

# COVID-19 Telehealth Program Application Checklist

## Before starting my application, I have...

Made sure my organization can be categorized in one of the following ways:

- Post-secondary education institutions that offer instruction in health care or act as teaching hospitals or medical schools.
- Community health centers or health centers that provide health care to migrants
- Local health departments or agencies
- Community mental health centers
- Not-for-profit hospitals
- Rural health clinic
- Skilled nursing facilities
- Consortia of health care providers with one or more of the above entities.

Obtained (or at least applied for) an eligibility determination from the Universal Service Administrative Company.

Obtained an FCC Registration Number (FRN).

Registered with System for Award Management.

Certified that my organization will comply with applicable privacy and reimbursement laws and regulations including but not limited to the Health Insurance Portability and Accountability Act (HIPAA), applicable medical licensing laws and regulations, and all applicable COVID-19 Telehealth Program requirements and procedures, including the requirement to retain records to demonstrate compliance with the COVID-19 Telehealth Program requirements and procedures for three years following the last date of service, subject to audit.

## **In my application, I have included...**

\_\_ Names, addresses, county, and health care provider numbers (if available) for health care providers seeking funding and the lead provider for applications involving multiple health care providers.

\_\_ Telephone number, mailing address, and email address for the individual responsible for the application.

\_\_ Description of the anticipated connected care services to be provided, the conditions to be treated, and the goals and objectives of the health care provider.

*\*The FCC suggests that applicants "include a brief description of how COVID- 19 has impacted your area, your patient population, and the approximate number of patients that could be treated by the health care provider's connected care services during the COVID- 19 pandemic. If you intend to use the COVID-19 Telehealth Program funding to treat patients without COVID-19, describe how this would free up your resources and/or how this would otherwise prevent, prepare for, or respond to the disease by, for example, facilitating social distancing."*

\_\_ An estimated number of patients to be treated.

\_\_ (if requesting funding for services) Descriptions of the telecommunications services, information services, or "devices necessary to enable the provision of telehealth services" requested, the total amount of funding requested, as well as the total monthly amount of funding requested for each eligible item.

\_\_ (if requesting funding for devices) Descriptions of all devices for which funding is requested, how the devices are integral to patient care, and whether the devices are for patient use or for the health care provider's use. As noted above, monitoring devices (e.g., pulse-ox, BP monitoring devices) will only be funded if they are themselves connected.

\_\_ Documentation that supports the costs indicated in the application (vendor or service provider quote, invoice, etc).

\_\_ A timeline for deployment of the service(s)

\_\_ A summary of the factors you intend to track to measure the real impact supported services and devices..

## **Additional Questions to Consider**

Has your area been especially affected by the COVID-19 outbreak?

*\*The FCC states that they have a “strong interest in targeting funding towards areas that have been hardest hit by COVID-19.” Be sure to highlight this if applicable in your application.*

How will telemedicine directly help your organization prevent the spread of COVID-19?

*\*The FCC will look for applicants who can show that “telemedicine directly aids in the prevention of pandemic spread by facilitating social distancing and similar measure in the community.” Clearly articulating this information in one’s application may be helpful.*

To whom will your funding go?

*\*The FCC says they “strongly encourage selected applicants to target the funding they receive through the COVID-19 Telehealth Program to high-risk and vulnerable patients to the extent practicable.” If an organization intends on doing this, the applicant may want to include that information in the application.*

Does your organization have any sort of “pre-existing strain”?

*\*The FCC suggests that providers document any sort of “pre-existing strain (e.g., large underserved or low-income patient population; healthcare provider shortages; rural hospital closures; limited broadband access and/or Internet adoption)” in their application.*