Enhancing Management of Chronic Conditions using Virtual Care during COVID-19: Telephone and Video

Telephone and video visits allow patients and providers to meet in real-time from different locations, allowing for live discussion, examination and delivery of care. Virtual visits can enhance the quality of care when patients and providers cannot meet in the provider's office.

Health care providers may feel hesitant when adopting synchronous virtual visits, particularly about:

- Appropriate use for telephone and video visits
- Setting up virtual visits in a primary care practice
- Billing
- Managing workflow with virtual visits

For more information on best practices using a telephone or video visit, see:
- CEP: Delivering patient care remotely[1]
- OTN: Using Direct-to-Patient Video Visits to Enhance Your Practice[2]

1. Determine if a telephone or video visit is most appropriate

	Ideal for:	Not ideal for:
Telephone	• Patients with low-tech literacy/access • Triaging clinical presentations • Less-resourced or paper-based clinics • Addressing a broad range of primary care concerns	• Exams and assessments when non-verbal cues are important • Patients with language and hearing barriers
Video	• Patients with higher-tech literacy/access • Clinical concerns where non-verbal cues are important • Building, maintaining and strengthening the therapeutic relationship • Visual physical exam or non-verbal cues	• Patients without access to a computer/internet connection • Patients with visual barriers • Clinics without resources for up-front work to set up

2. Set up virtual visits in a primary care practice

Telephone	**Blocking numbers**: To block your telephone number when using a personal telephone, press *67 on Android or landline telephones or #31# on iPhones.
	Masking numbers: Some patients may not answer blocked numbers. You can utilize apps that display your clinic/office number to patients from a personal cell phone. Masking can be bi-directional and patients' calls can be forwarded virtually to your administrative support staff.
	Patient consent: Ensure that patients consent to virtual care and understand the risks and limitations associated. Make note of patient's consent in your EMR. • OMA: Consent for Virtual Care[3] (log-in required) for verbal consent scripts and EMR documentation
Video	**Selecting a platform**: Choose a video platform that best meets your and your patients' needs (e.g. consider cost, participants per call, familiarity to patients, limits on call length, screen sharing or text chat capabilities). • Consumer platforms are widely available, familiar to patients and easy to use (e.g. Skype, Microsoft Teams, Facetime, Zoom, Google Hangouts). Configure settings to optimize privacy. • Healthcare-specific video platforms are designed for virtual visits. These are more secure and may integrate into EMRs. Note — there may be additional costs associated with these platforms. • For platform options, see: OntarioMD: Video Visit Platforms Created for Medical Care[4]
	Hardware: A webcam and microphone are required. Consider earphones for better sound quality and patient privacy. Internet speeds above 10 Mbps are ideal (use speedtest.net to test). • For hardware suggestions, see: Dr. Kaplan: Video Hardware Considerations[5] and CEP: Delivering patient care remotely[1]
	Patient consent: Ensure that patients consent to virtual care and understand the risks and limitations associated. Make note of patient's consent in your EMR. • CMPA: Consent to Use Electronic Communications[6] sample template • OMA: Consent for Virtual Care[3] (log-in required) for verbal consent scripts and EMR documentation

3. Bill for virtual visits

Telephone & Video	**Billing**: Use the new OHIP K-Codes and any applicable premium top-ups to ensure appropriate compensation for virtual visit appointments. The new fee codes are platform agnostic; any direct-to-patient telephone and video calling platforms can be used. For OTN users continue to use the OTN billing codes and any applicable premium top-ups. • CEP: Telephone/Video Billing Codes[7]

4. Integrate telephone and video visits into practice

Telephone	**Physical exams**: You may perform a limited physical exam by telephone, including patient-assisted maneuvers and assessments of older adults. • JAGS: Uptake of Virtual Visits in A Geriatric Primary Care Clinic During the COVID-19 Pandemic[8] • Am. J. Med.: The Telehealth Ten: A Guide for a Patient-Assisted Virtual Physical Examination[9]
	Supplement with email/secure patient messaging: Use email/secure messaging to collect images of symptoms, send and receive treatment plans, encourage patient self-management and for follow-up and monitoring. • CEP: Enhancing Management of Chronic Conditions using Virtual Care during COVID-19: Email and Secure Messaging[10]
	Provider self-care: Being on the telephone can be tiring. Break up your day by intermixing different modalities or limiting the number of video visits each day. • CEP: Mental health, well-being supports and financial programs for providers[12] for additional resources
Video	**Have a backup plan**: Confirm the patient's telephone number in case of technical difficulties.
	Physical exams: Many physical exams can be adapted for video. • Stanford: How to Administer a Virtual Physical Exam[11] • Am. J. Med.: The Telehealth Ten: A Guide for a Patient-Assisted Virtual Physical Examination[9] • JAGS: Uptake of Virtual Visits in A Geriatric Primary Care Clinic During the COVID-19 Pandemic[8]
	Supplement with email/direct patient messaging: Use email/secure messaging to send and receive treatment plans, encourage patient self-management and for follow-up and monitoring. • CEP: Enhancing Management of Chronic Conditions using Virtual Care during COVID-19: Email and Secure Messaging[10]
	Provider self-care: Being on video can be tiring. Break up your day by intermixing different modalities or limiting the number of video visits each day. • CEP: Mental health, well-being supports and financial programs for providers[12] for additional resources

For more information see: Enhancing Management of Chronic Conditions Using Virtual Care During COVID-19

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