

Telehealth Regulations and Requirements During a National Emergency

Telemedicine, or the distribution of health services through the use of technology, is drastically changing the way physicians deliver care. By Amanda Tjan

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/EINPresswire.com/ -- Telemedicine, or the distribution of health services through the use of technology, is drastically changing the way physicians deliver care. By making long-distance

communication possible, telemedicine has increased access to healthcare for many populations, including rural communities that may not be located near hospitals. As COVID-19 cases continue to rise, the adoption of telehealth is rapidly increasing.

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*Dr. Edward Kaftarian, CEO,
Orbit Health*

Although many people may be hearing about or accessing telehealth for the first time because of the pandemic, telemedicine has actually been around for more than 60 years, according to Dr. Edward Kaftarian, a psychiatrist and CEO of Orbit Health, which provides telepsychiatry services. Telemedicine first began in the field of psychiatry in the 1950s, explains Dr. Kaftarian, when mental health clinicians at the University of Nebraska successfully used telemedicine to connect with a state hospital many miles away. “The pandemic has only heightened awareness of

telemedicine,” says Dr. Kaftarian, “attracting lots of organizations to develop it.”

Federal Agencies Eyeing Regs That Impact Telemedicine

Numerous laws and regulations govern telemedicine. While all providers must adhere to the Health Insurance Portability and Accountability Act (HIPAA), licensing requirements can vary. Providers must abide by the regulations of the state in which the patient is located during the telemedicine session. In addition, some states require in-person visits to establish patient care

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before a telehealth session can occur or before medication can be prescribed.

Due to the escalating number of hospitalizations as a result of the current public health emergency, physicians and other healthcare professionals are increasingly relying on telemedicine to safely and effectively treat patients. As a solution to reduce exposure, preserve personal protective equipment, and prevent patient surges in hospitals, telemedicine offers physicians an alternative way to provide care. The growing demand for telemedicine is changing the regulation of such practices.

The Department of Health and Human Services (HHS) Office for Civil Rights issued a Notification of Enforcement Discretion in March granting flexibility in HIPAA regulations. This notice allows providers to practice discretion in order to ensure the public has alternative methods of receiving medical services safely.



Edward Kaftarian, CEO Orbit Health Telepsychiatry

States Seek Ways to Improve Access to Telemedicine

In addition to the changes on the federal level, some states have issued waivers to increase access to care. Such waivers are being made in executive orders that have a direct impact on certain healthcare professionals.

For example, the governor of Arizona issued an executive order to expand telemedicine coverage to services that typically require hospital visits. This includes allowing telephone and video calls as well as the prescription of certain medications without prior in-person visits. In addition, Arizona Medicaid plans have expanded coverage policies to include telehealth sessions.

Similarly, California has made efforts to relax medical privacy laws in an effort to minimize the spread of COVID-19. On April 4th, Governor Newsom signed Executive Order N-43-20 protecting physicians in their use of technology such as video chat in non-emergency medical appointments. Medicare coverage has also expanded to include many telehealth services that it did not cover previously.

Telemedicine Serves Many Target Populations Across Numerous Specialties

While first used by mental health professionals to reach patients in remote areas, the reach of telemedicine spans many fields and target populations. Dr. Kaftarian explains that “telepsychiatry is the specialty that is most suited for telemedicine as it primarily involves talking to patients and observing their mannerisms and behaviors. Radiology, dermatology, and pathology also are well suited to telemedicine, as they involve images that can easily be transmitted electronically.” Telemedicine may not be the optimal treatment mode for every area, though. According to Dr. Kaftarian, “specialties that rely heavily upon extensive physical examinations and procedures such as chiropractic, orthopedics, surgery, and OB-GYN are less suited to remote care. Nevertheless,” he concludes, “all specialties of medicine can be supported, at least in part, by telemedicine.”

In addition to reaching rural areas that lack access to specialists or enough medical providers, correctional facilities, like jails and prisons, are also very well suited to telemedicine, especially telepsychiatry. As Dr. Kaftarian describes, “Many doctors don't want to go to work inside the walls of a correctional facility due to what they perceive as an uncomfortable, unclean, or unsafe environment. Telemedicine allows these doctors to access patients without going into the prisons and jails. This is also helpful to correctional officers because it makes safety and security easier to manage without unnecessary personnel being inside the facility.”

Another area where telemedicine can be extremely helpful during the pandemic is in courts of law. Doctor Kaftarian reports forensic expert witnesses, such as psychiatrists, are often called upon to testify in criminal or civil cases and can do so remotely. Many courts are already using remote forensic experts, according to Dr. Kaftarian, whose company facilitates the use of forensic telepsychiatry in the courts.

While many policy changes are scheduled to remain in effect until the global pandemic is no longer a threat, implications of this public health emergency have emphasized the growing demand for efficient medical services. Telemedicine is evolving, thus profoundly impacting the healthcare industry as we know it.

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