What is Telehealth?
Context for Framing Your Perspective

As state and federal policymakers, government agencies, insurers, practitioners, and consumers expanded the opportunities for telehealth, a wide range of terms and definitions have emerged. Unfortunately, there are very few universal definitions and many terms are interchangeable.

There are several general themes that can be used to describe your “telehealth initiative.”

Common Telehealth Definitions*

**Asynchronous Telehealth**

[...] is communication between providers, patients, and caregivers stored for future reference or response. Examples include:
- E-mail or text messages with follow-up instructions or confirmations
- Images for evaluation
- Lab results or vital statistics

**Remote Patient Monitoring**

[...] consists of transmitting and storing patient data and clinical measurements from in-home devices to patient portals. This data transmission may be either asynchronous or support synchronous provider visits. Examples include data from:
- Blood pressure monitors
- Glucose meters
- Pacemakers
- Oximeters

**Synchronous Care**

[...] is a ‘real-time’ interaction for patient health communication. Patients can have caregivers or in-home nursing present to assist the remote physician. Examples include:
- Video calls to share progress or check on healing
- Audio only calls to confirm instructions
- Text messaging to answer patient questions

**mHealth**

[...] is an evolving area where digital applications on smartphones can support patients between provider visits. Smartphones and third-party apps can assist with:
- Remote patient monitoring
- Push notifications reminding patients to follow treatment plans
- Storing detailed instructions or education materials

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The NCTRC acknowledges the various definitions of telehealth. The purpose of this fact sheet is to encompass all the varying ways to interpret telehealth rather than providing a hardline definition. For instance, a payer would view telehealth differently from an insurance company, yet the two are still intertwined. 3 important contexts are outlined to expand your perspective to see telehealth as an integrative tool that connects healthcare.

Understanding Telehealth from the Perspective That Applies To You

1. **TYPES OF TELEHEALTH TECHNOLOGY**

   There are four main categories of telecommunications technologies that are used for telehealth: synchronous, asynchronous, RPM**, and mHealth. What type of connection(s) will your telehealth program make?

   *Source: Health Resources and Services Administration (HRSA), "Getting Started with Telehealth" Telehealth.hhs.gov, May 19, 2021.

   **Remote Patient Monitoring (RPM) is a modality that monitors physiology and behavior to maintain best function in the least restrictive, least expensive, or most preferred environment.

2. **WHEN AND BETWEEN WHO?**

   **Real Time “Synchronous”**

   **Virtual Visit**
   - Video visit between provider and patient

   **Virtual Consult**
   - Video consult - provider to patient’s provider

   **Store and Forward “Asynchronous”**

   **eVisit**
   - Online exchange of medical info between provider & Patient

   **eConsult**
   - Consult between providers
Telehealth can be viewed from multiple perspectives. For example, a clinician and patient might focus on convenience and clinical effectiveness, while hospitals and insurers would might be more interested in utilization and meeting needs across an entire region. Each perspective is important, but none provides the entire picture.

**EACH PARTY COULD EMPHASIZE DIFFERENT ASPECTS OF TELEHEALTH IN A DEFINITION.**

Patient  I  Health System  I  Hospital  
Clinician  I  Community  I  Payer  I  Clinic

**WE DON’T HAVE TO USE THE SAME DEFINITION OF TELEHEALTH.**

Beginning in January 2019, CMS coined the term ‘Communication Technology-Based Services’ to encompass services delivered via telehealth modalities (including live video, telephone, and store-and-forward) that do not substitute for in-person services. Including:

- Brief communication technology-based service (or “virtual check-ins”)
- Remote evaluation of pre-recorded patient information
- Interprofessional internet consultation

**KEY QUESTIONS TO ASK:**
As you look to describe your telehealth initiative, consider these questions:

- Who is providing and receiving the service?
- Is it a clinical service, a professional consultation, or an education/training?
- In what context is the service being provided?
- Is it in a hospital, clinic, patient’s home/residence, or other facilities?
- Is it synchronous or asynchronous?
- What type of technology is being used?
- How is the service funded? Is it billable to insurance or supported by some other arrangement?
- How does this service fit into any established definitions in your state laws, regulations, etc.

**FOUR CRITICAL DIFFERENTIATORS:**

1. Direct Patient services vs. other health-related activities
2. Live vs. Store and Forward (synchronous vs. asynchronous)
3. Clinic or hospital-based vs. direct to consumer
4. Billable (direct or monthly) vs. Patient Self-pay vs. unbillable value generation

Learn more about telehealth at www.telehealthresourcecenter.org

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