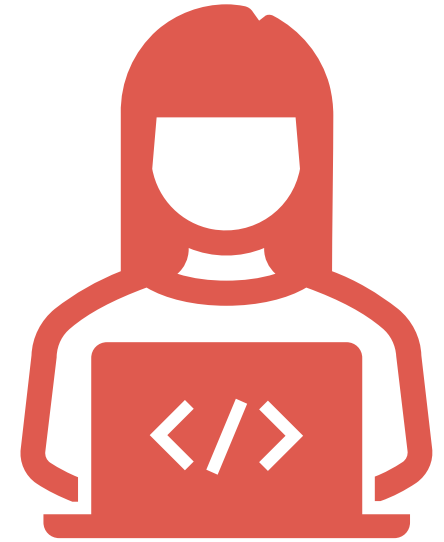


Resources for Telehealth

Recursos para telesalud

April 19, 2024



Financial Disclosure

- **Alissa Terry**
- **Lisa Richard**
- **Kathy H. Wibberly**
- **Danielle Louder**
- **Lloyd Sirmons**

Have No Relevant Financial Disclosures.

No tener divulgaciones financieras relevantes

Divulgacione financieras

MEET THE PANEL/CONOZCA AL PANEL



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THE FAMILY PERSPECTIVE/LA PERSPECTIVA FAMILIAR



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AGENDA

- **Use of Telehealth**
 - Polling
- **Telegenetics Barriers**
 - Polling
- **NYMAC and RGN support for telegenetics**
- **The Family Experience with Telehealth**
- **Information and Support from the Telehealth Resource Centers**
- **Group Discussion and Questions**

- **Uso de la telemedicina**
 - Encuesta
- **Barreras en la telegenética**
 - Encuesta
- **Apoyo de NYMAC y RGN para la telegenética**
- **Experiencia familiar con la telemedicina**
- **Información y apoyo de los centros de recursos de telemedicina**
- **Discusión en grupo y preguntas**

WHAT DOES NYMAC DO?



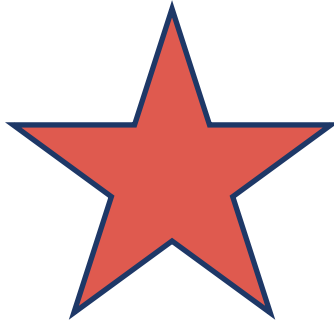
Improving the genetics delivery system through collaboration with diverse stakeholders



Support Telemedicine projects to make genetics appointments easier for families



Provide Education about genetics to families and professionals



¿QUÉ HACE NYMAC?



Mejora los servicios de genética con la colaboración de grupos e individuos claves



Proyectos de telemedicina para facilitar las citas de servicios genéticos



Educación en genética a familias y profesionales

To achieve

ACCESS to quality genetics services for people with genetic conditions and their families

Para lograr

ACCESO a servicios genéticos de calidad para personas con enfermedades genéticas y sus familias

Telehealth Use Poll: Over the Last Year...

Encuesta de
uso de
telesalud:
durante el
último año...

- Approximately what percent of your family's healthcare did you receive by telehealth?
- Approximately what percent of the healthcare services you provide were done by telehealth?




- ¿Qué porcentaje aproximado de la asistencia médica recibió su familia por telesalud?
¿Qué porcentaje aproximado de los servicios de asistencia médica que brinda fue por telesalud?

What and Why Telegenetics?

¿Qué es la telegenética y por qué usarla?

- NYMAC's goal= expand access to quality genetic services
- TG has been shown to improve patient access with high levels of patient and provider satisfaction, and reduce barriers such as cost, wait time, and travel
- In 2017, there was a diverse group of TG programs already in existence in the region, and a large number of providers with interest in implementing TG
- In 2020, TG proved critical to providing care during the pandemic and beyond



VIDEO CONFERENCING
Live, two-way interaction between a person and a provider using an electronic platform similar to Skype or Facetime.

STORE AND FORWARD
Receive an evaluation and treatment recommendations from a genetic specialist based on pre-recorded health history that you've prepared with your child's primary provider.

REMOTE MONITORING
A local provider monitors your child's health status and behaviors and transfers information to a genetic specialist to assist in providing care to your child.

MOBILE HEALTH
Exchange text messages or video conferencing with a genetic provider through a secure application on your mobile device.

WHY IS IT IMPORTANT?

Telegenetics **improves access** to genetics services and helps reduce the effects of common barriers to care such as distance, time, childcare, mobility challenges, and transportation.

Did you know?

In many parts of the United States, families have to **drive over 50 miles** to see a genetic specialist for their child.

✓ POTENTIAL BENEFITS

- ↓ Less travel time ↓ Less cost
- ↓ Less wait time ↓ Less distance
- ↑ Increased # of Available Providers
- ↑ More Access to Early Detection
- ↑ Increased Patient Satisfaction

- El objetivo de NYMAC = **ampliar el acceso** a servicios genéticos de calidad
Se ha demostrado que la TG mejora el acceso del paciente con altos niveles de satisfacción del paciente y del proveedor, y reduce las barreras, como **el costo, el tiempo de espera y los viajes**.
En 2017, ya existía un grupo diverso de programas de TG en la región, y un gran número de proveedores interesados en implementar la TG.
En 2020, la TG demostró ser fundamental para brindar asistencia durante la **pandemia y en adelante**.

Poll: Changing Landscape

Encuesta: Paisaje cambiante

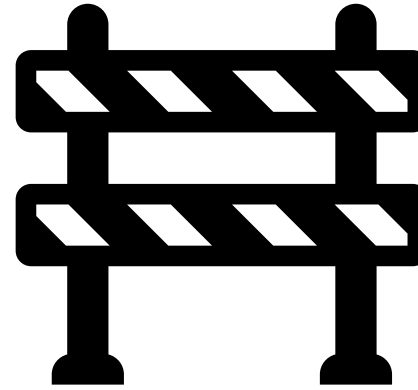
- In your experience, are there services that you used to provide OR receive by telehealth that you are no longer able to do by telehealth?



- En su experiencia, ¿hay servicios que solía proporcionar O recibir por telesalud que ya no puede hacer por telesalud?

Poll: For you, What are the top 3 barriers to the use of telehealth for genetics?

**Encuesta:
¿Cuál es la principal barrera para el uso de la telesalud?**



- Confusion around changes in telehealth rules over time
 - Licensure/legal issues
 - Funding/billing/reimbursement
 - Lack of appropriate technology
 - Workflow/logistical issues
 - Lack of patient interest
 - Lack of provider interest
 - Lack of institutional support
 - Limitation of the psychosocial interaction or a physical exam when using TH
 - Other (share in chat)
- Confusión en torno a los cambios en las reglas de telesalud a lo largo del tiempo
 - Licencias/cuestiones legales
 - Financiación/facturación/reintegros
 - Falta de tecnología apropiada
 - Problemas logísticos/de flujo de trabajo
 - Falta de interés del paciente
 - Falta de interés de los proveedores
 - Falta de apoyo institucional
 - Limitación de la interacción psicosocial o de un examen físico cuando se utiliza telesalud
 - Otros (compartir en el chat)

NYMAC TG Success Stories

Historias de éxito de NYMAC TG

Telegenetics Navigation:

167+ providers

Navegación telegenética:

más de 167 proveedores



Telegenetics Training:

109 people

Capacitación

en telegenética:

108 personas



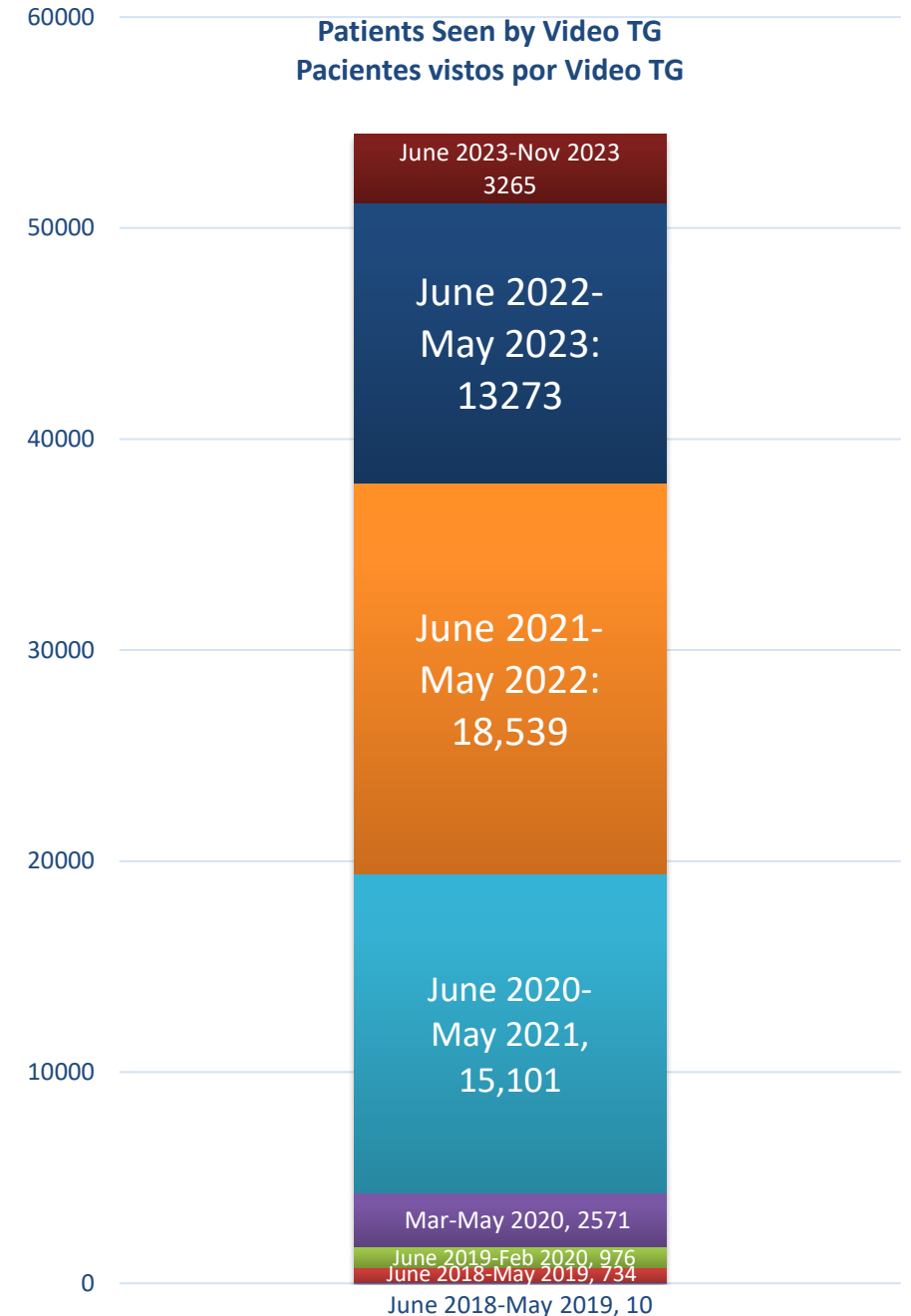
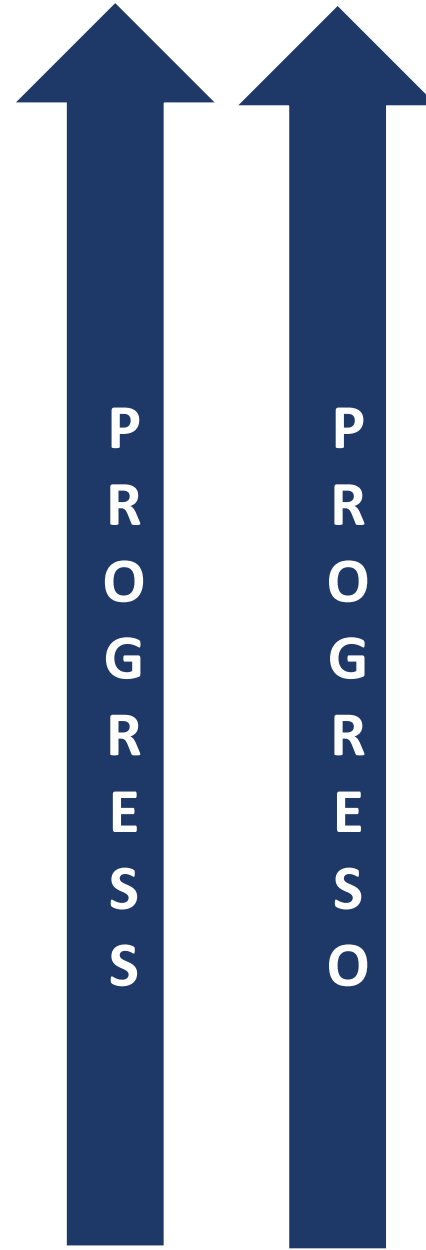
14 funded TG programs

- Large increases in program planning score
- ~40,000 pts seen by TG
- TG collaborations in PR and VI ongoing

14 programas de TG financiados

- Grandes aumentos en el puntaje de planificación del programa
- Alrededor de 40.000 pacientes vistos por TG

Colaboraciones de TG en PR y VI en curso



Resources from the RGN system

Recursos del sistema RGN

- SERN: TM Workgroup and Overview
- Midwest: Patient TM Videos
- Western States: Best Practices Video, What to Expect Video, Sample Consent, Tech Factsheet, Online Resources, TG Training
- Family Center: TG Infographic
- NCC: Resource Repository, TG Workgroup, TG Operating Procedures

- SERN: Grupo de trabajo de MT y descripción general
- Centro de Estados Unidos: Videos de TM para pacientes
- Estados del oeste: Video sobre las mejores prácticas, video sobre qué esperar, muestra de consentimiento, ficha técnica, recursos en línea, capacitación en TG
- Centro Familiar: Infografía sobre TG
- NCC: Repositorio de recursos, Grupo de trabajo de TG, Procedimientos operativos de TG

<https://southeastgenetics.org/starting-a-telegenetics-clinic/>

SERN SOUTHEAST REGIONAL GENETICS NETWORK

About For Families For Professionals State Resources News Events Contact

Starting a Telegenetics Clinic

Are you thinking about starting a telegenetics clinic? Have you started a telegenetics clinic and are looking for ways to sustain it? If so, there are several things to consider. Here you will find a general overview and steps to help you on the journey of starting a telegenetics clinics and ways to sustain your clinic. This is not an exhaustive list, these are just example and resources for you to use.

<https://nccrcg.org/telegenetic/>

NCC

Resources

Browse and explore resources developed by the NCC, RGNs, and Family Center to increase access to quality genetic services for medically underserved populations.

<https://nccrcg.org/wp-content/uploads/Telewhat-Infographic.pdf>

Expecting Health FAMILY VOICES®

TELEWHAT?

An introduction to Telegenetics

WHAT IS IT?
A Telegenetics visit is similar to an in-person genetics clinic visit. The genetics provider will ask you questions about medical history and family history. The specific things that happen during a Telegenetics visit depend on why you or your family member were referred for genetic services, and whether this is your first time seeing a genetics provider or a follow-up appointment. Sometimes a physical exam might be needed, in which case a local healthcare provider may help. Your genetics provider may also suggest some genetic testing.

WHY IS IT IMPORTANT?
Telegenetics improves access to genetics services and helps reduce the effects of common barriers to care such as distance, time, childcare, mobility challenges, and transportation.

Did you know?
In many parts of the United States, families have to drive over 50 miles to see a genetic specialist for their child.

POTENTIAL BENEFITS

- Less travel time ↓ Less cost
- Less wait time ↓ Less distance
- Increased # of Available Providers
- More Access to Early Detection
- Increased Patient Satisfaction

HOW DOES IT WORK?
A Telegenetics visit is usually 30 – 60 minutes and involves using videoconferencing with a computer, phone, or tablet, either from a provider's office near you or your own home to connect with a genetics specialist located somewhere else for a clinic visit. The four main types of Telegenetics appointments are:

- VIDEO CONFERENCING**
Live, two-way interaction between a person and a provider using an electronic platform similar to Skype or Facetime.
- STORE AND FORWARD**
Receive an evaluation and treatment recommendations from a genetic specialist based on pre-recorded health history that you've prepared with your child's primary provider.
- REMOTE MONITORING**
A local provider monitors your child's health status and behaviors and transfers information to a genetic specialist to assist in providing care to your child.
- MOBILE HEALTH**
Exchange text messages or video conferencing with a genetic provider through a secure application on your mobile device.

<https://midwestgenetics.org/resources/telemedicine-resources/>

An Introduction to Health Care Through Telemedicine
Part 1 of 3
Midwest Genetics Network
Region 4

<https://www.westernstatesgenetics.org/telegenetics/>

SRGN
Western States Regional Genetics Network

TELEHEALTH RESOURCES

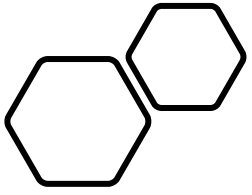
Infographic illustrating telehealth resources: Video Conferencing, Store and Forward, Remote Monitoring, and Mobile Health.

Telehealth Resources from Other Organizations

- **Telehealth Resource Centers:** <https://telehealthresourcecenter.org/>
- **NSGC: SIG, workgroup, guidelines, webinars, conference content**
- **ACMG: publications, conference content, webinars, education modules**
- **The Family Center:** <https://expectinghealth.org/sites/default/files/inline-files/Telehealth%20and%20Telegenetics%20Resources.pdf>
- **Family Voices:** <https://familyvoices.org/telehealth/>
- **American Telemedicine Association (ATA):** <https://www.americantelemed.org/>
- **State/Regional Telehealth Groups**
- **American Medical Association (AMA):** <https://www.ama-assn.org/practice-management/digital/ama-quick-guide-telemedicine-practice>
- **American Academy of Pediatrics (AAP)**
 - <https://www.aap.org/en-us/professional-resources/practice-transformation/telehealth/Pages/What-is-Telehealth.aspx>
 - <https://services.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/aap-guidance-telehealth-payer-policy-in-response-to-covid-19/>

Recursos de telesalud de otras organizaciones

- **Centros de recursos de telesalud:** <https://telehealthresourcecenter.org/>
- **NSGC: SIG, grupo de trabajo, directrices, seminarios web, contenido de la conferencia**
- **ACMG: publicaciones, contenido de conferencias, seminarios web, módulos educativos**
- **Centro de la Familia:** <https://expectinghealth.org/sites/default/files/inline-files/Telehealth%20and%20Telegenetics%20Resources.pdf>
- **Family Voices:** <https://familyvoices.org/telehealth/>
- **Asociación Americana de Telemedicina (ATA):** <https://www.americantelemed.org/>
- **Grupos de telesalud estatales/regionales**
- **Asociación Médica Americana (AMA):** <https://www.ama-assn.org/practice-management/digital/ama-quick-guide-telemedicine-practice>
- **Academia Americana de Pediatría (AAP)**
 - <https://www.aap.org/en-us/professional-resources/practice-transformation/telehealth/Pages/What-is-Telehealth.aspx>
 - <https://services.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/aap-guidance-telehealth-payer-policy-in-response-to-covid-19/>



The Family Experience

La experiencia
familiar

**The Family
Experience**

**La experiencia
familiar**



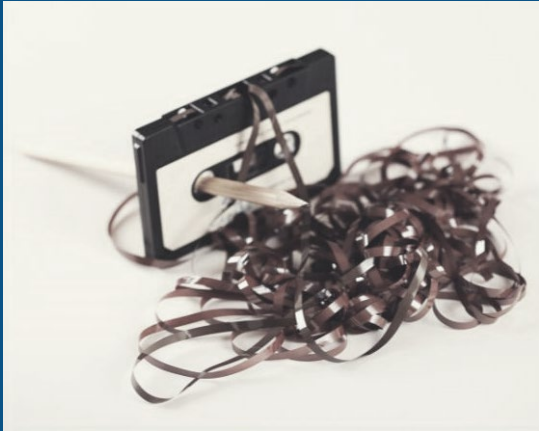


SOUTHEASTERN
telehealth
RESOURCE CENTER



Telehealth Resource Centers

Centros de
recursos de
telesalud



Telehealth Policy: Overview of the Unwinding of the PHE

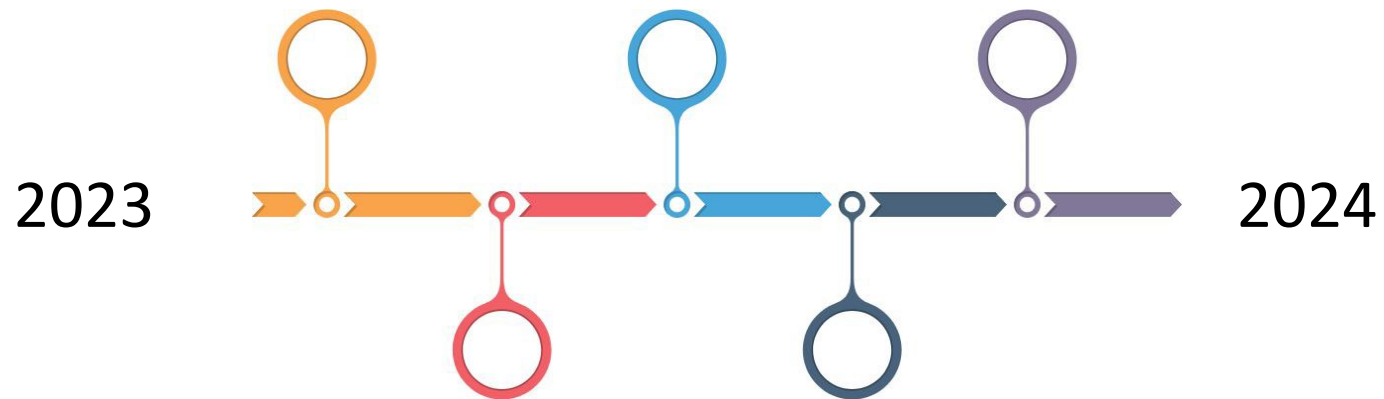
Política de Telesalud:
Descripción general sobre cómo
destensar la emergencia de salud pública

Moving



Objetivo en
movimiento

Target



Policies Unwound

The following waivers and flexibilities have ended:

- Beneficiary Co-payments and Deductibles Associated with Telehealth & Virtual Services
- Stark and Other Financial Arrangement Laws
- HIPAA Enforcement Discretion
- Hospital without Walls

Políticas eliminadas

Finalizaron las siguientes exenciones y flexibilidades: :

- Copagos y deducibles del beneficiario asociados con telesalud y servicios virtuales
- Stark y otras leyes de acuerdos financieros
- Discreción de cumplimiento de HIPAA
- Hospitals Without Walls (servicios de asistencia médica a domicilio)



Policies Made Permanent

The following waivers and flexibilities have been made permanent:

- Hospital without Walls for Mental/Behavioral Health Services
- Removal of Geographic and Originating Site Requirements for Mental/Behavioral Health Services
- Mental Health Counselors and Marriage and Family Therapists as Eligible Telehealth Providers
- FQHCs and RHCs as Eligible Distant Site Providers for Mental/Behavioral Health Services
- Audio only for Mental/Behavioral Health in Certain Situations (provider has technical capability to provide interactive video, but patient is incapable or fails to give consent for video and patient is located at home)

Políticas permanentes



The following waivers and flexibilities have been made permanent:

- Exenciones y flexibilidades que son permanentes
- Hospital without Walls para servicios de salud mental/conductual
- Eliminación de requisitos geográficos y de lugar de origen para servicios de salud mental/conductual
- Consejeros de salud mental y terapeutas matrimoniales y familiares como proveedores de telesalud elegibles
- FQHC y RHC como proveedores de sitios distantes elegibles para servicios de salud mental/conductual
- Audio solo para salud mental/conductual en determinadas situaciones (el proveedor tiene la capacidad técnica para proporcionar video interactivo, pero el paciente no puede o no da su consentimiento para el video y el paciente se encuentra en su casa)

Policies In Process

Políticas en proceso



The following waivers and flexibilities are still trying to find their sweet spot:

Todavía se trata de encontrar el punto ideal de las siguientes exenciones y flexibilidades:

- **Ryan Haight Act of 2008 and Telemedicine Rules for Prescribing Controlled Substances**

Ley Ryan Haight de 2008 y normas de telemedicina para recetar sustancias controladas

- The DEA received a record 38,369 public comments
- *La DEA recibió un récord de 38.369 comentarios públicos*
- Instead of taking effect when the PHE ended on May 11, 2023, the PHE flexibilities were extended through November 11, 2023.
- *En lugar de entrar en vigor cuando finalizó la emergencia de salud pública el 11 de mayo de 2023, las flexibilidades se extendieron hasta el 11 de noviembre de 2023.*
- Any practitioner-patient telemedicine relationships established on/before November 11, 2023 will be permitted to continue under the PHE flexibilities through November 11, 2024
- *Cualquier relación de telemedicina entre médico y paciente establecida antes del 11 de noviembre de 2023 podrá continuar según las flexibilidades de la emergencia de salud pública hasta el 11 de noviembre de 2024.*

Announced February 24, 2023

Anunciado el 24 de febrero de 2023

| Relationship between prescribing medical practitioner and patient | Prescribing a non-controlled medication | Prescribing Schedule III, IV, or V non-narcotic controlled medications | Prescribing buprenorphine as medication for opioid use disorder | Prescribing Schedule II and/or narcotic controlled medications |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|-------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|
| Prior in-person medical evaluation by prescribing medical practitioner | Permitted | Permitted | Permitted | Permitted |
| Referral under the proposed rules from medical practitioner who conducted prior in-person medical evaluation | Permitted | Permitted | Permitted | Permitted |
| Telehealth visit without: <ul style="list-style-type: none"> • Prior in-person medical evaluation by prescribing medical practitioner; or • Referral from a medical practitioner who conducted prior in-person medical evaluation | Permitted | <ul style="list-style-type: none"> • In-person visit required for initial prescription | <ul style="list-style-type: none"> • In-person visit required for initial prescription | Not permitted |



Policies Still Unwinding

The following waivers and flexibilities will expire December 31, 2024:

- Geographic and Originating Site Requirements
- FQHCs and RHCs as Eligible Distant Site Providers
- Audio-only for E/M and Educational Services
- In-person Requirement for Telemental Health Services (patient had to have been seen in-person within 6 months and must be seen in-person every 12 months)
- Use of Telehealth for Hospice Care Eligibility Recertification
- PTs, OTs, SLPs and Audiologists as Eligible Telehealth Providers
- Coverage of Category 3 Services
- Remote Supervision of Residents by Teaching Physicians

Las políticas aún se están eliminando

Las siguientes exenciones y flexibilidades vencerán el 31 de diciembre de 2024

- Requisitos geográficos y del lugar de origen
- FQHC y RHC como proveedores de sitios distantes elegibles
- Solo audio para E/M y servicios educativos
- Requisito presencial para servicios de salud telemental (el paciente debe haber sido atendido en persona dentro de los últimos 6 meses y atendido en persona cada 12 meses)
- Uso de telesalud para recertificar la elegibilidad para recibir cuidados paliativos
- PT, OT, SLP y audiólogos como proveedores de telesalud elegibles
- Cobertura de servicios de categoría 3
- Supervisión remota de residentes por parte de médicos docentes



Cybersecurity

What is Cybersecurity?

- Cybersecurity is the **practice of protecting** systems, networks, and programs from digital attacks. (Cisco)
- Cybersecurity refers to any technology, measure or practice for **preventing** cyberattacks or **mitigating** their impact. (IBM)
- Cyber security is the **practice of defending** computers, servers, mobile devices, electronic systems, networks, and data from malicious attacks. (Kaspersky)
- The practice of **being protected against** the criminal or unauthorized use of electronic data, or the measures taken to achieve this. (CompTIA)

Ciberseguridad

¿Qué es la ciberseguridad?

- La ciberseguridad es la **práctica de proteger** sistemas, redes y programas de ataques digitales. (Cisco)
- La ciberseguridad se refiere a cualquier tecnología, medida o práctica para **prevenir** ataques cibernéticos o **mitigar** su impacto. (IBM)
- La ciberseguridad es la **práctica de defender** computadoras, servidores, dispositivos móviles, sistemas electrónicos, redes y datos de ataques maliciosos. (Kaspersky)
- La práctica de **estar protegido contra** el uso delictivo o no autorizado de datos electrónicos, o las medidas adoptadas para lograrlo. (CompTIA)



Cybersecurity

Forms of cyberattacks?

- **Malware** is malicious code or malicious software.
- **Ransomware** is malware designed to use encryption to force the target of the attack to pay a ransom demand. Ransomware enters computer networks and encrypts files using public-key encryption. Unlike other malware, this encryption key stays on the cyber criminal's server. Cyber criminals will request ransom for this private key. Cyber criminals are using encryption as a weapon to hold the data hostage.
- **Spam** includes unwanted, unsolicited, or undesirable messages and emails.
- **Phishing** is attempts to get sensitive information. Phishing attempts will appear to be from a trustworthy person or business.

Ciberseguridad

¿Formas de ciberataques?

- El **malware** es un código malicioso o software malicioso.
- El **ransomware** es un malware diseñado para utilizar cifrado para obligar al objetivo del ataque a pagar una demanda de rescate. El ransomware ingresa a las redes informáticas y cifra archivos mediante cifrado de clave pública. A diferencia de otros programas maliciosos, esta clave de cifrado permanece en el servidor del ciberdelincuente. Los ciberdelincuentes solicitarán un rescate por esta clave privada. Los ciberdelincuentes usan el cifrado como arma para mantener los datos como rehenes.
- El **spam** incluye mensajes y correos electrónicos no deseados, no solicitados o indeseables.
- El **phishing** consiste en intentar obtener información confidencial. Los intentos de phishing parecerán provenir de una persona o empresa confiable.



Cybersecurity

Why is it important?

- Ransomware attacks on healthcare organizations have cost the U.S. economy nearly \$80 billion in downtime.
- According to a cybersecurity advisory published by the Cybersecurity and Infrastructure Security Agency, most of its 70 victims since December have come from the healthcare industry. And most recently, the FBI said the group's administrator encouraged affiliates to attack hospitals after the FBI infiltrated its operations in December.

Ciberseguridad

¿Por qué es importante?

- Los ataques de ransomware a organizaciones sanitarias le han costado a la economía estadounidense casi 80 mil millones de dólares en tiempo de inactividad.
- Según un aviso de ciberseguridad publicado por la CISA (Agencia de Seguridad de Infraestructura y Ciberseguridad), la mayoría de sus 70 víctimas desde diciembre provienen de la industria de la salud. Hace poco, el FBI dijo que el administrador del grupo alentó a sus afiliados a atacar hospitales después de que el FBI se infiltrara en sus operaciones en diciembre.



Cybersecurity

Why is it important?

- **Hackers behind Change Healthcare breach get \$22M**
 - UnitedHealth Group
 - BlackCat claimed it stole 6 terabytes of data from Change, including medical records and Social Security numbers.
- Most recently, Rhysida listed Chicago-based Lurie Children's on its extortion site on the dark web and is trying to offload the stolen data from the health system for 60 bitcoins, or just over \$3.4 million.

Ciberseguridad

¿Por qué es importante?

- **Los piratas informáticos detrás de la violación de Change Healthcare obtienen 22 millones de dólares**
 - Grupo UnitedHealth
 - BlackCat afirmó que robó 6 terabytes de datos de Change, incluidos registros médicos y números de seguro social.
- Más recientemente, Rhysida incluyó a Lurie Children's, con sede en Chicago, en su sitio de extorsión en la web oscura y está tratando de descargar los datos robados del sistema sanitario por 60 bitcoins, o poco más de 3,4 millones de dólares.



Insurance Broker Data Breach Impacts 1.5M Individuals

January 31, 2024 by Jill McKeon

Insurance brokerage company Keenan & Associates recently notified more than 1.5 million individuals of a data breach. Keenan provides insurance and risk management solutions for schools, colleges,...

PJ&A Data Breach Fallout Continues, 4M Additional Individuals Impacted

January 30, 2024 by Jill McKeon

Concentra Health Services filed a data breach report with HHS in January tied to a previously reported breach at Perry Johnson & Associates (PJ&A), a medical transcription company....

Mississippi Health System Suffers Ransomware Attack, 253K Individuals Impacted

January 24, 2024 by Jill McKeon

Singing River Health System in Mississippi suffered a ransomware attack in August 2023 that resulted in a data breach. The breach impacted 252,890 individuals in total, according to a notice provided...

Healthcare Data Breaches Continue to Impact Patients in New Year

January 22, 2024 by Jill McKeon

In 2023, more than 540 organizations reported healthcare data breaches to HHS, impacting upwards of 112 million individuals. As the new year begins, the aftermath of 2023 breaches continues to...

LockBit Ransomware Claims Capital Health Cyberattack

January 09, 2024 by Jill McKeon

Capital Health has restored all systems and operations in the wake of a November 2023 cyberattack that caused a network outage, it assured patients in a recent update. However, LockBit ransomware has...

North Kansas City Hospital Impacted By PJ&A Data Breach

January 08, 2024 by Jill McKeon

Missouri-based North Kansas City Hospital (NKCH) and its transcription subsidiary, Meritas Health Corporation, recently notified more than 500,000 individuals of a third-party data breach stemming from...

Fallon Ambulance Service Data Breach Impacts 911K Individuals

January 02, 2024 by Jill McKeon

Fallon Ambulance Service, a medical transportation company that served the greater Boston area, reported a data breach that impacted more than 911,000 individuals. Fallon was a subsidiary of...

La violación de datos de los corredores de seguros afecta a 1,5 millones de personas

Las consecuencias de la filtración de datos de PJ&A continúan y 4 millones de personas más se ven afectadas

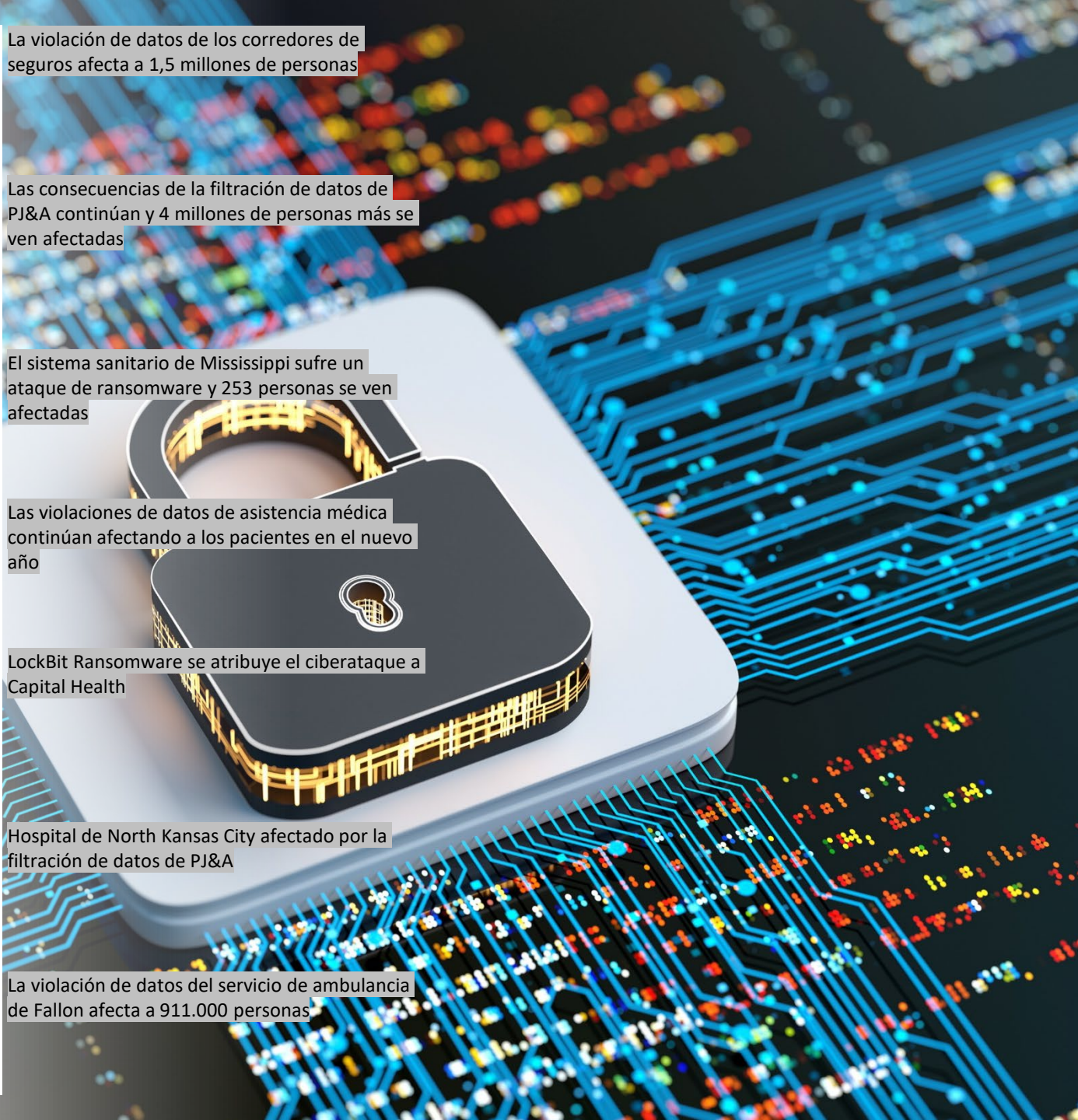
El sistema sanitario de Mississippi sufre un ataque de ransomware y 253 personas se ven afectadas

Las violaciones de datos de asistencia médica continúan afectando a los pacientes en el nuevo año

LockBit Ransomware se atribuye el ciberataque a Capital Health

Hospital de North Kansas City afectado por la filtración de datos de PJ&A

La violación de datos del servicio de ambulancia de Fallon afecta a 911.000 personas



4 Things to Keep You Cyber Safe

Cuatro medidas para mantener la seguridad cibernética



Turn on Multifactor Authentication

Implement [multifactor authentication](#) on your accounts and make it significantly less likely you'll get hacked.
Activa la autenticación multifactor

Implementa la autenticación multifactor en tus cuentas y reduce la probabilidad de que te pirateen.



Update Your Software

Update your software. In fact, turn on automatic updates.

Actualiza tu software
Actualiza tu software. De hecho, activa las actualizaciones automáticas.



Think Before You Click

Think before you click. More than 90% of successful cyber-attacks start with a phishing email.

Piensa antes de hacer clic

Piensa antes de hacer clic. Más del 90% de los ciberataques exitosos comienzan con un correo electrónico de phishing.



Use Strong Passwords

Use strong passwords, and ideally a password manager to generate and store unique passwords.

Usa contraseñas seguras

Usa contraseñas seguras e, idealmente, un administrador de contraseñas para generar y almacenar contraseñas únicas.

Ensuring Digital Equity & Inclusion in Telehealth

*Garantizar la equidad e
inclusión digitales en la
telesalud*

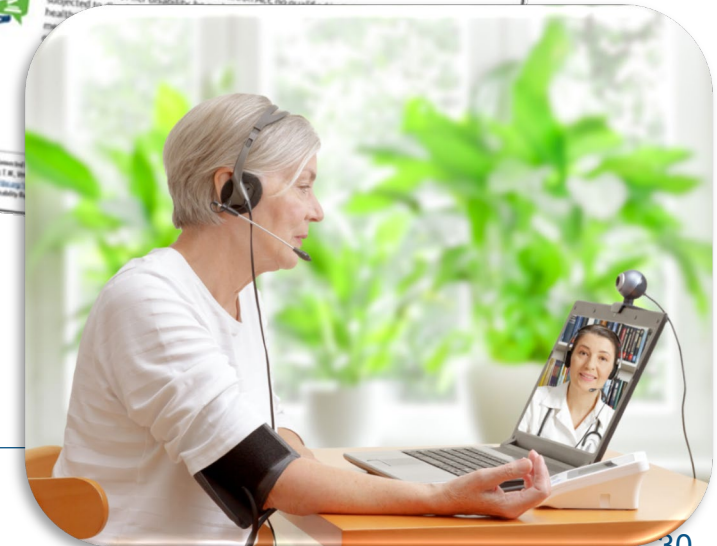


Digital Equity = Health Equity

Equidad digital = Equidad en salud



John Daley, director of island health services at Maine Seacoast Mission, walks to the Sunbeam, the Maine Seacoast Mission's largest motorboat last month. (File Photo/Contributor for The Washington Post)



Universal Considerations for Clients/Patients

Consideraciones universales para clientes/pacientes

- Do they have equipment: smart phone, laptop, tablet, camera, speaker, etc.?
¿Tienen equipo: teléfono inteligente, computadora portátil, tableta, cámara, parlante, etc.?
- Do they need adaptive devices and/or software solutions?
¿Necesitan dispositivos adaptativos o soluciones de software?
- Do they have reliable internet?
¿Tienen internet confiable?
- Are they worried about using their wireless data plans?
¿Les preocupa el uso de sus planes de datos inalámbricos?
- Familiarity with telehealth?
¿Están familiarizados con la telesalud?
- Any concerns with confidentiality or privacy?
¿Tienen alguna inquietud con respecto a la confidencialidad o la privacidad?
- Are there any language barriers?
¿Existen barreras idiomáticas?



Promoting Equity and Inclusion:

Promoción de la equidad y la inclusión:



- 1) Take inventory** – does your telehealth space/setup meet basic accessibility requirements for people with disabilities?
- 2) Consider compatibility of assistive technology** (e.g. alternative keyboards) used by visitors and whether they can work effectively with various telehealth modalities.
- 3) Learn about and incorporate** accessibility features (e.g. Communication Access Real-time Translation (CART) Captioning built into video conferencing platforms or provided via separate weblink).
- 4) Consider** important role a **patient's caregiver, family member, or health aide** may play during the telehealth visit.
- 5) Increase** your knowledge/awareness related to **cultural competency and linguistic sensitivity**.

Source: American Psychological Foundation Fact Sheet (2013)

- 1) Haz un inventario.** ¿Tu espacio/instalación de telesalud cumple con los requisitos básicos de accesibilidad para personas con discapacidad?
- 2) Considera la compatibilidad de la tecnología de asistencia** (por ejemplo, teclados alternativos) usada por los visitantes y si pueden trabajar de manera efectiva con diversas modalidades de telesalud.
- 3) Conozca e incorpore** funciones de accesibilidad (por ejemplo, subtítulos de traducción en tiempo real (CART) de acceso a la comunicación integrados en plataformas de videoconferencia o proporcionados a través de un enlace web independiente).
- 4) Considera** la función importante que puede desempeñar **el cuidador, el familiar o el asistente de salud** del paciente durante la visita de telesalud.
- 5) Amplía** tu conocimiento/conciencia relacionado con la **competencia cultural y la sensibilidad lingüística**.

Source: American Psychological Foundation Fact Sheet (2013)





Promoting Equity and Inclusion: Promoción de la equidad y la inclusión:

6) **Contact or survey patients/community members with disabilities**

about their accessibility requiremen

7) **Develop understanding** that if

accommodations that provide ef

truly participate in an equal conv

carry out orders as prescribed an

8) **Allow accommodations requere**

means, and confirm to the end u

secured.

9) Provide an alternative way for

provider if communication accom

or email).

10) **Allow end users to provide f**

accessibility. Provide a follow up

accessibility and use feedback to

Source: American Psychological Founda

6) **Contacto o encuesta a pacientes/miembros de la comunidad con**

cesibilidad. ¡No asumas que un único

nta con las adaptaciones adecuadas

no puede participar de verdad en una

encia, no puede cumplir plenamente las

dar un consentimiento válido.

ión se haga a través de medios fáciles de

daptación haya sido asegurada.

ara que el paciente se comunique con el

nicación no funcionan (por ejemplo,

agan comentarios de la cita sobre

seguimiento que pregunte

y usa los comentarios para realizar

act Sheet (2013)



A Few Key Resources Algunos recursos clave



[National Digital Equity Center/Centro Nacional de Equidad Digital](#)

[National Digital Inclusion Alliance/Alianza Nacional de Inclusión Digital](#)

[HHS Telehealth Webpage for Patients/Consumers / Página web de telesalud del HHS para pacientes/consumidores: <https://telehealth.hhs.gov/patients/>](#)

[TRC and Other Consumer Resources: /TRC y otros recursos para el consumidor:](#)

Mid-Atlantic TRC – [Digital Inclusion and Broadband page/Página de Inclusión Digital y Banda Ancha](#)

[How Patients Can Engage Telehealth](#), [Telebehavioral Health](#), [Tips to Keep Your Telehealth Visit Private](#), [Downloadable Tech Guides](#), Virtual Healthcare for Patients/Consumers [Cómo los pacientes pueden participar en la telesalud](#), [salud teleconductual](#), [consejos para mantener privada su visita de telesalud](#), [guías técnicas descargables](#), [asistencia médica virtual para pacientes/consumidores](#)

[Devices/Connectivity:/Dispositivos/Conectividad:](#)

FCC [Lifeline Program](#) and FCC [Affordable Connectivity Program \(ACP\)/Programa de conectividad asequible](#)

- ACP Wind-Down [Fact Sheet / Hoja de información básica](#)
- ACP Wind-Down [Frequently Asked Questions \(FAQs\)/Preguntas frecuentes](#)
- ACP/Lifeline [FAQs/Preguntas frecuentes](#)

[iCanConnect](#) - National Deaf-Blind Equipment Distribution Program

[Telehealth Access for Seniors/Acceso a telesalud para personas mayores](#)



A Few More Resources

Algunos recursos más

- [North Carolina DHHS Telehealth Guidance and Resources: Communication Access for Deaf, Hard of Hearing and DeafBlind Patients and their Providers](#)
- Orientación y recursos de telesalud del Departamento de Salud y Servicios Humanos de Carolina del Norte: acceso a la comunicación para pacientes con sordera, problemas de audición y sordoceguera y sus proveedores
- [National Consortium of TRCs - Telehealth and Disabilities: Recommendations for Providers](#)
- Consorcio Nacional de TRC - Telesalud y Discapacidad: Recomendaciones para proveedores
- [WHO-ITU Global Standard for Accessibility of Telehealth Services](#)
- Estándar mundial OMS-UIT para la accesibilidad de los servicios de telesalud
- [APA/SAMHSA Tip Sheets - How to Prepare for Video Appointments with Your Mental Health Clinician: English and Spanish.](#)
- Hojas de consejos de APA/SAMHSA: cómo prepararse para las citas por video con su médico de salud mental, disponible en inglés y español



Deaf

Guidance and resources for Deaf patients.



Hard of Hearing

Guidance and resources for Hard of Hearing patients.



DeafBlind

Guidance and resources for DeafBlind patients.

Professional Guidance



Healthcare Providers

Guidance and resources for Healthcare Providers.



Interpreters

Guidance and resources for Interpreters.



How to Prepare for a Video Appointment with Your Mental Health Clinician

Many mental health clinicians now offer appointments via video. A video session allows you to access care even if you cannot visit your provider.

Before the Day of Your Appointment

- 1 Identify a private location for your appointment**
This should be a place where you can be alone and not interrupted for the duration of your appointment. Ideally, find a place with good lighting so your clinician can see you. This might be a room that could even be in your car.
- 2 Check your technology**
Consider what technology you will use for the video session. This might be your computer, mobile phone. Be sure you know how to work the camera and the volume. Check to ensure location for your video session has a strong internet connection. Ask your clinician if they need to install any apps on your device in advance. Ask how you will receive a link to the video session and do a test with your provider to ensure it works.
- 3 Organize Billing Details**
Check with the office staff about billing in advance of your appointment. Have your insurance information ready and ask about any co-pays.
- 4 Prepare your thoughts**
Think about what you want to discuss with your provider. Make notes if that helps you.

Telehealth & Disability: RECOMMENDATIONS FOR PROVIDERS

Tips When Treating Patients who are Deaf or Have Hearing Loss

- 1) Provide remote interpretation services or communication access real-time translation (CART) services, if requested.¹⁰
- 2) If the patient is hard of hearing, ensure the patient has access to headphones or a headset.
- 3) Consider sending an amplification device to patients for use during their telehealth appointment.
- 4) Use video to allow lip reading and provide visual clues like gestures.
- 5) Send PDFs of all written materials prior to the appointment and written aftercare instructions post appointment.
- 6) Understand that ASL and English are not the same; English is not a first language for many Deaf patients.
- 7) Use a quality microphone or headset such as a boom mic.
- 8) Avoid wearing facemasks, however, if necessary, use a clear mask.

Tips When Treating Patients who are Blind or Have Vision Loss

- 1) Be aware of your background. There needs to be contrast between you and your background. Blurring the background may make it challenging for the patient.
- 2) Ensure lighting is bright enough in order for the patient to clearly see your face.
- 3) Include simplified and enlarged text.
- 4) Ensure patient has a computer-screen reading program for transmission of electronic information.
- 5) If possible, provide an audio recording of printed information provided during the appointment.¹¹

Tips When Treating Patients with Physical/Developmental Disabilities¹²

- 1) You may need to work directly with the patient in their home if the goal is to provide ongoing care via telemedicine.
- 2) Consider consulting with certified assistive technology professionals or rehabilitation engineers to develop tools for the patient to interact with required technologies.

Preparación para el encuentro

Un lugar donde pueda estar en privado al momento de su encuentro. Idealmente sería un lugar donde pueda estar solo y sin interrupción durante el encuentro. Si es posible, asegurese de que el lugar elegido tenga buena iluminación para la calidad del video. Puede ser una habitación en su casa o incluso, un vehículo.

Organice los detalles de la facturación

Verifique con la oficina sobre la facturación antes del encuentro. Tenga su información de seguro médico lista y pregúntele sobre cargos del encuentro.

Prepare sus pensamientos

Debería pensar en qué va a hablar con su médico clínico. Tener notas preparadas es una buena estrategia, si le ayuda.



ADA and Accessible Healthcare

ADA y asistencia médica accesible

ADA National Network

1-800-949-4232 (voice/TTY/relay)

- Information, guidance and training to “make it possible for everyone with a disability to live a life of freedom and equality.”
- Customized regional and national trainings on the ADA
- **Accessible Health Care** - www.adata.org/factsheet/accessible-health-care
- **Health Care and the ADA** - www.adata.org/factsheet/health-care-and-ada
- **ADANN Webinar Series: Health Care and the ADA - Inclusion of Persons with Disabilities** - www.adapresentations.org/healthcare/schedule.php

ADA National Network

1-800-949-4232 (voice/TTY/relay)

- Información, orientación y formación para que todas las personas con discapacidad vivan una vida en libertad e igualdad
- Capacitaciones regionales y nacionales personalizadas sobre la ADA
- Asistencia médica accesible - www.adata.org/factsheet/accessible-health-care
- Asistencia médica y la ADA - www.adata.org/factsheet/health-care-and-ada
- Serie de seminarios web de ADANN: Asistencia médica y ADA: inclusión de personas con discapacidades - www.adapresentations.org/healthcare/schedule.php



QUESTIONS?

¿PREGUNTAS?



THANK YOU!!

¡GRACIAS!

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