



## Check List

### **Telehealth Credentialing and Privileging Sec. 485.641. Condition of Participation: Periodic Evaluation and Quality Assurance Review.**

The Centers for Medicare and Medicaid Services' (CMS) final rule on credentialing and privileging requirements for telehealth practitioners is effective on July 5, 2011. This rule establishes a process for originating site hospitals (location of the patient) to rely on the credentialing and privileging decisions of the distant site hospital (location of the specialist) for telehealth practitioners.

#### **Definition of Terms**

- Originating Hospital: location of the patient
- Distant-Site Hospital: location of the telemedicine practitioner

\* Please Note: Red = New Provisions Provided Through CMS Final Rule

#### **Executive Summary Conditions of Participation – Periodic Evaluation and Quality Assurance Review.**

**Section 485.641** the quality and appropriateness of the diagnosis and treatment furnished by doctors of medicine or osteopathy at the CAH are evaluated.



**Sec. 485.641 Condition of Participation: Periodic Evaluation and Quality Assurance Review.**

- (a) Standard: Periodic evaluation—
  - (1) The CAH carries out or arranges for a periodic evaluation of its total program. The evaluation is done at least once a year and includes review of--
    - (i) The utilization of CAH services, including at least the number of patients served and the volume of services;
    - (ii) A representative sample of both active and closed clinical records; and
    - (iii) The CAH's health care policies.
  - (2) The purpose of the evaluation is to determine whether the utilization of services was appropriate, the established policies were followed, and any changes are needed.
- (b) Standard: Quality assurance. The CAH has an effective quality assurance program to evaluate the quality and appropriateness of the diagnosis and treatment furnished in the CAH and of the treatment outcomes. The program requires that--
  - (1) All patient care services and other services affecting patient health and safety, are evaluated;
  - (2) Nosocomial infections and medication therapy are evaluated;
  - (3) The quality and appropriateness of the diagnosis and treatment furnished by nurse practitioners, clinical nurse specialists, and physician assistants at the CAH are



evaluated by a member of the CAH staff who is a doctor of medicine or osteopathy or by another doctor of medicine or osteopathy under contract with the CAH;

(4) The quality and appropriateness of the diagnosis and treatment furnished by doctors of medicine or osteopathy at the CAH are evaluated by:

(i) One hospital that is a member of the network, when applicable;

(ii) One QIO or equivalent entity;

(iii) One other appropriate and qualified entity identified in the State rural health care plan;

(iv) In the case of distant-site physicians and practitioners providing telemedicine services to the CAH's patients under a written agreement between the CAH and a distant-site hospital, the distant-site hospital; or

(v) In the case of distant-site physicians and practitioners providing telemedicine services to the CAH's patients under a written agreement between the CAH and a distant-site telemedicine entity, one of the entities listed in paragraphs (b)(4)(i) through (iii) of this section; and

(5)(i) The CAH staff considers the findings of the evaluations, including any findings or recommendations of the QIO, and takes corrective action if necessary.

(ii) The CAH also takes appropriate remedial action to address deficiencies found through the quality assurance program.

(iii) The CAH documents the outcome of all remedial action.



## DISCLAIMER

This publication was made possible by grant number G22RH20216 from the Office for the Advancement of Telehealth, Health Resources and Services Administration, DHHS.

Information contained in this report is current up to the date listed on the report. Note that the information is subject to change following action taken by a state's legislature, state agencies, state medical boards, or other applicable state government agency or body. CTeL will make every effort to provide the most current information.