



TELEHEALTH RESOURCES

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Nobody understands your needs and challenges better than the MSV Insurance Agency. The landscape of health care is drastically changing during COVID-19, especially as it relates to telehealth. We have pulled together this resource guide to help physicians maneuver through these changes.



TELEHEALTH. WHERE TO START?

[The Health Resources and Services Administration \(HRSA\)](#) of the U.S. Department of Health and Human Services (HHS) defines telehealth as: the use of electronic information and telecommunications technologies to support and promote long-distance clinical health care, patient and professional health-related education, public health and health administration.

Telehealth can address COVID-19 and other epidemic situations by limiting exposure to infection for vulnerable populations and health care workers. Telehealth can also expand the reach of resources to communities that have limited access to needed services. This allows patients to receive health services away from settings where potential for contracting COVID-19 are high, such as hospitals, health clinic waiting rooms, private practices, etc.

Telehealth is essential to medical practice during the COVID-19 outbreak. It is safer for most patients and can be used in a flexible fashion. At this time, the usual restrictions have been reduced to facilitate patient access to health care services. This guide intends to help you begin telehealth as soon as possible in a manner that fits your practice. The MSV is ready to support your efforts to help your patients and maintain your practice viability in this crisis.

WHAT INITIAL RESOURCES CAN I USE TO GET STARTED?

There are various resources that have developed to assist in your efforts to ramp up using telemedicine.

[The American Medical Association \(AMA\)](#) has developed a quick guide and other COVID-19 specific resources to help doctors boot up their telemedicine practice:

- ▶ [AMA Quick-Start Telemedicine Guide](#) – In an effort to keep our health care workers and patients safe amid the COVID-19 pandemic, the AMA has designed resources to support physicians and practices in expediting the implementation of telemedicine, so care can continue to be provided to those who need it most.

Additional AMA Telehealth & COVID-19 Resources:

- ▶ [AMA Telehealth Implementation Playbook](#)
- ▶ [COVID-19 \(2019 novel coronavirus\) resource center for physicians](#)
- ▶ Listen and learn from a recorded panel of experts participating in the [AMA Physician Innovation Network discussion on telemedicine amid COVID-19](#)

COVID-19 SPECIFIC INFORMATION AND RESOURCES:

- ▶ The National Consortium of Telehealth Resource Centers has developed a [COVID-19 Telehealth Toolkit](#), designed to provide studies reflecting telehealth models that may apply to treating COVID-19, an overview of telehealth policy, and additional resources.
- ▶ The Mid-Atlantic Telehealth Resource Center offers a [comprehensive overview](#) of telehealth implementation addressing COVID-19.

[The National Consortium of Telehealth Resource Centers](#) – Telehealth Resource Centers (TRCs) have been established to provide assistance, education, and information to organizations and individuals who are actively providing or interested in providing health care at a distance. Federally funded. Assistance is generally provided free of charge.

[The Mid-Atlantic Telehealth Resource Center \(MATRC\)](#) – The mission of Mid-Atlantic Telehealth Resource Center (MATRC) is to provide technical support and other resources within the following mid-Atlantic states: Delaware, Kentucky, Maryland, New Jersey (Central and South), North Carolina, Pennsylvania, Virginia, Washington DC and West Virginia in order to advance the adoption and utilization of telehealth within the MATRC region; and to collaborate with the other federally funded Telehealth Resource Centers.

- ▶ [MATRC's State-Specific Resources for Virginia](#) – MATRC has made an effort to collect information about telehealth policies and resources for each State within the MATRC region.
- ▶ [MATRC FAQs for Hot Topics](#) (Telebehavioral Health, Remote Patient Monitoring, TeleMAT, Telegenetics, Vendor Selection and HIPAA)
- ▶ [MATRC Educational Events](#) – Join regularly scheduled virtual, online events to answer questions about telehealth basics, technology and vendors
- ▶ [MATRC LinkedIn page](#)

[The Virginia Telehealth Network \(VTN\)](#) – VTN is a 501c3 nonprofit membership organization dedicated to supporting telehealth efforts in the Commonwealth. Started in 2006 by a group of health professionals with an interest in promoting telehealth, VTN seeks to provide education, resources, and best practices to telehealth stakeholders while advocating for safe and effective delivery of telehealth services. VTN Seeks to develop and maintain strong partnerships that allow for the exploration and promotion of innovative programs that promote access to high-quality health care.

- ▶ [VTN Resources page](#)

MEDICAL PROFESSIONAL LIABILITY INSURANCE COMPANIES

Ensure you connect with your carrier to let know you are considering and/or adopting telehealth.

Please note: Resources and links provided to information is not intended to provide legal advice or opinion on any individual situation and should not be relied on to determine insurance coverage, or lack thereof, as relates to COVID-19. We make no representation or warranty as to the accuracy of information as applied to individual cases. Again, please report all claims and potential claims to your insurance company.

CURI

- ▶ [Curi: COVID-19: The Latest News & Resources](#)
- ▶ [Curi: Recommendations on Telehealth](#)
- ▶ [Curi: COVID-19 Policy & Coverage FAQs](#)
- ▶ [Curi: COVID-19 Risk Management FAQs](#)

THE DOCTORS COMPANY

- ▶ [The Doctors Company: COVID-19 Retired Members Who Volunteer During COVID-19 Are Covered](#)
- ▶ [The Doctors Company: COVID-19 Resource Center for Healthcare Professionals](#)
- ▶ [The Doctors Company: COVID-19 Telehealth Resource Center](#)
- ▶ [The Doctors Company: COVID-19 Malpractice Coverage FAQs](#)

Q: Will my coverage remain in force if I provide more telemedicine visits?

A: Yes. Telemedicine is included in your policy. However, members need to comply with state licensure laws for not only where they are physically located, but where the patient is located as well. The Doctors Company will follow any license expansion provided by state and federal governments.

For more information and guidance on questions related to technology and potential liability [access TDC's COVID-19 Telehealth Resource Center](#).

COVERYS

- ▶ [Coverys: COVID-19 \(Coronavirus\) Information](#)
- ▶ [Coverys: Frequently Asked Questions \(FAQs\) on COVID-19](#)

MEDPRO

- ▶ [MedPro Group's CEO Letter](#)
- ▶ [MedPro Group's COVID-19 Information and Resources](#)
- ▶ [MedPro Coronavirus \(COVID-19\) Risk Resources](#)
- ▶ [MedPro Group's COVID-19 Frequently Asked Questions– Coverage Questions, Billing Questions and other questions](#)

PROASSURANCE

- ▶ [ProAssurance: Coronavirus \(COVID-19\) Information Center](#)
- ▶ [ProAssurance COVID-19 Information Center and Online Services](#)
- ▶ [ProAssurance: Professional Liability Coverage Issues](#)
- ▶ [ProAssurance: Practicing Telemedicine](#)
- ▶ [ProAssurance: Medical or Dental Office Closures](#)

Note: During the pandemic, customers are encouraged to visit [ProAssurance.com/COVID-19](#) for frequently updated medical liability and service information.

PROFESSIONALS ADVOCATE

- ▶ [Professionals Advocate: Telemedicine Information for Insureds](#)
- ▶ [A Message from the Medical Mutual Group's CEO about COVID-19](#)
- ▶ [Professionals Advocate: COVID-19 Important News](#)
- ▶ [Professionals Advocate: Practice Tips](#)
- ▶ [Professionals Advocate: Telemedicine Information](#)

PAYMENT AND BILLING

How can I ensure I get paid? What codes and modifiers do I use?

CODING

- ▶ [Special coding advice from AMA](#)

Focus on coding scenarios designed to apply best coding practices. The AMA has worked to ensure that all payors are applying the greatest flexibility to our physicians in providing care to their patients during this public health crisis.

- ▶ [Coding advice from MATRC.org](#)

PRIVATE PAYORS

[Virginia Association of Health Plans \(VAHP\)](#)

- ▶ [COVID-19 Update](#) – Health insurers in Virginia are responding to the COVID-19 coronavirus in a myriad of ways. Plans are eliminating barriers to care including waiving cost-shares, providing more virtual care options, and keeping members updated through mobile apps and websites with the latest information.
- ▶ Health insurers are encouraging the use of telemedicine and virtual sites of care. A detailed chart across plans can be found here: [Insurance Carrier's Telehealth Provisions in Response to COVID-19](#). **NOTE: VAHP maintains and updates this resource. Plans continue to be update policies to adjust to the ongoing crisis. VAHP advises checking with a member's plan for specific and the most up-to-date information.*

MEDICAID

[Department of Medical Assistance Services \(DMAS\)](#)

- ▶ DMAS [has issued guidance to clinicians that apply to both Fee for Service and all its Managed care plans, to allow the same OVM billing and reimbursement for either video or phone based visits](#). Coverage for other visits such as preventive care visits is being developed, and clinicians should regularly visit the DMAS site for updates. face-to-face interaction ([Provider Flexibilities Related to COVID-19 Memo](#)). This coverage will continue through the State of Emergency.
- ▶ [Federal disaster response toolkit](#)
- ▶ CMS has changed rules to allow Medicare beneficiaries to receive more services without having to travel to a

facility including loosening the requirement that members have an established provider relationship before seeking telemedicine services. Review information [released by CMS to learn more about this guidance](#).

- ▶ For more information on what health plans are doing specifically in Virginia – both in the commercial space, Medicaid and Medicare – we encourage you to visit the [COVID-19 Update page](#) on the VAHP website. [Learn more about what plans are doing nationwide](#).
- ▶ [DMAS – General Information for Providers](#)

DMAS – Frequently Asked Telehealth Questions in COVID-19

April 9, 2020

1. **What medical telehealth codes does DMAS cover?** DMAS covers all telehealth codes for services as listed in the 2014 and 2020 bulletins. DMAS also covers all codes that can reasonably be done via telehealth that were previously covered in other settings as long as the modifier GT/GQ/Place of Service (POS) 02 are included.
2. **What behavioral health telehealth codes does DMAS cover?** DMAS covers all codes for behavioral health services that were previously done in an office-based setting as long as the modifier GT/GQ/POS 02 are included.
3. **How much does telehealth reimburse?** Telehealth reimburses the same as office visits for each code used with a modifier. This is true for synchronous video and audio-only telehealth.
4. **Did DMAS close or change any of the codes that were previously open?** No. Codes that were previously reimbursed for telehealth are still reimbursed for telehealth as before.
5. **How does DMAS define 'originating site' and 'distant site'?** DMAS does not restrict the location for 'originating site' or 'distant site'. However, they must be different. DMAS is waiving the requirement that provider staff must

be with patient at the originating site in order to bill DMAS for the originating site fee facility fee. No originating site fee will be paid for telehealth in the home or another non-healthcare setting nor can the patient and clinicians be located in the same facility; this would not be considered a telehealth visit

6. **Will a facility fee be paid for telehealth?** Facility fees will be paid when the 'originating site' for patient evaluation is located at a healthcare facility such as a Drs office, nursing home, clinic or hospital setting.
7. **Do MCOs cover codes that DMAS does not?** DMAS-affiliated MCOs are required to cover all services/codes covered by DMAS. However, MCOs can choose to cover additional codes not specifically addressed by DMAS. Please consult MCOs directly for questions about other codes.
8. **Does DMAS cover emergency medical services?** As above, DMAS covers all codes that can reasonably be done via telehealth that were previously covered in other settings as long as the correct modifier is used. This could include emergency medicine codes. However, with acute care services, the requesting provider must consider the specific requirements of those codes. For example, EMTALA must be considered so a proper medical screening exam must be provided. Please refer to the CMS website for specific requirements associated with billing for the emergency medicine codes (Do we want to include a link)
9. **Does DMAS cover services for on-scene medical care after a 911 call?** Yes, as above. However, if the patient is transported to the ED after a telehealth evaluation, that is considered a single ED visit.
10. **Does DMAS cover telehealth in the ICU or medical wards?** Yes, as above, DMAS covers all codes that can reasonably be done via telehealth that were previously covered in other settings as long as the correct modifier is used. However, the above criteria still must be met, in that the patient and clinician are not as the same facility and all requirements for billing of a specific code are met.
11. **Does DMAS cover pediatric well-child exams?** Yes, up to age four. These should use codes as described above.

MEDICARE

[Centers for Medicare & Medicaid \(CMS\)](#)

- ▶ [Medicare Learning Network Telehealth Services Resource Guide](#) (PDF) Note: Target Audience is Medicare Fee-For-Service Providers

COVID-19: CMS Relaxes Regulatory Requirements for Physicians and Hospitals

On March 30, 2020 CMS [announced \(www.cms.gov\)](#) plans to temporarily relax several regulations to help the health care system deal with COVID-19 and expected patient surges. These adjustments, which are retroactive to March 1, 2020 reflect recent AAFP advocacy and include the following:

Promoting Telehealth in Medicare

- ▶ More than 80 additional services to be furnished via telehealth; in addition to interactive apps with audio and video, providers can evaluate beneficiaries who have audio phones only. Achieving this change in payment policy has been a priority for the AAFP; the Academy [specifically asked CMS to make this change](#) in a March 26.
- ▶ Providers can bill for telehealth visits at the same rate as in-person visits (non-facility rate). Telehealth will fulfill many face-to-face visit requirements for clinicians to see their patients in inpatient rehabilitation facilities, hospice and home health.
- ▶ Clinicians to provide remote patient monitoring services to patients with acute and chronic conditions. This can be now be done for patients with only one disease.
- ▶ Physicians to supervise clinical staff using virtual technologies when appropriate, instead of requiring in-person presence.

Medicare Telehealth Services

- ▶ Provided using telecommunication technology and include office, hospital visit, or other services that generally occur in person. CMS recently updated the list of Medicare telehealth services. [The updated list is available here.](#)
- ▶ These virtual visits are considered the same as in-person visits and paid at the same rate as in-person visits.
 - ▶ To receive payment at the same rate as an in-person visit, CMS is instructing physicians to bill services delivered via telehealth with the same Place of Service (POS) code they would have used if the service had been provided in-person.

- ▶ Physicians should append modifier -95 to the claim lines that describe services delivered via telehealth.
- ▶ Claims billed with the POS 02 will be paid at the facility rate under the Medicare physician fee schedule.
- ▶ Physicians can select the level of office/outpatient E/M furnished via telehealth using medical decision making or time.
- ▶ Time is defined as all the time associated with the E/M on the day of the encounter. The current typical times associated with office E/M are what should be met for the purposes of level selection. [They can be found here.](#)
- ▶ CMS is maintaining the current definition of medical decision making.
- ▶ CMS has also removed any requirements regarding documentation of history and/or physical exam in the medical record for office/outpatient E/M encounters provided via telehealth.

Additional COVID-19 Specific Information and Resources:

- ▶ [CMS Coronavirus Disease 2019](#) – Find program guidance and information about our response to COVID-19.
- ▶ [Physicians and Other Clinicians: CMS Flexibilities to Fight COVID-19](#)
- ▶ [List of Medicare Telehealth Services](#) – Complete list of services payable under the Medicare Physician Fee Schedule when furnished via telehealth.
- ▶ [CMS Medicare Telehealth FAQs](#)
- ▶ [Additional Background: Sweeping Regulatory Changes to Help U.S. Healthcare System Address COVID-19 Patient Surge](#) (Fact Sheet)
- ▶ [Physicians and Other Clinicians: CMS Flexibilities to Fight COVID-19](#) (PDF)



Coronavirus: Share Your Challenges with Us

MSVIA wants to hear from frontline physician practices regarding your financial and business challenges during the COVID-19 pandemic.

[Use this web form to share your experiences.](#)

SELECTING A TELEHEALTH PLATFORM

There are easy ways to get started with telehealth in response to COVID-19. Providers should make plans to transition to a more structured platform. Become familiar with your patients' capability for telehealth and what works best for them!

Once your organization has a clear idea of what kind of solution(s) it needs to launch its telehealth service(s), you are ready to select a vendor.

FREE OR REDUCED COVID-19 TELEHEALTH PRICING*

If you don't have a budget for telehealth technology, the following technology vendors are offering either free or significantly reduced prices as a response to COVID-19.

*MSV does not specifically endorse or recommend any of the vendors included in this list. We strongly encourage you to do your due diligence when making a vendor selection. There may be additional vendors delivering platforms for free, or at a significantly reduced price, in response to COVID-19. These vendors are the ones that have been brought to our attention.

- ▶ Free access to [Vivovitals remote patient monitoring](#) platform for providers in the United States
- ▶ Free access to [Bluestream virtual care platform](#)
- ▶ Free temporary [Vidyo video communications platform](#) license
- ▶ Free white-labeled [RingMD telemedicine platform](#) for doctors, health care groups and other organizations negatively affected by the outbreak
- ▶ Free [Cloudbreak Health unified telemedicine and video medical interpretation solution app](#) with free service for hospitals
- ▶ Free basic and significantly reduced pricing on full featured [Adaptive Telehealth telemental health platform](#) license
- ▶ Free clinical communication solution secure one-way communication updates through [AngelEye Health](#)
- ▶ Significantly reduced pricing on [Connected Healthcare Solutions \(CHS\) Health Guidance Platform](#) for remote monitoring (reduced one time startup fee with no minimum quantities or contractual requirements – and use as many or as few devices as you need with no additional cost)

- ▶ **What if I can't get this all started now?** Temporarily, the Office of Civil Rights has allowed the use of non-HIPAA platforms such as Zoom, FaceTime, and Doximity. Simple solutions for now with the intentions to give you more time to identify and set up a more robust platform and telehealth solution.

COMPUGROUP MEDICAL US

Contact: [Tillmann Schwabe](#), VP Sales, (480) 440-6516

Visit CompuGroup Medical's [HIPAA-Certified Telemedicine webpage](#)

CGM TELEMEDICINE FREE FOR 6 MONTHS: In an effort to mitigate the spread of the COVID-19 CompuGroup Medical is providing access to Telemedicine technology. CompuGroup Medical's telehealth solution offers the ability to engage with patients via web, phone, or mobile app in minutes from anywhere.

In order to take advantage of the special offer please call CGM's Telemedicine hotline at (602) 680-2255 or fill out the [contact form](#).

DRFIRST

Contact: [Liz Dears](#), Senior Director of Strategy and Regulatory Programs, (518) 926-0207

[DrFirst Telehealth service](#) is part of their HIPAA compliant Backline care communication secure text messaging platform so anyone who purchases the Telehealth service can also securely communicate with patients, providers, caregivers or staff in a HIPAA compliant secure manner both now and after this immediate crisis has ended. The Backline Telehealth product is easy to use for both providers and patients. It allows physicians to initiate and conduct telehealth sessions, without requiring patients to download an app, complete a cumbersome registration process or pay anything up front in order to speak with the physician.

ADDITIONAL RESOURCES:

- ▶ [MATRC Vendor Selection Toolkit](#)
- ▶ [Telemedicine & Telehealth Service Provider Directory](#) which includes a link to a [Virginia specific list of telehealth/telemedicine solutions](#)

TELEHEALTH CONSULTANTS

Subject Matter Experts for Specialized Assistance

WHAT IF I NEED MORE HELP TO LAUNCH?

There are a number of consultants who are available for short term and long term transition.

Below is a list of telehealth consultants who can help guide you through the entire process of vetting and implementing your telehealth platform.

MATRC'S CONSULTATIVE SERVICE PARTNERS

Note: MATRC vets consultants on this list. Specialists are added as identified.

NIXON LAW GROUP

906 N Parham Road #102B, Richmond, VA 23229; Phone: (804) 205-1265

Created a webpage as a resource for medical practices, individual physicians and practitioners, and digital health companies who want to follow the latest health care policy developments around responding to COVID-19. Contact Nixon Law Group if you require assistance implementing a telehealth program, a remote patient monitoring program, or another virtual communications program.

EGGLESTON AND EGGLESTON

5115 Bernard Drive # 301, Roanoke, VA 24018; Phone: (540) 345-3556

[Request A Complimentary Practice Assessment](#)

STRATEGIC SOLUTIONS OF VA (SSVA)

4805 Lake Brook Drive, Glen Allen, VA 23060; Phone: (804) 225-1897

[COVID-19/Coronavirus Technical Planning and Response Resources](#)

HANCOCK, DANIEL & JOHNSON, P.C.

4701 Cox Road, Suite 400, Glen Allen, VA 23060; Phone: (804) 967-9604

email: info@hancockdaniel.com

[Coronavirus Guidance and Business Preparedness](#)

WHAT OTHER RESOURCES ARE AVAILABLE FOR MY STAFF?

Education & Additional Web-Based Training Resources

ONLINE TELEHEALTH TRAINING

[Telehealth Coordinator – Online Training](#) (TRC Resource)

[Foundations of Telehealth](#) (provides CME/CE)

[Telehealth Etiquette Video Series](#) (TRC Resource)

[Telemedicine: Conducting an Effective Physical Exam](#) (provides CMEs)

[Telehealth Support with Workflow “SwimLanes” for Telemedicine](#) (American Academy of Pediatrics (AAP))

[MATRC Educational Events](#) – Join regularly scheduled virtual, online events to answer questions about telehealth basics, technology and vendors.

WEBINARS/VIDEOS/PODCASTS

National Consortium of Telehealth Resource Centers (NCTRC) [list of previous events](#) and [upcoming events](#)

AHA webinar: Transforming Access to Care through a Digital Front Door; Contact: Kristin Oliver, koliver@aha.org

ABOUT THE PHYSICIANS FOUNDATION

The Physicians Foundation is a nonprofit seeking to advance the work of practicing physicians and help them facilitate the delivery of high-quality health care to patients. As the health care system in America continues to evolve, The Physicians Foundation is steadfast in its determination to strengthen the physician-patient relationship and assist physicians in sustaining their medical practices in today’s environment. For more information, [visit \[physiciansfoundation.org\]\(http://visit.physiciansfoundation.org\)](http://visit.physiciansfoundation.org).

The Physicians Foundation Announces The Telehealth Initiative to Improve Access to Quality Health Care

Initiative launches as the world grapples with surging demand for medical care in the midst of COVID-19

The Physicians Foundation, American Medical Association, Florida Medical Association, Massachusetts Medical Society, and Texas Medical Association announced the launch of The Telehealth Initiative, which helps physicians implement telehealth services. With the current COVID-19 crisis, the organizations moved up the Initiative’s launch to support physicians in their shift to telehealth models as a means to reduce exposure and minimize surges in care facilities.

The current COVID-19 crisis reinforces the need for physician access to practical resources that will enable them to operate telehealth services efficiently while facilitating positive care team and patient experiences. Through the Telehealth Initiative, physicians are able to participate in immersive evidence-based coaching that will help improve patient access, experience and outcomes while maintaining continuity of care when fully implemented.

The program helps participating physicians redesign their practices to successfully provide telehealth services to their patients. Additionally, the Initiative is providing free, online access to resources to encourage all physicians to consider telehealth services in light of the COVID-19 pandemic. Telehealth will help physicians respond to surges in sick patients needing care and protect non-infected patients with other acute or chronic conditions from potential exposure to the virus. Resources available include:

- ▶ [Telemedicine: The Changing Shape of Care Webinar](#) (TMA)
- ▶ [Telemedicine Vendor Evaluation Tool](#) (TMA)
- ▶ [Policies, Procedures and Forms for Telemedicine Services](#) (TMA)
- ▶ [Making Telemedicine Work: Learn How Physicians are Using Telemedicine](#) (TMA)
- ▶ [Telemedicine Quick Guide](#) (AMA)
- ▶ [Digital Health Implementation Playbook for Remote Patient Monitoring](#) (AMA)
- ▶ [Physician Innovation Network Telemedicine Discussion](#) (AMA)
- ▶ [STEPS Forward™ Module on Telemedicine](#) (AMA)

SoundPractice (podcast of the American Association for Physician Leadership)

[The Use of Technology and Telemedicine in the Battle Against COVID-19 and Coronavirus](#) – March 16, 2020 (podcast)

[Tactical Tips for Telehealth](#) – March 22, 2019 (podcast)

[Telehealth Resource Webliography for COVID-19 Pandemic](#): A comprehensive resource compiled by Michael Edwards, PhD, Northeast Telehealth Resource Center

[MARTEC: COVID-19: The Use of Telehealth in Long Term Care Settings During This National Emergency](#)

Frequently Asked Questions (FAQS)

[MATRC – Hot Topics](#)

Other Helpful Resources

[A Guide To Telehealth Vendors In The Age Of COVID-19](#)
(Source: Healthcare IT News, published March 30, 2020)
Healthcare IT News offers this listing of telemedicine companies that can help hospitals and other provider organizations deliver quality virtual care.

[In A COVID-19 Hotspot, A Physicians Group Deploys A Free Triage And Telehealth Tool](#)
(Source: Healthcare IT News, published March 26, 2020)
Olympia, Washington-based Physicians of Southwest Washington is taking advantage of a health IT vendor's free tech in an effort to gain efficiencies in coronavirus triaging and to see patients remotely.

[HIMSS: The Learning Center](#)

[The Learning Center](#) is a destination where health care IT leaders and professionals come together to learn, discuss, and discover. No matter where you are in your career, the downloadable resources, videos, and live digital events available through this resource can assist you in developing your knowledge and value in the workplace. HIMSS goal is to provide access to innovative solutions, discussions, and leading industry experts in health care information technology—anytime and anywhere.

[TELEHEALTH search results](#)

[HIMSS: Coronavirus Updates](#)