The primary goal of URAC’s Telehealth Accreditation Program (TAP) is to promote access to safe, high-quality, and competent health care regardless of the mode of telehealth being used or the type of clinical services being provided to patients. Our approach defines the standards of excellence for telehealth, without prescribing how organizations must meet those standards, to allow this evolving industry to continue innovating while ensuring patient protection.

Our Telehealth Accreditation Program is comprised of three modules, which may be purchased individually or as a set:

### C2P: CONSUMER TO PROVIDER
- **Key Characteristics**
  - Patient initiated
  - Often episodic
  - On demand/acute
  - At patient discretion
  - New provider selected or assigned based upon availability
  - Single or multiple encounter(s) medical record

- **Common Service Types**
  - Online patient consultations
  - Primary care
  - Urgent care
  - Nursing or clinical triage
  - Telepsychiatry, tele-mental health

- **Common Originating Sites**
  - Home or mobile online applications
  - Typically non-clinical sites
  - Employer worksites
  - Kiosks/health stations

### P2C: PROVIDER TO CONSUMER
- **Key Characteristics**
  - Provider initiated
  - Either a pre-existing relationship or ongoing relationship
  - Typically single provider and scheduled
  - Continuity of medical records

- **Common Service Types**
  - Primary care
  - Urgent care
  - Specialty care
  - Telepsychiatry, Tele-mental health
  - Case management
  - Telerhabilitation
  - Pre- and post-surgical consultations

- **Common Originating Sites**
  - Provider clinics
  - Kiosks
  - Retail health clinics
  - Schools
  - Corrections and institutions
  - Post-acute care facilities
  - Employer worksites
  - Home-based services

### P2P: PROVIDER TO PROVIDER
- **Key Characteristics**
  - Provider initiated, minimum two treating providers
  - Either episodic or ongoing
  - Includes specialty consultations

- **Common Service Types**
  - Includes comprehensive specialty services
  - Primary care provider (PCP) to specialist
  - Specialist to specialist
  - Specialist to hospitals (e.g., Tele-ICU, Telepsychiatry, Tele-stroke
  - Teleradiology
  - Telepathology
  - Ambulance services (e.g., first responders)

- **Common Originating Sites**
  - Hospitals
  - Health systems
  - Provider clinics
  - Correctional facilities
  - Post-acute care facilities

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**Telehealth is growing in popularity** among consumers, providers, payers, and other stakeholders in the health care system, especially as a response to the current pandemic, and it’s here to stay.