



IMPLEMENTING TELEHEALTH IN SCHOOLS

GETTING STARTED

JANUARY 2022

Implementing Telehealth in Schools

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Implementing Telehealth in Schools

OVERVIEW

Introduction

There are many advantages to having a school telehealth program, most notably improved access to healthcare for the children of Louisiana. However, there is also much work that needs to be done in designing and implementing a school telehealth program. The planning and preparation should begin at least one year prior to the beginning of the school year that stakeholders expect to have the program operational.

In setting the stage for school telehealth programming, clinic owners/managers must work to ensure that clinic and school district stakeholders “buy-in” to starting and operating such a program. One method for achieving “buy-in” is to demonstrate program value. It is optimal for stakeholders to see that implementing a school telehealth program is about access to care not only in rural areas, but in urban areas, as well. A vision should be created reflecting the long-term benefits of a school telehealth program, which may easily outweigh short-term program costs.

The Availability of Telehealth as a Method of Residential Care Facility Healthcare Delivery: Advantages

There are many advantages to providing medical visits and other healthcare services in schools, including:

- Improved healthcare access for children, faculty, and staff
- Decreased stress and anxiety in children during medical visits
- Improved management of chronic diseases
- Increased access to oral screening and healthcare
- Increased access to mental health screening, management, and treatment
- Improved care coordination among student caregivers
- Reduction in healthcare disparities
- Increased access to health education for children and parents/caregivers
- A potential reduction in emergency room visits, hospital stays and length of hospital stays, as well as a reduction in associated costs
- Decreased school absenteeism, improved grades, and increased high school graduation rates
- Reduction in travel expenses and lost wages when parent/guardian is required to bring children from school to medical appointments
- Rapid diagnosis and treatment of infectious disease, leading to increased infection-control and mitigation of disease/virus spread

Services That Can Be Offered on School Campuses

- Clinical Laboratory Improvement Amendment (CLIA)-Waived medical testing
 - COVID, Flu, strep and Mono
 - Blood sugar testing for diabetics
 - Urine
 - Pregnancy
 - Primary culturing to send to certified lab
- Behavioral health services
 - ADHD
 - Counseling for behavioral health concerns
- Management of chronic conditions, including providing prescriptions for medications
- Referral to medical specialists
- Screenings

- Vision
 - Hearing
 - Oral health
- Health-related education
 - Chronic disease management education
 - Alcohol and drug abuse/misuse education
 - Suicide/self-harm prevention education
- Sports physicals

Implementing Telehealth in Schools

PREPARING A TELEHEALTH PROGRAM

Developing school telehealth programs requires collaboration among a variety of partners and stakeholders for successful implementation. Potential stakeholders include the providers, school board members, principals, faculty and staff, students and parents/guardians/caregivers. In addition, if working with the public school system, stakeholders include all citizens within the community.

It is critical for clinic owners/program managers to obtain buy-in from providers and other medical support staff, as well as from all other clinic staff (front office, billing, etc.), prior to reaching out to school officials.

Health centers with board oversight (such as Hospital Service District oversight over a Rural Health Clinic or community-based board oversight over a Federally Qualified Health Center) will require additional work to achieve buy-in from all appropriate stakeholders within the health system to support program development and implementation.

Successful programs are dependent upon continuous input from stakeholders before, during, and after program development.

Steps toward Development of a School Telehealth Program

Understand Billing Policy

Providers and program managers will need to develop an understanding of the current policy related to the billing of school telehealth visits that are applicable to the clinic type. In particular, providers and other managing school telehealth programs will need to understand current policy relating to the billing of school nursing services paid under Louisiana's Medicaid Program.¹

- Nursing Services are defined as medically necessary services that are directly related to an individualized health plan (IHP) and/or a physician's written order, when required. The following school-based nursing services are covered:
 - Implementation of physician's orders
 - Chronic Medical Condition Management and Care Coordination
 - Medication Administration
 - Early and Periodic Screening, Diagnostic and Treatment (EPSDT) Nursing Assessment/Evaluation Services (IHP Not Required) and
 - EPSDT Program Periodicity Schedule for Screenings (vision and hearing) (IHP Not Required).
- For claims with dates of service on and after August 1, 2021, Lead Education Agency (LEA) billing providers will be required to enter the name and INDIVIDUAL (not group or organizational) National Provider Identifier (NPI) number of the physician or other qualified medical provider. The provider must be enrolled in legacy Medicaid ("fee for service") and have licensing authority to provide services within their defined scope of practice.¹
- For Rural Health Clinic (RHC) and Federally Qualified Health Center (FQHC) providers, the provider's individual NPI should be entered on the claim, and not the RHC/FQHC NPI.

As of the writing of this document, Louisiana Medicaid provides payment for a school telehealth visit [pre-Public Health Emergency (PHE), Medical Evaluation & Management Visits and Behavioral Health Visits]. Unless Louisiana Medicaid guidelines change, Louisiana Medicaid will pay for evaluation and management visits and

¹ Bureau of Health Services Financing, Louisiana Department of Health, 2013. [Medicaid Services Manual, Chapter 20: Early and Periodic Screening, Diagnostics and Treatment Health Services](#)

behavioral health accomplished through a real-time, live audio-visual visit, where a child is at a school-based health center and a provider is in a clinic, including:

- All-Inclusive Encounter Rate for RHCs
- PPS Rate for FQHCs
- FSS Rate for other primary care clinics

Private insurance payments vary, based on policy language (pre-PHE and anticipated post-PHE).

Planning and Exploration

- Begin conversations with relevant stakeholders, which may include:
 - Clinic Owners
 - Clinic Staff (Providers, Nursing Staff, Front Office Staff, Back Office Staff)
 - School Board Members
 - School Board Staff (Superintendent, School Nurses, Principals, Teachers)
 - Payors (Medicaid, Private Insurance)
 - Area Pharmacists
 - Parents/Guardians
 - Greater Community (Everyone Else!)

Obtain budgetary cost estimates from at least three telehealth equipment and connectivity providers to estimate initial and perpetual costs of telehealth equipment and connectivity for the number of schools that are to be served. These costs fall into three basic areas:

- Computer/Device
 - The school location will need a computer or computer-like device that transmits and receives an audio-video signal complete with a “web-cam” like camera (for viewing the entire room), microphone, and speakers.
 - The clinic location will need a computer with large monitor with microphone and speakers so that the health center provider can hear and see the patient.
- Peripherals/Equipment
 - Peripherals are used at the school site to achieve an examination (camera with specialized lenses for viewing large areas of the body, inside the ear, eyes, nose and mouth areas, and the skin, and electronic stethoscope)
 - Providers will need a set of high-quality headphones so that the provider can easily hear heart, lung, and other sounds.
- Connectivity
 - HIPAA-compliant connection, secured through encryption.
 - Internet availability

Board Resolution

A board resolution will need to be completed to collaborate with the school district. A sample Board Resolution is included as **Appendix A**.

Approach the Oversight Board

Present ideas relating to the development of a school telehealth program, including:

- The advantages and benefits of such a program
- The costs of such a program
- The basics of how the program would be implemented in partnership with your clinic
- The basics of how program outcomes would be reported, including reporting measures

Louisiana School Considerations

Get educated on special considerations related to Louisiana Schools.

- [Family Educational Rights and Privacy Act \(FERPA\)](#) (This is the “HIPAA” of schools)
- [Louisiana School-Based Nursing Services](#)
- [Handbook for School-Based Medicaid Services](#)
- [Principles, Standards and Guidelines for School-Based Health Services](#)

Get Buy-In

Ask for ideas from board members and all stakeholders and inquire to gauge board interest in pursuing such a program. Be ready for detailed questions related to special considerations related to schools, as well as:

- Potential risks
- Legal issues
- “What ifs”

A Few Words about the “What Ifs”

Within any organization and on any board, the “What Ifs” about any new program are likely to arise. There may be initial hesitation to implementing the project. All concerns should be taken into consideration, and a team effort made to develop the most effective telehealth project possible. Analysis can also provide new insights and tools to improve the project and project outcomes. By keeping in mind the greater goal of increasing healthcare access for children and school staff, as well as reducing healthcare costs, the community will see the benefits of a school telehealth program.

If the oversight board agrees to project development, ask them to pass a board resolution directing and authorizing collaboration with the school district to develop a school telehealth program. This provides the legal authority of a board directive to begin working on the project (see **Appendix A**).

Write a letter to each elected school board member, informing them that the board and the health center would like to explore the development of a telehealth program for the schoolchildren in their district [see **Appendix B** for School Board Member Collaboration (Informative Letter)].

Request a meeting with the school superintendent, along with all applicable staff, including the supervisor of the Special Education, Special Services or School Health Program. Titles of those over the School Health Program may vary by school district. In addition, it is optimal to bring in the school nurses and other school-based health center staff as early as is possible to engage them as stakeholders to build support. The following goals should be established during this meeting:

- Gauge interest
 - If the superintendent is not interested in school telehealth program development, or if they do not become interested, the program may not succeed. The same is true for other stakeholders.
- Educate School Stakeholders
 - **Be prepared to discuss issues related to staffing the center.** While the health center and the school must engage in ongoing collaboration and work closely together on program development, since the health center is offering to provide medical visits, running the program falls more heavily on the health center, than on the school. One school telehealth model in Louisiana implemented the use of the school nurse to present schoolchildren, faculty, and staff for telehealth visits.
 - If there is already a nurse at each school, there is no requirement to provide additional staffing resources. If it is necessary to add additional nurses to cover schools where telehealth services will be provided, then nurses must be recruited and hired. Be prepared to discuss whether the health center providing the telehealth visit or the school district will pay for the salaries and benefits for nurses.
 - **Be prepared to discuss school/health center workflow necessary to achieve a visit.** The school-based health center-provider healthcare center workflow starts at the beginning of the school year, or when a new student is enrolled at the school. There must be contact made

with parents/guardians to educate them on the school telehealth program (see **Appendix D** for Marketing the School Telehealth Program).

- Consent must be given by parents/guardians for the child to see a healthcare provider through the telehealth platform and standard medical history information must be received, just as health center staff would receive from a new patient entering a clinic. (See **Appendix E** for Sample Consolidated Medical History/Consent Forms). Demographic information must be obtained for identification for insurance payment. In addition, insurance information must be obtained. This will include a front and back copy of all insurance cards applicable to the child.
- Preparation should be made to discuss inter-communication among school staff, including school nurses, and healthcare center staff, including providers, nurses, front office staff, billing staff and administrators/program managers. This can be achieved by providing for a direct telephone connection with the school-based health center and the center providing telehealth provider visits. This is best achieved when the school-based health center and the provider center is connected through a voice over internet protocol system, where the school nurse has “one button intercom access to call health center staff, and where health center staff can push “one button” to call the school nurse. It is optimal if school nurses can contact the individual at the health center who manages the school telehealth program through telephone intercom access, too. Preparation should be made to discuss how required documentation should be accomplished. The most optimal way for this to occur is to purchase a “nurse” software license for the health center’s electronic health records (EHR) system.
- **Be prepared to discuss payment for services.** In certain school-based health centers in Louisiana, the State provides partial funding through the Louisiana Department of Health, Office of Public Health. One of the requirements of receiving this funding is that no child nor parent may be billed for any service at the school-based health center. Your health center ownership or governing board must have made the decision as to whether a parent will be billed for a telehealth visit (deductibles, co-pays, or for private-pay charges if the child is not insured).
 - It should be noted that certain insurance contracts require the billing of deductibles and co-pays. If the commitment is to be made that the center providing the telehealth visit is not going to charge for deductibles and co-pays, the center should write all applicable insurance companies explaining the program and asking for a written waiver of the co-pay/deductible collection requirement for children seen in the school environment through telehealth infrastructure. (See **Appendix F** for Sample Insurance Company Co-Pay Exemption Request). This correspondence should include factors related to:
 - Improved care (for preventive care, as well as for acute episodes, and for support in the management of chronic diseases)
 - Cost reduction due to the potential for lower acuity for diseases/illnesses caught early
 - The potential for reduction in emergency department visits, and a reduction in hospitalizations
- **Be prepared to discuss medical and testing supplies.** Telehealth provider stakeholders should be prepared to discuss what medical and testing supplies will be provided at the school-based health center. Certain health center types (such as Rural Health Clinics) are required to have the availability of certain tests as a part of the RHC program. Each of these tests should be available at the School-based health center.
- It is common knowledge that when a patient walks into a stand-alone clinic (other than a Rural Health Clinic or a Federally Qualified Health Center), that the patient or their insurance may be billed for medical supplies used for testing, treatment, or procedures. With RHC/FQHC

entities, both receive one payment for the visit (from Medicare and Medicaid), which includes medical and testing supplies.

- NOTE: Health centers without a certified laboratory onsite must have a CLIA Certificate of Waiver on file to perform CLIA-waived tests. Health centers providing tests on school campuses are required to have each individual campus “added” to the health center’s [CLIA Certificate of Waiver](#).
- **Be prepared to discuss services for faculty and staff.** Providing telehealth visits for faculty and staff offers many of the same advantages (listed in this document above) that apply to providing telehealth visits to schoolchildren. Remember, without our faculty and staff, we do not have schools!
- **Be prepared to discuss services provided.** Will well-child visits be provided? If well-child visits are going to be provided, then vaccinations must also be provided. In Louisiana, if vaccinations are provided, the school-based health center will be required to arrange with the Louisiana Department of Health’s Immunization Program to certify the school-based health center as an approved immunization site.²

² Louisiana Department of Health, Immunization Program. [Louisiana’s Immunization-related Laws](#)

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DEVELOPING SCHOOL-CLINIC TELEHEALTH WORKFLOW

Prior to starting the school telehealth program, an administrative and clinical workflow must be developed, using logical steps that must occur before, during, and after a telehealth visit. The starting point for workflow development might be through evaluation of what occurs before, during and after an in-person visit in your clinic.

A suggested set of steps are provided below. Please note, however, that the steps used throughout your telehealth visit process may differ.

1. Obtain consents, medical history and insurance/demographic information from parents or guardians at the beginning of the school year during “back-to-school” or similar events.
2. The patient presents in the school-based health center with a health-related complaint or concern.
3. The nurse triages the patient.
4. The nurse determines whether the patient can benefit from a telehealth visit.
 - a. If the nurse determines that the child does not need a visit, the nurse will render first aid or give other appropriate care.
 - b. If the nurse determines that the child can benefit from a telehealth visit, the nurse checks to ensure that a consent is on file.
 - i. If a consent is not on file, the nurse contacts the parent or guardian and asks for consent. If the parent wishes to give consent, the nurse arranges for getting a signed consent. **In no case should a visit occur without a signed parental consent unless a life-threatening emergency exists.**
 - ii. If a consent and appropriate documentation is not already on file, it may be obtained in one of the following ways:
 1. The parent may come to the school-based health center, in person, to sign a consent form and to complete demographic, medical history and insurance forms.
 2. Forms may be scanned and e-mailed to the parent, the parent may then print, sign, scan, and e-mail back to the school nurse.
 3. Forms may be photographed, printed, completed, signed, and returned by photograph, which must be printed by the school nurse and scanned into the electronic health records system, prior to the telehealth visit.
 4. Documents may be stored on the school website and/or the health center website, and may be printed, signed, and scanned or faxed back to the school nurse.
 5. Documents may be completed and signed by electronic signature, online, if the school or health center has made such software feature available either on the school website or on the health center website.
 6. If consent and related documentation cannot be accessed, the nurse should notify the parent that the child needs to be seen by a medical provider, and that the child needs to be picked up and taken for treatment.
 - iii. If a consent and appropriate documentation is on file, the patient’s information should be entered into the electronic health record/practice management system (software system) for the health center providing the telehealth visit.
 - c. The availability of the next appointment should be checked in the software system, and an appointment should be scheduled.
 - d. The patient’s triage information should be entered into the software system.

- e. If the nurse has access to the clinic's telephone intercom system, the nurse should contact the front desk to inform them of the appointment.
 - f. The parent or guardian should be contacted and informed of the patient's status.
 - g. The nurse should ensure that the child is ready for the visit.
5. When the provider is ready for the visit, the provider will call the school on the telehealth platform.³ The provider, as well, based on is written in the chart, contacts the school nurse for pre-visit discussion.
 - a. If the provider gives the nurse directives to be carried out prior to the visit, the nurse should carry out the provider's directive(s) (medical tests, etc.) and enter results into EHR.
6. Once the provider has reviewed the nurse's notes in the software, they will call the school-based health center on the telehealth platform for the live, audio-visual visit. The school nurse may call the parent to connect to the call (by listening through the telephone speaker system) if applicable.
7. If the provider-school telehealth connection is made, then the provider, with the school nurse as the "telehealth presenter," will proceed with the visit.
8. When the visit is complete, the school nurse will:
 - a. Follow through with provider's orders.
 - b. Place supporting documentation in EHR
 - c. Ensure that a visit summary is printed out and sent to the child's primary care provider or to the parent, as is applicable.
 - d. Follow up with the parent or guardian, as is applicable, and documents follow-up in EHR.
 - e. Assist the health center billing staff with any information or data needed related to billing the encounter.

³ If the connection for the telehealth visit is not made, the nurse should attempt to resolve the issue through basic troubleshooting. (School nurses should be trained in basic troubleshooting of telehealth platform concerns). If basic troubleshooting fails, the nurse should contact the school's Information Technology Department for assistance, and the healthcare center should contact their Information Technology Department for assistance, as well. The two IT teams should collaborate to resolve the concern. If the concern cannot be resolved by the School and Health Center IT Professionals, the telehealth equipment/platform customer service division should be contacted (by the IT Professionals) to start a service ticket.

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BEST PRACTICES FOR SCHOOL TELEHEALTH PROGRAMS

One School-One Healthcare Entity

It is widely known that providers have their own way of doing things. Patient outcomes are best when providers have autonomy in their policies relating to patient visits and care, patient standing orders that may be issued, clinical workflow, and in all other applicable areas relating to the care of their patients. Working with multiple entities can present difficulties for the school nurse, as well as for clinic staff. The school nurse does well to work with multiple providers within a single clinic where policy and flow is probably similar among providers. With one entity, providers can easily come to an agreement on school telehealth workflow, and how things are to be done, in general. Such is not the case when carrying out policies and procedures, handling tasks, and providing for ease of workflow for providers in multiple entities.

There is an assumption that the provider-entity billing for a medical visit will furnish medical and testing supplies needed for patient diagnosis and treatment. If more than one entity provides services for a school, there is an assumption, as well, that accounting for medical and testing supply inventory must be undertaken for each entity. This could cause administrative and clinical concerns at the school health center, as well as at the provider entity.

Forward a Visit Summary to the Child's Primary Care Provider

Continuity of care is important across the lifespan. With children, a special level of concern exists. In many cases, a child's pediatrician has provided care for that child since birth. Many parents are resistant to changing that. One method for increasing parents' level of comfort with school telehealth visits, that might be accomplished through a medical provider who is not the child's primary care provider (PCP), is to provide a "visit summary" to the child's regular provider. This "keys in" the provider on illnesses, injuries or treatments occurring in the school environment, and provides insight into future care for the child. The visit summary may be printed out, placed in a sealed envelope, and sent home with the child, so that the child's parents have it on hand for the next PCP visit, or with parents' permission, the visit summary may be faxed directly to the PCP.

With telehealth, there can be concerns that the patient-centered medical home model will be comprised, and providers may be concerned about losing patients to other providers. It is important to communicate early and often with all stakeholders about the benefits of the school telehealth program.

Additionally, it should be a priority to communicate to those who may be PCPs for schoolchildren that:

- The school telehealth program is to provide additional healthcare access to children and is not to replace the long-term relationships that children already have with their providers.
- The school telehealth program is being developed to provide earlier access to healthcare, and therefore earlier diagnoses of communicable diseases, and that the program is not only to help the child, but to help prevent the spread of infectious diseases such as influenza and COVID-19 to the greater community.
- The school nurse, with the parent's permission, will always forward a copy of the visit summary to the PCP.

Insurance

If the treating entity is planning to not charge insurance deductibles and co-pays for school telehealth visits, written authorization to refrain from charging should be requested, and received, from insurance companies, as most insurance payers require charging for these. (See **Appendix F** for Sample Insurance Co-Pay Waiver Request).

Training and Technical Assistance

Ensure that telehealth presenters receive telehealth presenter training. As the program is developed, facilitate ongoing discussion and documentation of how technical assistance will be provided to the school nurse, to providers and to clinic staff relating not only to telehealth technology, but also to the logistics of ensuring smooth workflow among school nurses, providers, and entity staff.

Software and Equipment

Equip the school-based health center with clinic voice over internet protocol (VOIP) compatible telephone or equip clinic with a VOIP school telephone. A VOIP telephone system allows for telephones and telephone in-house (peer-to-peer) intercom systems to work together. This allows “one-button” contact among clinic providers, program managers and other clinic staff, and the school nurse, and prevents, for example, the school nurse to have to call the clinic’s main telephone line and wait on hold to speak to another stakeholder. This helps to ensure effective communication among all stakeholders.

Obtain clinic software license for the school nurse so that they can document directly into clinic electronic health records system (EHR).

Supplies

Provide for drop-shipments of medical and testing supplies from a supply distributor direct to the school-based health center.

For cost reporting/accounting purposes:

- If the clinic is not able to use electronic automation to pull medical and testing supplies used (such as CLIA-waived lab tests given during a fiscal year in the school-based health center setting), implement a policy that ensures that the school nurse maintains and keeps a written log of lab tests ordered/administered.
- Ensure that records of orders, purchase orders, invoices and payment records for school-based health center medical and testing supplies are kept separate from other clinic purchases.

Agreements and Documents

A listing should be made of all necessary steps, along with the entity or individual responsible for taking each step, toward implementing a school-based health center telehealth program. (See **Appendix G** for Checklist of Things to Do to Prepare for Program Implementation).

Ensure that both school board and clinic or health center legal counsel have reviewed and approved contracts or agreements relative to school-based health center/telehealth implementation. (See **Appendix H** for Sample Clinic or Health Center/School Board Agreement Table of Elements).

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APPENDIX A: SAMPLE BOARD RESOLUTION

STATE OF LOUISIANA

PARISH OF <name of parish>

<Name of board having oversight>

RESOLUTION: School Board Clinic Collaboration for Telehealth & Related Program Implementation in Schools

A Resolution Authorizing the <name of entity> CEO/Administrator to Collaborate with the <name of parish> School Board to Provide Telemedicine Visits and Related Services in <name of parish> Schools

WHEREAS, The health of <name of parish> Parish residents and residents in nearby communities, along with access to healthcare, is of paramount concern to <name of board, district>;

WHEREAS, According to the Health Resources and Services Administration, <name of parish> Parish is a <if applicable: Medically Underserved Area>, <if applicable: a Primary Care Health Professional Shortage Area>, and a <if applicable: a Mental Health Professional Shortage Area>;

WHEREAS, The <district, board or appropriately named entity> has the potential, through its own resources, and through additional resources which it may have access to, to offer positive healthcare impact to the communities that it serves, and the schools within those communities;

WHEREAS, Collaborating with the <parish name> School Board to provide telehealth visits in schools offers the potential to combine resources, and therefore to increase access to Primary Care Services.

RESOLUTION

Now Therefore, Be It Therefore Resolved by <name of board having oversight>:

That the <administrator, CEO, other applicable officer> of <name of health center> is authorized to undertake the implementation of program development for telehealth implementation and related services in <name of parish> schools.

That in doing so, the <administrator, CEO, other applicable officer> is authorized to execute contracts with the <name of parish> School Board for telehealth and related program development, and to take action to maintain or renew related documents, contracts and/or agreements necessary for telehealth and related program implementation.

This resolution shall remain in effect until rescinded by the <name of board having oversight>:

PASSED, APPROVED and EFFECTIVE this <day of month> day of <month>, <year>.

Board Secretary or Other Authorized Official

For <name of board having oversight>

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APPENDIX B: SAMPLE LETTER TO SCHOOL BOARD MEMBERS

Place this sample letter on your clinic's letterhead.

<Date>

Mr./Mrs./Ms. <name>
School Board Member, District <district designation>
<Name of parish> Parish School Board
<Address>
<City, state, zip>

Dear <Mr./Mrs./Ms. Last name of school board member>:

I am <name of clinic CEO>, CEO of <name of clinic> in <town or city>.

In their regularly scheduled meeting on <date>, the <clinic governing board name> adopted a resolution to collaborate with the <parish name> School Board to provide telehealth services to the schoolchildren of <parish name> Parish in the school's health center at the following locations <list name(s) of school(s)>.

I would like to visit with you, via phone or in person, to receive your input on such a program, and on whether you feel that you would be able to support such a program in our schools. I am planning to contact <school superintendent name>, Superintendent of <parish name> Parish Schools, for a meeting with <him/her> and applicable school board staff regarding possible collaboration.

If you could contact me at <telephone number or e-mail address> at your convenience, I would be grateful.

Thank you so very much for taking your time to hear from me.

With Respect,

<Name of clinic CEO>, CEO
<Name of clinic>

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APPENDIX C: SAMPLE SCHOOL BOARD RESOLUTION

A Resolution Authorizing the Superintendent to Enter into a Memorandum of Understanding with <clinic name> to Provide telehealth services to School-based health centers in Schools Operated by the <full name of school district>

WHEREAS, The health of <name of parish> Parish children, along with access to healthcare for <name of parish> Parish children, is of paramount concern to the <name of school board>.

WHEREAS, According to the Health Resources and Services Administration, <name of parish> Parish is a Medically Underserved Area, a Primary Care Health Professional Shortage Area, a Mental Health Professional Shortage Area, and a Dental Care Health Professional Shortage Area. (INCLUDE ONLY IF HPSA)

WHEREAS, The <name of clinic> has the potential, through its own resources, and through additional resources which it may have access to, to offer positive healthcare impact to the children served by the <name of parish> Parish School Board;

WHEREAS, Partnering with the <name of clinic> offers the potential to provide new healthcare access through telehealth and to enhance services which may be already provided in certain cases, to the school children of <name of parish> Parish on or in close proximity to the campus of some, or all of the schools operated by the <name of parish> Parish School Board.

RESOLUTION

Now Therefore, Be It Therefore Resolved by the <name of parish> Parish School Board:

That the Superintendent of <name of parish> Parish School Board is authorized to undertake the implementation of program development for school-based health centers which will provide for new points of access through telehealth to primary healthcare for children enrolled in schools operated by the <name of parish> Parish School Board, and in some cases, for school faculty and/or staff employed by or contracted with the <name of parish> Parish School Board;

That, in doing so, said Superintendent of <name of parish> Parish School Board is authorized to execute contracts or memoranda of understanding [MOU(s)] with the <clinic name>, and to take any and all actions necessary to implement, maintain, amend or renew said documents, contingent upon review of said documents by the <name of parish> Parish School Board Attorney.

This resolution shall remain in effect until rescinded by the <name of parish> Parish School Board.

PASSED, APPROVED and EFFECTIVE this <day of month> day of <month>, <year>.

AYES: _____
ABSENT: _____

NAYS: _____
APPROVED: _____

President

<Name of parish> Parish School Board

Implementing Telehealth in Schools

APPENDIX D: MARKETING THE SCHOOL TELEHEALTH PROGRAM

After a school telehealth program is developed, it is a necessity to develop a plan for marketing—focused on informing parents on program details. They will need to see what the program is, how it works, how it can help their children, and how it can help them (the parents), as well. This can be accomplished through a variety of means, including through conventional advertising (radio, television, direct mail, etc.), through informational news releases, and through the use of social media.

While the use of telehealth has been thrust into the forefront since the COVID-19 Public Health Emergency began in 2020, making telehealth a common term, a program consisting of using telehealth for one's child (outside the presence of the parent or guardian) will survive only if built upon a foundation of trust.

A strong marketing plan for the telehealth program can help guide community and parental understanding of how telehealth is used in schools, and therefore, can positively affect adoption. Remember this phrase, “Effective understanding can prevent misunderstanding.” In the case of telehealth implementation in our schools, parental understanding is a basic necessity.

Marketing a school telehealth program is a continuous process, based on multiple tactics. Direct communication with the parents is one effective method of informing them about a new school telehealth program.

- Presenting about the program to a Parent Teacher Organization or Association can provide a chance for parents to have their questions directly answered by a medical professional who will be involved in the telehealth project.
- Another way to engage parents and the community is to have a “Connected Child Health Day” at schools where telehealth has been implemented or is being proposed. Show attendees the equipment and technology, letting them see first-hand how it works, and what it does. Sometimes the most effective tool for showing off your telehealth program is allowing a parent to see the level of detail that can be seen by a provider (in their own ears or throat).
- You can also send an informational packet home with children at the beginning of each school year or at the start of the program. The folder should include information about the program and its benefits. The remainder of this appendix includes sample text that could be included in the folder. The folder should also provide instructions on how parents can register their child to participate, as well as the various demographic, medical and consent forms necessary to enroll a child in the program. These forms are included in Appendix E.

Sample Text for Informing Parents of the Program

What is a School-based health center?

INTRODUCTION

We are pleased to introduce you and your child to your child's new school-based health center, which is located at <name of school> school. The primary focus of the center is to provide quality, accessible health care to the children who attend schools operated by the <name of parish> Parish School District. <Name of Parish> school-based health centers are made possible through a partnership between <name of clinic or community health center> and the <name of parish> Parish School Board.

WHAT IS A SCHOOL-BASED HEALTH CENTER?

Your school-based health center is a place that your child can go to, on the school campus, where they can receive basic healthcare. Think of it as a clinic that your child can use to meet their healthcare needs. Just like

a clinic in any community in America, now your child's school will have a clinic on their school campus. Thus, it is called a school-based health center.

What is Telehealth?

WHAT IS TELEHEALTH?

Telehealth can provide a real time, face-to-face medical visit for your child where the medical provider can see and examine your child and offer a treatment and healthcare plan. By using technology—including cameras, lenses and microphones that transmit and receive secured signals over the internet—the provider can examine your child from another location, then call or electronically wire a prescription into the pharmacy of your choice if needed.

HOW DOES TELEHEALTH BENEFIT MY CHILD AND OUR FAMILY?

Taking advantage of the school-based health center and the telehealth program will allow your child to be seen in a timelier, efficient manner. This can be done on campus, with the school nurse in attendance, without you having to leave work to pick up your child for a medical appointment. You will be informed and updated throughout the process, and your child's primary care physician will be provided with a record of any telehealth visit.

How will the School-Based Health Center Program Work?

WHO IS ON CAMPUS TO CARE FOR MY CHILD AT THE SCHOOL-BASED HEALTH CENTER?

There will be a <RN, LPN > at the <name of school> School-Based Health Center, every day. The <RN, LPN> will be present to assist your child in meeting their healthcare needs and to assist the medical provider with evaluating the child, with treating the child's condition, and with managing care, if needed.

HOW WILL THE PROGRAM WORK?

The first step is to complete the required informational and consent forms so that your child can see a medical provider through telehealth.

The easiest and fastest way to register is to complete the forms contained in the right side of the folder packet and return them to school with your child. This needs to be sent back into the school on the next school day.

- Once your child's enrollment packet is received at the school, a medical record will be made for your child at <name of clinic or community health center>. This Electronic Record will be readily accessible to the School nurse at the school-based health center, as well as to a provider at <name of clinic or community health center> who will be conducting the visit and providing services to your child.
- If your child/student visits the school-based health center and has a medical complaint (pain, not feeling well, etc.), the nurse will evaluate the child to determine if a medical visit through telehealth would be beneficial.
- If it is necessary for the child to see a medical provider, the nurse will schedule an appointment with the provider to have a telehealth visit with the child. This would be similar to a walk-in appointment that your child may receive in any clinic in the community. It is our goal to see the child within <state the number of minutes> minutes.
- The Parent/Guardian may be called, as well, so that they may listen in and interact with the provider, the nurse and the child/student during the visit (through a speakerphone provided in the school-based health center).
- The provider and school will then connect through the telehealth system over the internet. The nurse will be present with the child/student at all times and would assist the provider, as needed, to ensure that the provider sees and/or hears what is needed to effectively develop a diagnosis and treatment plan.
- The provider then may prescribe medication, if needed. If medications were prescribed, they would be transmitted electronically to the pharmacy of the parent/guardian's choice.
- The parent/guardian has a choice regarding the primary care provider. If your child has a primary care provider that you are pleased with, you may continue to use that provider as your child/student's

primary care provider. If your child does not have a primary care provider, you may choose <name of clinic or community health center> as your primary care provider.

- When a child has a primary care provider, a copy of their visit summary can be sent to that provider so that they are informed on services rendered at the school-based health center. This will allow for continuity of care for the child/student.

What Services Will Be Offered at the School-based health center, and Can I Make an Appointment for My Child to Be Seen?

THESE SERVICES WILL BE OFFERED IN THE SCHOOL-BASED HEALTH CENTER

- Acute care for minor illnesses and injury, including medications if indicated (e.g. sore throat, earache, colds, rashes, eye infections, scrapes, muscle strains, etc.)
- Primary and preventive health care
- Comprehensive history and physical examinations
- Health screenings
- Laboratory/diagnostic testing
- Management of chronic disease such as asthma or diabetes
- Health education and prevention programs
- Referral and follow up for emergencies
- Referral for to a specialist for further care/treatment

CAN I MAKE AN APPOINTMENT FOR MY CHILD TO SEE A PROVIDER, IF NEEDED?

Yes, absolutely! If your child is experiencing a health concern, you may make an appointment to have your child seen, via telehealth, in the school-based health center. Or, if you prefer, you can see a provider in person at <name of clinic or community health center>, by calling <name of clinic or community health center> at <telephone number of clinic or community health center> or by calling your school's nurse. School-based health center hours will be Monday through Friday only during school hours.

If you have questions, please call <name of clinic or community health center> at <telephone number> or call for the school nurse at your child's school.

How Much Will Services Cost, and Who is Eligible to Receive Services in the Center?

HOW MUCH WILL SERVICES COST?

Neither you nor your child will ever be asked to pay an insurance co-pay or a deductible for care received at your school-based health center. Insurance carriers will be billed if your child/student has insurance, b neither you, nor your child, will be asked for money at <name of parish> school-based health centers.

WHO CAN RECEIVE SERVICES AT THE SCHOOL-BASED HEALTH CENTERS?

Currently, only children/students served by the <name of parish> Parish School District who are enrolled in the school-based health center and Faculty/Staff employed by the <name of parish> Parish School District are eligible to receive services in the school-based health centers.

What Do I Need to Do to Enroll My Child in the School-Based Health Center/Telehealth Program?

WHAT DO I NEED TO DO?

The first and most important step is to complete the required forms to enroll your child/student in the school telehealth program. The forms include consents, demographic information, and medical information.

The easiest and fastest way to register your child/student is to:

1. Complete the forms contained in the right side of the folder packet.
 - a. Please ensure that you fill in every blank.
2. Return them to school with your child on the next school day.

If you have question or concerns, please call <name of clinic or community health center> at <telephone number> or call for the school nurse at your child's school.

Perpetual Marketing

Following the implementation of a school telehealth program, it is necessary to continue marketing efforts. Marketing can be supported through measuring and reporting program outcomes. For example: If a school had instances of closure for the past two years due to the level of influenza infection among schoolchildren, it is notable if schools were not forced to close during the first year of telehealth program implementation.

It is necessary to regularly monitor the program's performance in an effort to find trends, as trends can show where improvement is needed. In addition, program monitoring can help us to show that our program is, or is not, achieving our expected outcomes. If findings are positive, it is helpful to disseminate this information to the community, as this helps to strengthen the program. Program strength, and public opinion surrounding the program, is necessary to achieve continued funding, and therefore continued implementation. Show your community what the program is doing.

When considering how to market your program, communication channels such as local radio and television stations, as well as other new outlets can be invaluable resources. Social media can prove to be a positive marketing foundation, as well. When determining the appropriate channel through which to direct marketing efforts, the characteristics of the target population (in this case, parents and grandparents) should be considered.

It is important that all medical community stakeholders support your school telehealth program. With this, it is advisable to engage them, prior to and during program development, as well as social service organizations, churches and other community-based organizations.

One of the best methods of getting the word out about your program is through positive word of mouth. Never underestimate the influence of stakeholders within your organization when it comes to this.

Consider these methods for marketing your school telehealth program, as well:

- **Clinic Website:** Your clinic website can help to spell out an overview of your school telehealth program, give information about your clinic and providers and the school nurse. This is an excellent medium for articulating your technology and how it works, how to sign up for the program, or how to receive additional information about the program.
- **News Releases and Guest Articles in Local Publications:** A news release or a guest article in a local publication can highlight healthcare issues and projects, such as a school telehealth program. You can write about the history of telehealth technology, as well as the current state of the technology, how the technology works, and its effectiveness. Another great subject area is that of healthcare access. Virtually every parish and county in the nation has some population that has concerns with accessing healthcare. This sometimes involves our children. When we can show that we are providing healthcare access to our children, this will prove to be a "win-win" situation.
- **Using satisfaction surveys** can be an effecting marketing tool, as well. But we not only want to survey our parents on their levels of satisfaction, but we need to remember the schoolchildren who have actually used the program, as well. School faculty and staff satisfaction surveys can be a source of measurable data that works well to present, if mostly positive.
- **Speaking at civic clubs** about your project can be an effective community-stirring event about telehealth technology. Civic clubs are always looking for speakers to fill their program time on meeting days. Take advantage of this avenue! It works, and with some of the more influential members of our communities.

Finally, we can never underestimate the value of social media. Parents who are likely to allow the use of a technology platform, such as telehealth, as foundation for their child's healthcare are also likely to already be

regular consumers of social media. Such information may include community, state, national or world news, updates relating to family and friends, or information relating to products and services that are available, including healthcare. Create a social media school telehealth program page, highlighting and posting regularly about your program.

Creating a school-based health center page on their website, featuring the telehealth program, will be an ongoing reminder to parents throughout the school year of the availability of this program. People are reading, and people are sharing!

Remember, creating understanding is the best medicine for a misunderstanding. Use creativity on how you get your message out there! Marketing your school telehealth program does not have to be expensive, but it does take substantial time and thought.

Consider developing a comprehensive Telehealth Marketing Plan to guide marketing and outreach efforts. Use Well-Ahead Louisiana's [Marketing Your Telehealth Program](#) as a tool.

Implementing Telehealth in Schools

APPENDIX E: SAMPLE FORMS AND AGREEMENTS

<Clinic name/logo>

Demographic and Medical Information & Consent for School Telehealth Services

Note to Parents/Guardians: If you choose NOT to sign your child up for School Telehealth Services, they will continue to receive all school nursing services currently being provided at your child's school. Participation in the School Telehealth Program will allow an added service delivery for your child to be seen through telehealth by a provider at <name of health center/clinic>. Please ensure that the information and consent form is completed in its entirety.

Child's/Student's Name	Last Name	First Name	Middle Initial
Child's/Student's Address, City, State, and Zip Code			
Name of Mother	Home Phone	Work Phone	Cell Phone
Mother's Email Address			
Name of Father	Home Phone	Work Phone	Cell Phone
Father's Email Address			
Name of Other Guardian	Home Phone	Work Phone	Cell Phone
Other Guardian's Email Address			
Best Emergency Contact		Relationship	Phone
If we are unable to reach Emergency Contact, who should we contact?		Relationship	Phone
Check appropriate box for child's insurance Attach copy of front and back of child's insurance card and send back to school	<input type="checkbox"/> Medicaid/Healthy Louisiana Plan (check one below) <input type="checkbox"/> Healthy Blue Louisiana <input type="checkbox"/> AmeriHealth Caritas Louisiana <input type="checkbox"/> Aetna Better Health of Louisiana <input type="checkbox"/> Louisiana Healthcare Connections <input type="checkbox"/> United Healthcare of Louisiana <input type="checkbox"/> No Insurance <input type="checkbox"/> Private/Other Insurance Company Insurance Name _____ Insurance Address _____ Insurance Phone _____ Effective Date _____ Policy Holder Name _____ Policy Holder's Relationship to Child _____ Policy Holder's SSN _____ Policy Holder's Date of Birth _____ Does your child have prescription coverage? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Consent/Statement Regarding Telehealth Services

Introduction

<Clinic name> has provided electronic equipment/technology that will provide for a live, audio/video connection to the school-based health center.

What “Telehealth” is:

Telehealth is a set of methods for the delivery of health-related services. Telehealth can include a telemedicine visit where your child is evaluated and treated by a medical provider.

What “Telemedicine” is:

Telemedicine involves the use of electronic communications to enable health care providers and staff at different locations to provide health services and to share individual patient medical information for improving patient care. Providers may include primary care practitioners, specialists, and/or subspecialists. The information may be used for diagnosis, treatment, follow-up and/or education, and may include:

- Patient medical records
- Medical images
- Live two-way audio and video
- Output data from medical devices and sound and video files

Electronic systems used will incorporate network and software security protocols to protect the confidentiality of patient identification and imaging data and will include measures to safeguard the data and to ensure its integrity against intentional or unintentional corruption.

We want to inform you of the expected benefits of using **Telehealth Delivery** in <name of parish> Parish Schools:

- An increase in health care access to children who may not otherwise receive it
- A reduction in inappropriate emergency room use
- A reduction in hospitalizations
- An increase in school attendance
- A reduction in medical expenses
- More efficient medical evaluation and management
- An economic benefit to parents who are not required to take off from work to take the child to a medical appointment
- Children who are well, feel good, and learn better

As with any medical procedure, there are risks. This is true for **Telemedicine Delivery**, as well. We want to inform you of some of the possible risks of using **Telehealth Delivery** in <name of parish> Parish Schools. These risks include, but may not be limited to:

- In rare cases, information transmitted may not be sufficient (e.g. poor resolution of images, audio or video) to allow for appropriate medical decision making by the providers;
- In rare cases, delays in medical evaluation and treatment could occur due to deficiencies or failures of the equipment.
- In rare cases, a lack of access to complete medical records may result in adverse drug interactions, allergic reactions, or other judgment errors.
- In rare cases, security protocols could fail, causing a breach of privacy of personal medical information

By signing this form, I understand the following:

- I understand that the laws that protect privacy and the confidentiality of medical information also apply to telemedicine, and that no information obtained in the use of telemedicine that identifies the child will be disclosed to researchers or other entities without my consent.

- I have the right to withhold or withdraw my consent for telemedicine at any time without affecting my child's right to future care, treatment, benefits, or programs for which they are otherwise entitled.
- I have the right of access to my child's medical information. I can inspect medical information documented during a telemedicine encounter and may receive copies of this information in accordance with Louisiana law.
- I understand that a variety of alternative methods of medical care may be available to the child, and that I may choose one or more of these at any time, including taking my child to the provider of my choice.
- I understand that telemedicine may involve electronic communication of child's personal medical information to medical providers located off the child's school campus.
- I understand that I may expect the anticipated benefits from the use of telemedicine in the child's/children's care, but (as with any other medical procedure or treatment); no results can be guaranteed or assured.
- I understand that the healthcare provider will not be physically in the same room with my child. The School Nurse will be present with my child (and clinic staff may be present with the healthcare provider at the clinic) to operate equipment, or to assist with evaluation, examination and/or treatment. I understand that if the need exists (based on the medical needs of the child/children), that there may be another healthcare provider who also participates in the visit.
- I understand that providers who are either employed by or contracted with <name of clinic> will provide telehealth services.
- I consent to audio/video recording or photography if necessary, and that the resulting audio, video and images will become a part of my child's/children's medical record and will be used for documentation or health care purposes only.

I consent to services being provided to my child/children through Telehealth/Telemedicine Delivery.

Parent/Guardian Name (Please Print)

Parent/Guardian Signature

Child's Date of Birth

Date of Signature

Information Regarding Charges/Payment for Services Provided by Telehealth Delivery

As parent/guardian, understand that I <will or will not> (for clinic to determine) be charged for any of the services provided at the school-based health center.

I also understand that <name of clinic>, or a medical provider will bill Medicaid or other insurance providers for these services. I authorize/assign payments of authorized benefits directly to <name of clinic> or to any provider rendering professional services.

I have read and understand the services that can be provided at the school-based health center. I give permission for this child to receive the telehealth services at school-based health center.

Parent/Guardian Name (Please Print)

Parent/Guardian Signature

Relationship to Child

Date of Signature

Please remember to include a copy of your child's insurance and identification cards (front and back).

<Clinic name/logo>

School-based health center Information & Medical History

School		Grade			
Child's Name		Gender			
Child's Date of Birth		Child's SSN			
Physician					
Does your child have a regular Physician or other Provider, such as a Nurse Practitioner or Physician Assistant? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Regular Physician/Provider Name		Provider Address			
Provider Phone		Date of Last Visit			
Dentist					
Does your child have a regular Dentist? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Regular Dentist Name		Dentist Address			
Behavioral/Mental Health Provider					
Does your child have a Behavioral/Mental Health Provider? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Provider Name		Provider Address			
Provider Phone		Date of Last Exam			
Preferred Pharmacy					
Pharmacy Name		Pharmacy Address			
Pharmacy Phone					
Medical Questionnaire					
	Yes	No		Yes	No
Is your child currently receiving treatment for any type of illness or injury, including mental illness? If yes, please list:			Has your child ever had surgery or been hospitalized? If yes, please list:		
Is your child taking any prescribed medication? If yes, please list:			Does your child smoke, vape, or use any tobacco products? If yes, please list:		
Is your child taking any other medications? If yes, please list:			Does your child use alcohol?		
Does your child engage in illicit drug use (marijuana, cocaine, heroin, etc.)? If yes, please list:			Does your child wear glasses or contact lenses?		

Does your child have any allergies or have they had any adverse reactions to the following? Please circle or list: Local anesthetics Penicillin or other antibiotics Sulfa Drugs Barbiturates Sedatives Iodine Aspirin Other: _____			For females only: Is your child pregnant or do you think she may be pregnant? Is your child nursing? Is your child taking birth control pills?					
Has your child had any of the following?								
	Yes	No		Yes	No		Yes	No
High blood pressure			Cardiac disease			Ulcers		
Heart attack			Heart Murmur			Chest pains		
Rheumatic fever			Hay Fever/allergies			Easily winded		
Swollen ankles			Frequently tired			Stroke		
Fainting/seizure			Recent weight loss			Tuberculosis		
Asthma			Emphysema			Cancer		
Low blood sugar			Radiation therapy			Glaucoma		
STDs			Arthritis			Anemia		
Leukemia			Joint Replacement			Liver disease		
Diabetes			Joint Implant			Heart trouble		
Kidney disease			Hepatitis/jaundice			Thyroid problem		
AIDS or HIV infection			Epilepsy/convulsions			Respiratory problems		
Stomach trouble			Heart disease			COVID-19		
Other illnesses, injuries, chronic diseases not mentioned above?								
Has your child been vaccinated for the flu? <input type="checkbox"/> Yes <input type="checkbox"/> No								
Has your child been vaccinated for COVID-19? <input type="checkbox"/> Yes <input type="checkbox"/> No								

Attestation That the Information Above is Correct

I attest that I have read, understand, and have accurately answered all questions above. I understand that providing incorrect information can be dangerous to my child's health.

Signature of parent/guardian if student is a minor:

Parent/Guardian Name (Please Print)

Parent/Guardian Signature

Relationship to Child

Date of Signature

Parent/Guardian Address

City, State, Zip Code

Parent/Guardian Phone

Implementing Telehealth in Schools

APPENDIX F: SAMPLE INSURANCE CO-PAY WAIVER LETTER

Place this sample letter on your clinic's letterhead. Send via Certified Mail with Return receipt.

<Date>

<Name of specific insurance company chief executive officer or legal agent>

<Name of insurance company>

<Address>

<City, state, zip>

Sent Certified Mail, Return Receipt

Dear <Mr./Mrs./Ms. Last name of insurance company chief executive officer or legal agent>:

<Name of clinic or health center> is establishing a telehealth medical visit program at the school-based health center at <name of school(s)> in <name of parish, name of state>.

With this, it is our hope to incentivize parents to allow their child to utilize the medical telehealth visit program at the <name of school-based health center>, as it is widely known that children who receive timely primary care are likely to experience lower acuity levels and are therefore less likely to require an emergency department visit or hospitalization. In addition, we believe that detecting, particularly communicable illnesses, earlier, results in less spread of diseases (such as influenza), and thus results in improved health and healthcare outcomes within the greater community. These elements not only provide for a child to receive primary care more quickly in an environment where they are already more comfortable, it allows for cost-savings, as well.

We respectfully request that you exempt <name of clinic> from charging and collecting deductibles and co-pays when children present in our school-based health center.

With Respect,

<Name of clinic CEO>, CEO

<Name of clinic>

Implementing Telehealth in Schools

APPENDIX G: SAMPLE IMPLEMENTATION CHECKLIST

Task	Discussion	Responsible Party
Recruit a part-time medical Director for the school telehealth program.	This can be the clinic or health center's medical director, or it may be a physician from outside the clinic or health center. It is preferable to have a pediatrician for school telehealth medical director.	
Develop a Marketing Program <ul style="list-style-type: none"> • Informational folder • Radio advertising • Newspaper advertising • Targeted mail outs • Face-to-face contact at school events • Speaking to civic clubs 	Goal is to achieve 100% participation of students/parents. Entities may work together on this.	
Generate Appropriate Forms <ul style="list-style-type: none"> • Consent to treat (medical) • Consent to treat (through telehealth) • Medical History Questionnaire 	<ul style="list-style-type: none"> • These can be placed on the school and clinic or health center's internet web page so that parents/guardians can print, sign, and return to school. • These can be placed in informational folder 	
Ensure that each child is registered for telehealth program.	Goal is to register 100% of children	
Prepare to recruit school nurse and hire.	<ul style="list-style-type: none"> • Either entity, or both, may work together to carry out this task, with medical director input. • A team interview process may be used to make hiring decision (clinic or health center and school board stakeholders on team). 	
Develop school/clinic workflow.	Entities must work together to develop workflow, with input from school nurse and school program staff, clinic providers and staff, and from the medical director.	
List school nurses Duties <ul style="list-style-type: none"> • Decide whether nurse or clinic will scan/input consents, demographic data, and medical history into EHR. 	This can be the responsibility of the school nurse or clinic staff.	
Develop school telehealth policies and procedures.	Entities must work together to develop policies and procedures, with input from school nurse and school program staff, clinic providers and staff, and from the medical director.	

Decide if clinic will charge co-pay and deductibles for services provided through telehealth.	This is the clinic or health center’s responsibility.	
Decide if the school nurse, clinic, or Health center Staff will Forward Visit Summary to Parent or to Primary Care Provider (If Clinic or Health center Rendering Service is not PCP).	This can be the responsibility of the Clinic or Health center or of the school nurse.	
Ensure that a Business Associate Agreement or an “Amendment to the Contract” is executed ensuring HIPAA and FERPA Compliance.	Both Entities are Responsible	
Decide who will provide the “non-clinical supervision” for the school nurse.	Either entity may be responsible, but not both.	
Ensure that the school nurse is trained as a “telehealth presenter,” and that the Nurse is trained on the use of the telehealth Equipment.	Either entity may be responsible for this, or both may share responsibility.	
Ensure that medical providers have “standing orders” in place for school nurse.	This is under the direction of the medical director and providers, collectively.	
Decide if clinic or health center will provide school sports physicals, and how this task will be undertaken.	<ul style="list-style-type: none"> • Will providers go to the school? • Will children be transported to clinic or health center? • Will health center charge for sports physicals or provide this as a “free” service? 	
Will health center provide Flu and/or COVID-19 Immunizations for school faculty/staff?	The clinic or health center will make this decision.	
Will Immunizations be given to children in schools?	School and clinic should decide this collectively. It should be noted that immunizations given by school nurse will be school’s responsibility. School is responsible for inventory, ordering, storage, administering immunizations and reporting.	
Which medical tests will be available for school nurses to administer, as per provider’s orders?	This decision will be made by the clinic or health center.	
Which medical supplies and medications will be available at the school-based health center?	This will be the responsibility of the clinic or health center, with the advice of the medical director and providers.	
Who will supply furniture and equipment (and software) for school-based health center?	<ul style="list-style-type: none"> • Desk and chair for school nurse • Computer with internet connection with monitor and printer • Telephone? Will the clinic or health center provide a VOIP phone on their system for “one touch communication with clinic or 	

	<p>health center providers and staff? Will the school provide a VOIP phone on their system for “one touch communication with clinic or health center providers and staff?</p> <ul style="list-style-type: none">• Curtains and window treatments to ensure privacy?• Fax machine?• Chair in exam room?• Exam table?• Signage designating “school-based health center”?• Appropriate lighting supporting audio-visual visit?• Hand washing area?• Large storage cabinet with lock?• Worktable that can be easily sanitized?• Small refrigerator with thermometer?• Telehealth equipment, connectivity, and peripherals?• Electronic Health Record License fees?	
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Implementing Telehealth in Schools

APPENDIX H: SAMPLE AGREEMENT ELEMENTS

Disclaimer: Consumers of this information should contact an attorney to obtain advice with respect to any legal matter. No reader or user of this information should act or refrain from acting based on information contained in this document without first seeking legal advice from counsel licensed to practice in your state.

Introductory Clause		
Clinic or Health center Responsibilities		
Section	Elements with Sample Text	Notes
General Responsibilities	As described herein, Clinic or Health center will provide certain healthcare services to eligible students at the schools identified, during days and times mutually agreed to by Clinic or Health center and School Board. Clinic or Health center and School Board understand that services will only be provided in accordance with the official School Board calendar during months where school is in session and not during the summer period, school holidays, or school closures.	<ul style="list-style-type: none"> • In general, what will the entities do and when will it be done? • Would school allow school-based health center to be open during summer months or at other times when schools are closed to improve healthcare access to community?
Services Provided	Clinic or Health center will provide the following services to eligible students: all appropriate and necessary preventive, wellness, screening, mental health, sick childcare, and immunization services permitted to be provided in a school-based setting. Notwithstanding the foregoing, healthcare Services will be limited to those that maintain patient confidentiality while being performed in the setting provided by School Board.	<p>What Services will be provided by Clinic or Health center?</p> <ul style="list-style-type: none"> • Medical Visits? • Behavioral? • Dental? • Vaccinations? • Limitations?
Eligibility for Services	Clinic or Health center will provide Services to only those children (a) enrolled in a school operated under the authority and jurisdiction of the School Board and (b) who have produced the signed written consent of a parent or guardian, authorizing the treatment from Clinic or Health center at the School.	<p>Who will be eligible for the services provided? Entities collectively make this decision.</p> <ul style="list-style-type: none"> • Students? • Faculty/Staff • Parents? • Other Siblings? • Others?
Consent for Treatment	Prior to treating any student, and after School nurse verifies that a signed consent has been obtained, Clinic or Health center will verify that a signed consent form has been obtained and is on file for the student. Clinic or Health center also agrees that during any examination, no one will be in the examination room with Clinic or Health center except the student's parent (if such parent desires to be present), a Clinic or Health center Clinic or Health center employee, and the school nurse.	<p>Who is responsible for obtaining consent?</p> <ul style="list-style-type: none"> • School nurse? • Clinic or Health center Staff? • Who is responsible for scanning consents into record? For keeping custody of consents?

<p>Payment for Services</p>	<p>Only the Clinic or Health center will have authority to seek payment for services rendered. The School Board shall have no responsibility for payment to Clinic or Health center. Clinic or Health center agrees that there are no costs to the School Board for this program.</p>	<ul style="list-style-type: none"> • Will reimbursement be sought? • Who will bill for services? • Will school receive any of collections? • If so, what is the percentage? • Will School Board pay Clinic or Health center? • Will parent/student/faculty member be billed for deductibles and co-pays? Or not? • Are there costs to School Board for services?
<p>Insurance</p>	<p>Clinic or Health center shall maintain such policies of liability and other insurance as is customary in Clinic or Health center settings.</p> <p>Clinic or Health center will hold School Board harmless from liability for its activities. In addition, Clinic or Health center will maintain insurance coverage in amounts that are acceptable to the School Board as follows:</p> <p style="background-color: yellow;"><insert policies and coverages with coverage limits here></p> <p>Clinic or Health center shall be responsible for written notification to School Board upon change of Clinic or Health center’s Medical Malpractice/Professional Liability (or other applicable insurance) or if coverage ceases to be in force, for any reason.</p> <p>Documentation shall be provided in the form of Certificate(s) of Insurance within <number of days> business days of policy renewal. Policy information should be provided to the representative designated by the School Board.</p>	<p>Insurance:</p> <ul style="list-style-type: none"> • Professional Medical liability? • Auto Insurance? (for possible transportation) • Workers’ Compensation? • Who will provide insurance? • Amounts of coverage? • Hold Harmless Clauses? • Ensure notification of Provider Insurance Companies. • Requirement to provide documentation of coverage.
<p>Indemnification</p>	<p>Clinic or Health center agrees to hold harmless and indemnify the School Board from and against all claims, demands, and/or actions asserted against the School Board and that arise out of or may be related to Clinic or Health center negligence or willful misconduct, or which otherwise arise out of the services provided to any patient visiting a school-based health center. Such indemnification shall include attorneys’ fees, courts costs, and costs of litigation incurred by the School Board.</p>	<p>Clinic or Health center must support School Board if a claim arises.</p> <ul style="list-style-type: none"> • “Negligence” • “Willful” misconduct
<p>Clinic or Health center will Appoint School-based health center Director</p>	<p>Clinic or Health center will designate the school-based health center Director to serve as liaison to the School Board relative to this Agreement.</p>	<p>Who are the representatives that will represent and solve problems and concerns for the entities?</p> <ul style="list-style-type: none"> • School-based health center Director? • Administrator/CEO • Program Manager? • Clinic or Health center?

Clinic or Health center Reports	Clinic or Health center agrees at the end of each school year, to provide the School Board with a report of the number Clinic or Health center telehealth visits as per this agreement, broken down by students, faculty and staff, (and others, if applicable).	<p>Will Clinic or Health center be responsible for providing report to School Board?</p> <ul style="list-style-type: none"> • Elements to be reported? • Visits only? • Treatments? • Tests?
Provider & Professional Staff Credentialing & Background Checks	<p>All Clinic or Health center providers and nursing staff shall be properly licensed and qualified to provide services and licenses shall be current. Clinic or Health center shall provide copies of appropriate licenses of all licensed staff to School Board upon request.</p> <p>All employees of Clinic or Health center shall undergo a background check as provided for by law before performing services under this Agreement, and reports of such checks shall be provided to School Board.</p>	Clinic or Health center must ensure that staff are qualified, licensed, and trained.
Patient Records	Clinic or Health center agrees to comply with state and federal laws, rules, and regulations relating to the use, storage, confidentiality, and destruction of medical records.	Clinic or Health center must keep all patient records in accordance with guidelines.
Reimbursement to School Board for Nursing or other Staff	<insert applicable statement here>	<ul style="list-style-type: none"> • Will Clinic or Health center pay for nursing staff or will School Board pay for nursing and other related staff? • What if school system gives raises? • Is Clinic or Health center obligated to provide funding for pay raises for school nurses?
Equipment and Supplies	Clinic or Health center will provide Telehealth equipment and platform required for telehealth visits, along with necessary platform and equipment maintenance.	<ul style="list-style-type: none"> • Will School provide Equipment or will Clinic or Health center? • Computers • Software • Peripherals to achieve an exam? • Telehealth carts? • Connectivity? • Maintenance and Support on Equipment? • Who is responsible if equipment breaks due to accident? • Exam Tables? • Telephones? • Telephones on same system as Clinic or Health center (VOIP)? • Will school-based health center use Clinic or Health center Software System?

		<ul style="list-style-type: none"> • Who provides medical testing supplies? • Durable/non-Durable?
Patient Education/take home materials/primary care provider report. Parents right to be present	<p>Clinic or Health center will provide educational information to children relating to the importance of good health.</p> <p>After a medical visit, the student will be provided with a written report to take home to parent.</p> <p>Clinic or Health center will provide parents the right to be present when their child is treated.</p>	<ul style="list-style-type: none"> • Will Clinic or Health center or school nurse provide patients with educational information? • Who will ensure that after visit summary gets to primary care provider for continuity of care? • When will parents/guardians be notified? Who will ensure that after visit summary gets to parents? Will parent be called with after visit summary? • Will parent be able to be present on either telephone or on telehealth connection during visit?
Non-discrimination clause	Clinic or Health center will not discriminate against any student. All students will be treated equally.	No discrimination
School Board Responsibilities		
Facilities	The School Board will assign designated areas of school facilities available for Clinic or Health center to provide services and to maintain patient privacy. School Board will also provide routine maintenance and general housekeeping duties at each facility, including supplies necessary for environmental infection control.	<ul style="list-style-type: none"> • Who is responsible for providing facilities (Clinic or Health center space)? • Is space available in an unused schoolroom? • Will school/Clinic or Health center purchase a building?
Equipment provided by School Board	<insert applicable equipment/furniture/supplies here>	<ul style="list-style-type: none"> • AED, Desk/Chair, Exam Table, Curtains for privacy, office equipment, waiting area, appropriate signage? • Infection control (sink, towels, soaps, disinfectants, other supplies), refrigerator, internet connectivity? • Who arranges for (and pays for) medical waste disposal?
What will school nurses do? What will they NOT do?	<insert school nurse duties here>	<ul style="list-style-type: none"> • Will school nurse provide non-traditional duties for nurses such as obtaining consents, storing consents, scanning consents into Clinic or Health center software system, or otherwise providing Clinic or Health center with consents for treatment? • Entering demographic and medical data including name,

		<p>date of birth, and insurance information for billing purposes?</p> <ul style="list-style-type: none"> • School nurse will act as “presenter” for telehealth visits. • What will the School nurse NOT be responsible for?
Term of Agreement and Termination of Agreement		
Agreement Term	<enter term of agreement and termination of agreement here>	<p>Effective date, how to terminate?</p> <ul style="list-style-type: none"> • Can either party terminate? • Notice required?
Miscellaneous		
Compliance with Laws	<p>Both parties shall comply with all laws and regulations applicable to this Agreement, including any applicable requirements of the State of Louisiana Department of Health and Hospitals. The School Board acknowledges and agrees that Clinic or Health center is a covered entity under the Health Insurance Portability and Accountability Act of 1996 (“HIPAA”), as well as any amendments thereto. Clinic or Health center acknowledges and agrees that records maintained by the School Board are subject to the Family Educational Rights and Privacy Act (“FERPA”), as well as any amendments thereto. Clinic or Health center’s patient records shall be (a) maintained separately from School Board education records and (b) subject to HIPAA not FERPA; School Board education records will (c) not include records of Services performed under this Agreement and (d) be subject to FERPA, not HIPAA.</p>	<p>Compliance:</p> <ul style="list-style-type: none"> • HIPAA? • FERPA? • Records? • CLIA? • Other regulations and guidelines?

This report is a collaborative effort of Well-Ahead Louisiana
and Diversified Healthcare & Management Consulting.

