Store-and-Forward Telemedicine Q & A

Q. Does store and forward telemedicine have to be recorded video or audio instruction? Or, can it be a printed document (for example, in Google Classroom)?

A. Schools will be able to send printed instructions or diagrams to explain the health-related task that the child or the child and parent will need to complete (depending on the age and capabilities of the child).

The task must be performed and documented as instructed, and then sent back to the professional for review of the child's progress and goals. Email is not a secure communication method for store-and forward telemedicine.

Q. How many minutes should be reported for a "length of session" in a service log when using storeand-forward telemedicine?

A. On your service log, you would use the start and end times for each component or step of the storeand forward process.

Q. Is it acceptable that the required "real-time interactive video follow up happens during another therapeutic session? We can only get some parents on the phone once a week.

A. Schools can only bill for one unit per day. Your documentation should reflect the time spent (start and end times) for each component of the store-and-forward activity. If you are also going to provide face-to-face services for something other than the store-and-forward activity, you would have to also document the time spent (start and end time) that was provided in person or via two-way audio and video service provided after the follow up session.

Q. Do all three steps have to be followed to bill or can they bill for step 1, for example, the parent or student does not follow through on their end?

A. All three steps (creating and sending, retrieving and reviewing, and a face-to-face or two-way interactive follow-up session) must be completed before billing. The claim will not be considered complete if all three components are not included.

Q. Can speech therapists or occupational therapists use store-and-forward telemedicine?

A. The store-and-forward telemedicine is specific to IEP, occupational therapy (OT), physical therapy (PT) and speech language pathology (SLP) services. As with any other method of telemedicine it will be up to the professional to determine if the store-an-forward method is just as effective as a face-to-face service and appropriate for the child and family.

Q. Can billing for store-and-forward telemedicine be submitted for services provided prior to Aug. 1, 2020, or must the service dates be for Aug. 1, 2020, or later?

A. The store-and-forward telemedicine waiver was approved in October, with an effective Aug. 1, 2020. So the service date for billing must be for Aug. 1, 2020, or later.