

Jeremy Quesnelle, Deputy Registrar
College of Naturopaths of Ontario
Via email to info@collegeofnaturopaths.on.ca

Submission of Comments on Proposed Telepractice Guideline

July 3, 2020

Dear Mr. Quesnelle,

The OAND much appreciates the opportunity to comment on CONO's proposed Telepractice Guideline. It is especially important now, in a time of hyper-awareness about infection control and prevention. More than ever, telepractice is an essential part of naturopathic medicine, when appropriate for the purpose of diagnosis and for the provision of patient care. We are in favour of the establishment of this new guideline, but have some specific concerns noted below.

Patient Records & Billing

The Guideline proposes to "Ensure that the patient records and billing receipts note that the visit was performed via telepractice." Of course, the patient records should include the type of visit, the patients consent to telepractice, etc., but I believe that the requirement to identify telepractice on billing receipts is an unnecessary burden that offers no additional protection to the patient or the general public, but creates additional challenges.

Insurance providers already allow and cover televisits. The OAND was assured that if the patient's insurance covers naturopathic visits, it doesn't matter whether the visit is virtual or in-person. The insurance company doesn't need to know, so requiring this reporting often confuses things at the claims level and patients suffer because of it. What we've heard is that there is a terminology problem. Patients, NDs and society as a whole still don't know whether to use the word telepractice, televisit, telehealth, telemedicine, virtual visit, or some other term. As I type this document, it is ironic and confusing that neither the word "telepractice" nor "televisit" are recognized by Microsoft. Furthermore "telehealth" is unfortunately often confused with Telehealth Ontario, the Ontario Government's free telephone service that you call to speak to a nurse for health advice. "Telemedicine" is often confused with the Ontario Telemedicine Network, a quasi-governmental service provider of secure appointments, etc.

When NDs use terms like these, patient claims have been denied because they are assumed to be the programs (mentioned above) already covered by the Ministry. As I'm sure you know, claims that are denied can cause all sorts of difficulty for the patients and the NDs. All that the insurance provider needs to know is that it was a naturopathic visit that met CONO standards. The method of visit is irrelevant and should not be required on billing receipts. Years from now, when virtual care is common place and we're fully done with COVID-19, this could be revisited, but in the middle of a pandemic is not the time. If

insurance providers want to further clarify the information that they require, they will do that, but it is our perspective that CONO doesn't need to be involved.

Patient Privacy and Confidentiality

The OAND fully agrees that the communication technology used for telepractice must be consistent with privacy laws and regulations. NDs must use platforms that are compliant with Ontario's Personal Health Information Protection Act (PHIPA), but as the world of online meetings and virtual appointments is changing at a meteoric pace, because of the pandemic, it is sometimes hard to know the latest on compliance or non-compliance. One very popular video meeting company, both claims a privacy compliant health care provider program and was also very recently the subject of a privacy warning from the MOHLTC. As this is not just a naturopathic issue, but rather one for all of Ontario's Regulated Health Professions, can we suggest that the OAND, CONO and the Ministry work together (ideally with other Colleges & Associations) to develop a comprehensive guide of what is required and which service providers comply. Putting the onus on a ND to trust a salesperson or claims made on a video meeting company's website is not in our view the most patient protective approach.

Telepractice With a Patient in Another Regulated Jurisdiction

We understand the public protection rationale behind naturopaths being regulated in the province where their patients are residents, but to include short duration travel (e.g., a vacation) is not patient protective in our view. I hear lots of examples of patients who are on vacation and suffer a worsening of a pre-existing condition or are having a problem with the medication they are taking and contact their naturopath for care advice.

Their home naturopath knows this patient well, has the patient's history in their records, and would likely be the practitioner who prescribed whatever treatment the patient is currently on.

A regulated naturopath in another province, where the patient is travelling, will be at a disadvantage for the reasons mentioned, and so patient care will be less effective. They won't have the relevant patient information and care will be delayed if they have to try to obtain it. Patient protection will suffer and would be much better served by their access to their home naturopath. The benefits of continuity of care certainly must be prioritized here.

We welcome the opportunity to further discuss these or any other elements of the proposed Telepractice Guideline.

Thank you for opportunity to weigh in on this important undertaking.

Yours,

A handwritten signature in black ink, appearing to read 'John Wellner', with a stylized, flowing script.

John Wellner
CEO, Ontario Association of Naturopathic Doctors