COVID-19 Telehealth Measures – General FAQ



The health and safety of customers and partners is a top priority for us. We're following the advice of provincial health officials and are working to support best practices in clinical care. As such, until further notice, telehealth services will be temporarily funded on an as-needed basis to support the delivery of essential services to our customers. Telehealth services must be provided in accordance with each health care provider's respective telehealth policy.

1. What services are not covered by this telehealth policy?

- Massage therapists and acupuncturists are not able to access telehealth services under the telehealth policy, by virtue of the nature of the billable services they provide our customers.
- Short telephone consults or check-ins are also not covered under the telehealth policy.
- Please refer to your applicable telehealth policy for further details.
- 2. Will the end date for the pre-authorized period of treatment be extended? All clients currently accessing the 12 week pre-authorized time period will receive a treatment end-date extension to May 1, 2020, or twelve weeks from the date of the crash, whichever is later. This extension applies to all clients with an accident date on or after December 20, 2019. The extension of the pre-authorized period does not apply to those clients who are already being treated under an approved treatment extension.
- 3. Since the pre-authorized period end date was extended, does this automatically allow me to continue providing telehealth sessions until May 1, 2020?

No, the extension of the pre-authorized period is separate from the telehealth policy. Please continue to check the <u>Health Services Business Partners</u> page to refer to changes in the end date for your applicable telehealth policy.

4. How will treatment end dates be handled for recently approved treatment extensions?

Where treatment delays or interruptions due to COVID-19 have impacted recovery outcomes, treatment can be extended following the standard treatment extension request processes explained on the <u>Health Services Invoicing and Reporting</u> page. If providers are unable to access their patient's records to explain the reason for treatment, provide as much clinical rationale as possible to support your extension request and note 'COVID-19' on the request for treatment extension. Response times may be longer than usual.

5. Do I need pre-approval from the claims or recovery specialist to switch my sessions from in-person sessions to telehealth sessions?

For the disciplines that are part of our telehealth policy, you are not required to request separate approval to deliver your sessions via a telehealth platform as long as the telehealth policy is in effect. However, the normal request for extension process remains in effect if additional treatment sessions are necessary. Please see Q4 for more detail.

6. Are there restrictions on which clients can be treated using telehealth services? All providers who are included in the telehealth policy must refer to their available college or association guidelines and exercise caution and a critical clinical evaluation of each potential telehealth client in order to mitigate against unnecessary risks that

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telehealth services may pose. Additionally, the need for telehealth services may be absent or limited for clients who have programs and exercises that they can complete independently. Please ensure the customer consents to treatment delivery via a telehealth medium.

- 7. **How do I know if my telehealth platform meets ICBC's technical requirements?** Please connect with your college, association or telehealth platform provider to determine whether your telehealth platform meets our technical requirements. Please see your respective telehealth policy for our technical requirements.
- 8. **How can I be sure that I am obtaining client consent correctly?**Please connect with your college or association, as applicable, to determine that you are following your college or association's best practice guidelines on obtaining consent prior to delivering a telehealth session.
- 9. Does ICBC require me to carry additional insurance to provide telehealth services?

All providers should ensure they have adequate insurance coverage that encompasses the services they deliver. Please contact your college, association or your insurance provider to confirm your insurance coverage is appropriate.

10. Can I provide group sessions via telehealth?

No, we do not fund group sessions via telehealth. If you have already provided group sessions, please ensure that the invoices are appropriately prorated.

11. How can I request supplies or equipment to support my client's home program?

There has been no change to the approval process for the purchase of supplies or equipment. Please request pre-approval for supplies or equipment from the Claims or Recovery Specialist. Once approval has been obtained, you may invoice for this supply or equipment via your regular invoicing channels. Pre-packaged exercise equipment bundles are generally not considered reasonable requests.

12. Are rehab assistant (RA) services approved under the telehealth policy?

Please refer to the telehealth message for Occupational Therapists or Physiotherapists, as applicable, for details on RA services. RA services require prior approval from a Claims or Recovery Specialist.