare of certain

[All Information](#) (Except Text)



# H.R. 3235

- In June of 2019, the same representatives re-introduced the amendment as [H.R. 3235, the “Access to Genetic Counselor Services Act of 2019.”](#)
- Would allow genetic counselors to receive 85 percent of what physicians receive for providing genetic counseling services
- Includes updated CPT codes for billing purposes

# H.R. 3235

- In June of 2019, the amendment as [H. Services Act of 20](#)
- Would allow gene physicians receive
- Includes updated



e-introduced the [Genetic Counselor](#)

35 percent of what  
counseling services  
costs

# Potential Funding Sources

- Maternal Child Health Bureau <http://mchb.hrsa.gov>
- Office for the Advancement of Telehealth [www.hrsa.gov/telehealth](http://www.hrsa.gov/telehealth)
- Office of Rural Health <http://ruralhealth.hrsa.gov>
- Medicaid/Medicare [www.cms.hhs.gov](http://www.cms.hhs.gov) o Federal Communications Commission <http://www.fcc.gov/cgb/rural/rhcp.html>
- Department of Agriculture's Distance Learning and Telemedicine Program <http://www.usda.gov/rus/telecom/index.htm>

Not only fee-for-service: explore membership models, contractual services



# Regulations and Guidelines

# Telehealth/Telemedicine Practice Guidelines

Practice guidelines --General: Abbott JM, Klein B, Ciechowski L. Best practices in online therapy. J. Technol. Human Serv. 26: 361-375, 2008 pdf American Medical Association. Ethical practice in telemedicine; Section 1.2.12. AMA Code of Medical Ethics. AMA, updated June 2016 htm American Hospital Association. Telehealth: Delivering the right care, at the right place, at the right time: case examples of AHA members in action. AHA, July 2017pdf American Telemedicine Association. Expert consensus recommendations for videoconferencing-based telepresenting. ATA, 2011 pdf American Telemedicine Association. Core operational guidelines for telehealth services involving provider-patient interactions. ATA, 2014 pdf Antall P, Storer C. Telehealth for health systems: Guide to best practices. American Well, February 2014 htm Association of State and Territorial Health Officials. Telehealth Resource Guide. ASTHO, 2017 pdf Burke L, Weill B. Telemedicine. 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# Telegenetics Guidelines

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- Shah NN, Fleisher LD, Andersson HH, et al. Impediments and solutions to telegenetics practice: Meeting report. American College of Medical Genetics and Genomics, 2011



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*Schaefer, et. al 2010*



# Shah, et al. 2011

- Licensing
- Credentialing
- Financing and Reimbursement
- Technology and Delivery of Telegenetics
- Future Directions\*
- Conclusions and Recommendations

## 1. National Standards

The American College of Medical Genetics & Genomics should continue to work collaboratively with other professional organizations such as the American Telemedicine Association, the Center for Telehealth and eHealth Law (CteL), the American Medical Informatics Association (AMIA), and the Health Information Management Systems Society (HIMSS) to harmonize approaches to facilitating the use of telemedicine to improve access to critical medical genetics services. Such efforts should include setting national standards and best practices in telemedicine and telegenetics. The standards should provide originating and distant sites with a roadmap on fostering an efficient and equitable telemedicine partnership. Each of the issues discussed in this white paper should be addressed, along with for the need to ensure that patient and provider satisfaction with telegenetics services remains high. These organizations should also promote standards that encourage interoperability of competing technological platforms.

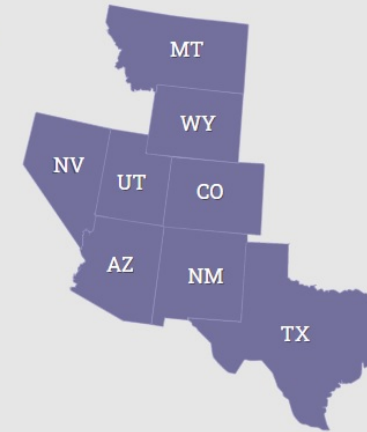
# Organizations (not exhaustive)

- American Telemedicine Associate (ATA)
- National Coordinating Center for the Regional Genetics Networks (NCC)
- National Telehealth Policy Resource Center (NTRCP)
- National Society of Genetic Counselors (NSGC)
- Southwest Telehealth Resource Center (Southwest TRC)
- Regional Genetics Networks (RGNs)



### The Region We Serve

(Click on each state for info.)



## For Professionals

- [For Genetics Specialists](#)
- [For Primary Care Clinicians](#)
- [For Public Health Professionals](#)

## Latest News

[Arizona Team Developmental Delay Algorithm](#)

[November 2019 Project Director's Message](#)

[Genetics Pop-Up Application is OPEN for 2020](#)

[Texas DSHS Hosts Newborn Screening Grand Rounds: Spinal Muscular Atrophy \(SMA\)](#)

[Utah State Team Developmental Delay Algorithm](#)

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- What's the Difference Between Telemedicine and Telehealth?- <https://www.aafp.org/media-center/kits/telemedicine-and-telehealth.html>
- Center for Connected Health Policy- <https://evisit.com/wp-content/uploads/2018/03/Arizona.pdf>

# Improving Access to Quality Medical Care Webinar Series

**January 9, 2020: UAHS Telegenetics Program**

*Valerie Schaibley, PhD*

**February 13, 2020: Incorporating Genetics in the Clinic: Common Indications for Genetic Services**

*Valerie Schaibley, PhD*

**March 12, 2020: Diagnostic Genetic Testing: The Who, What, When and How**

*Shannon Kieran, MS, LCGC*

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<http://www.telemedicine.arizona>



Your opinion is valuable to us.  
Please participate in this brief survey:

<https://www.surveymonkey.com/r/SWTRCWebinar>

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