

# Product-Shape Scoping Worksheet

Classify your telemedicine product, then build to its shape. Companion to the product-landscape article.

## 1 - Classify: answer in order, stop at the first yes

- Does an institution's clinical staff deliver the care?**  
Yes = HOSPITAL / HEALTH SYSTEM - the EHR is the center of gravity: chart launch, write-back, enterprise SSO, hospital-grade audit.
- Does a business buy access for a population?**  
Yes = B2B2C - eligibility files, SSO from benefits portals, multi-tenant config, utilization reporting, business-associate posture.
- Is the product organized around one condition or discipline?**  
Yes = SPECIALTY - budget the domain's own rulebook first: 42 CFR Part 2, DEA prescribing, FDA device boundary, vertical billing codes.
- None of the above?**  
You are DTC - conversion economics, friendly-PC / MSO structure, consumer-protection and advertising law, HIPAA technical bar from day one.

## 2 - Build to the shape: first-year priorities

### DTC

- Funnel + queue throughput; async intake first
- Two-company structure: PC owns clinical decisions
- Keep PHI out of analytics; build to 45 CFR 164.312

### B2B2C

- Eligibility ingestion + SSO before features
- SOC 2 / security-questionnaire readiness
- Utilization reporting that survives renewal

### HOSPITAL / SYSTEM

- EHR launch + write-back is the product
- Enterprise identity, RBAC, immutable audit
- WCAG 2.1 AA - Title II dates: 2027 / 2028

### SPECIALTY

- Encode the clinical model (sessions, photos, RPM)
- Condition rulebook: Part 2 (2026-02-16), DEA (2026-12-31)
- Outcome instruments + escalation paths in-product

## 3 - Draw the BAA chain before you sign anything

**DTC:** physician PC (provider of record) <-> MSO <-> cloud, video, transcription vendors - every PHI-touching vendor under BAA.

**B2B2C:** platform <-> plan/employer's plan entity, plus the platform's own BAAs with each subcontractor.

**Hospital:** vendor signs the health system's BAA and inherits its audit, access, and logging requirements.

**Specialty:** the channel's chain plus domain partners - labs, pharmacies, device clouds - each under BAA.

### Re-run this worksheet annually.

Shapes drift as channels are added - and the compliance program must drift with them. Architect so the second shape is an addition, not a rewrite: tenancy out of the clinical core, FHIR record early, video layer as a service.