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Telehealth Services

1- Introduction:

Patient and community safety is always top priority for the Dubai Health Authority. This policy directive aims to inform that throughout the effective dates of this circular, all payers may encourage and accept claims from DHA licensed medical facilities who have been licensed by DHA Health Regulation Sector, the Dubai Healthcare City Authority or any other applicable regulatory body to offer Telehealth services during the period of Covid 19.

2- Definitions / Key Terms:

2-1 Telehealth consultation:

Healthcare consultation carried out remotely using audio/visual telecommunications between clinical professionals and patient for various clinical specialties.

3- Purpose of Policy:

3-1 To advise the payers on requirement to cover telehealth services in view of current circumstance of Covid 19 pandemic, where patients are prohibited to visit hospitals (except for emergencies), and the possible need for patient requiring consultations.

4- Policy Objectives:

4-1 The objective is inform all payers to encourage and accept claims from DHA licensed medical facilities who have been licensed by DHA Health Regulation Sector, the Dubai Healthcare City Authority or any other applicable regulatory body who offer Telehealth services.

5- Scope:

5-1 To ensure continuity of treatment to the insured members in the Emirate of Dubai by informing and advising the payers to approve telehealth services provided by their network providers.

6- Policy Stakeholders:

6-1 Payers

6-2 Third Party Administrators

6-3 Healthcare providers

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7- Policy Implementation Required Resources:

Circulars issued by DHIC

8- Policy Content:

8-1 This directive does not mandate default inclusion of any telehealth providers licensed by DHA's Health Regulation Sector who is not part of any payers' network.

8-2 This directive applies to those network providers with whom the payers have not extended telehealth services previously should now be included. The objective is to reduce unnecessary patient visits to medical facilities where possible.

8-3 Chronic disease medication refills, psychology or psychiatry consultations, chemo/radiation consultations, primary healthcare are just some examples of consultations that could be conducted via telehealth services.

8-4 Providers have significantly reduced consultation charges to increase uptake of telehealth services by insured members.

9- Deployment Methodology: (Check all that apply)

Announcement

Awareness

Training

On Job Training

10- Policy Performance Indicators:

10-1 Claims under telehealth DSL codes in eclaimslink

10-2 Complaints raised in Ipromes for telehealth services denials

11- List of Risks:

11-1 Limited specialties providing teleconsultation

11-2 Prices negotiated for teleconsultations is a disincentive for healthcare providers to offer.

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12- Policy Revision/Update :

N/A

13- Audit, Improvement & Development:

13-1 Internal audit for compliance with the document content

13-1 Corrective actions for non-conformities with the document content

14- Records List*

14-1

15- Appendices *

15-1 References

Policy Directive Number 02 of 2020 (PD 02/2020)

<https://www.isahd.ae/content/docs/PD%2002-2020%20V2.pdf>

15-2 Attachments

Policy Directive Number 02 of 2020 (PD 02/2020)

N.B.: “*” Put “N/A” if there is nothing to write.

(the document) to be replaced by document title

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Revision History

S.	Summary	Amend Type*	Page	Issue No.	Issue Date
1	Telehealth Services	Modify		PD 02/2020	24-03-2020

* Amend Type: Add – Modify – Cancel

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