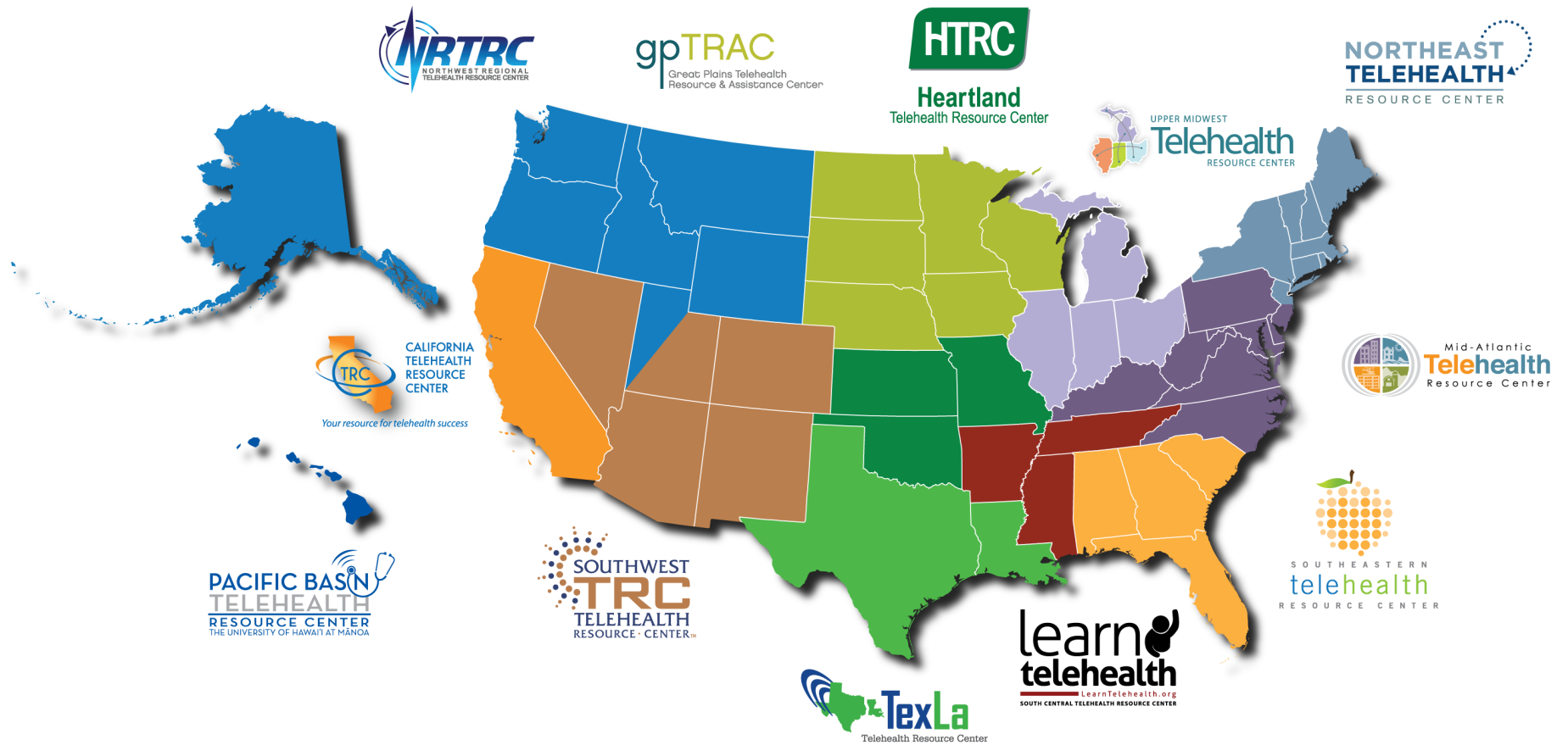# ADFM Webinar Series

Telehealth: Provider Buy-in and Key Logistics

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www.**netrc**.org

TelehealthResourceCenters.org

NRTRC
NORTHWEST REGIONAL
TELEHEALTH RESOURCE CENTER

gpTRAC
Great Plains Telehealth
Resource & Assistance Center

HTRC
Heartland
Telehealth Resource Center

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TELEHEALTH
RESOURCE CENTER

UPPER MIDWEST
Telehealth
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2 National Resource Centers

NRTRC	gpTRAC	NETRC
CTRC	HTRC	UMTRC
SWTRC	SCTRC	MATRC
PBTRC	TexLa	SETRC

12 Regional Resource Centers

Who do we serve?

- Individual Providers
- Community & Urban Hospitals
- Academic Institutions
- National, State, or Regional Associations
- Federal, State, Regional, or Local Government Agencies
- Legislators/Policy makers
- Health Systems
- Rural Clinics
- Federally-Qualified Health Centers (FQHC)

- Critical Access Hospitals (CAH)
- Primary Care Clinics
- Ambulatory Care Centers
- Nursing Homes
- Schools
- Vendors
- *and many others!*

We Provide:

- ✓ Short and long term technical assistance services for organizations

- ✓ Education for the telehealth workforce

- ✓ Access to educational materials

- ✓ Access to specialized tools + templates

- ✓ Access to telehealth experts willing to share their experiences

- ✓ Monthly newsletter updates and other alerts on telehealth in the northeast

- ✓ Support for collaboration that fosters a favorable environment for telehealth

- ✓ *And more!*

Telehealth Uses

- Behavioral Health
- Burn
- Cardiology
- Dentistry
- Chronic Care Management
- Dermatology
- Education / Grand Rounds
- Emergency Services / Trauma
- Family Planning

- Genetics
- Home health
- Infectious Disease
- Managed Care
- Medication Adherence
- Neurology /Stroke care
- Obstetrics and Gynecology
- Oncology
- Ophthalmology
- Pain Management
- Pathology

- Palliative Care
- Pediatrics
- Pharmacy
- Primary Care
- Psychiatry
- Public Health
- Radiology
- Rehabilitation
- Rheumatology
- Surgical
- Wound Care
- *And more!*

Types of Telehealth
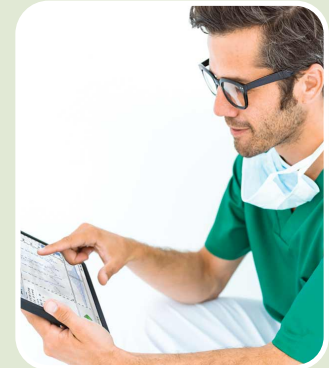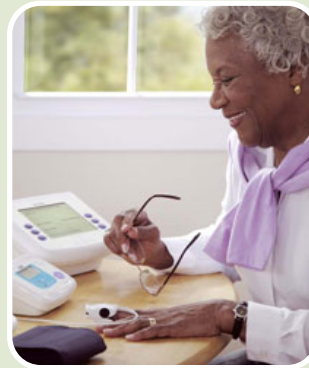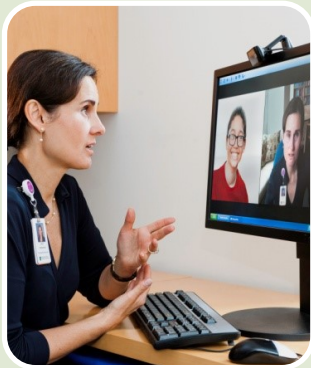
Video-conferencing (Synchronous)	Store And Forward (Asynchronous)	Remote Patient Monitoring (RPM)	Mobile Health (mHealth)	Provider to Provider (eConsults, Project ECHO, etc.)

Value Perspectives

Patients	Communities	Primary Care Providers	Specialists	Dental Providers
• Accessibility: care when and where they need it • Affordability: reduces travel time, expense and time away from work/family • Timeliness: reduces wait time to access specialists • Integrated and coordinated care	• Keeps patients local whenever possible • Promotes rapid diagnosis and treatment linked to improved patient outcomes • Improves outcomes and therefore improves health of population	• Promotes coordinated care • Maintains primary relationship with patient • Promotes greater patient satisfaction • Generates revenue – visit reimbursement • Access to education • Working at top of scope	• Extends reach to patients • Increases patient volume, maximizes time and efficiency, working at top of scope • Reduces documentation redundancy by using common EMR platform with PCPs • Promotes coordinated care	• Improved access and delivery • Lower costs • Resource for dental consulting • Referral for specialized care • Dental monitoring • Dentist-Laboratory Communication • Continuing Education

Provider Buy-In & Culture Change

- Include providers in planning phases (e.g. technology testing/selection, workflows, etc.)
- Educate early and often!
  - Orientation, practice sessions, reinforcement of skills
  - Confidence and competence are key to success
- Share the "big picture" and outcomes – benefits, patient demand, data!
- Streamline processes to limit time away from direct patient care
  - E.g. Workflows, Billing, Built-in forms, protocols, etc.
- Make telehealth fun!

General Logistics

- Program Setup – It's a team effort!
  - People (training, transparency); Space (comfort, flow, confidentiality); Technology (connectivity, equipment, software, security)

- Billing
  - Train and maintain in-house expertise across various payer types (use of modifiers, approved services, connections with payers, etc.)

- Troubleshooting
  - Training and mock visits
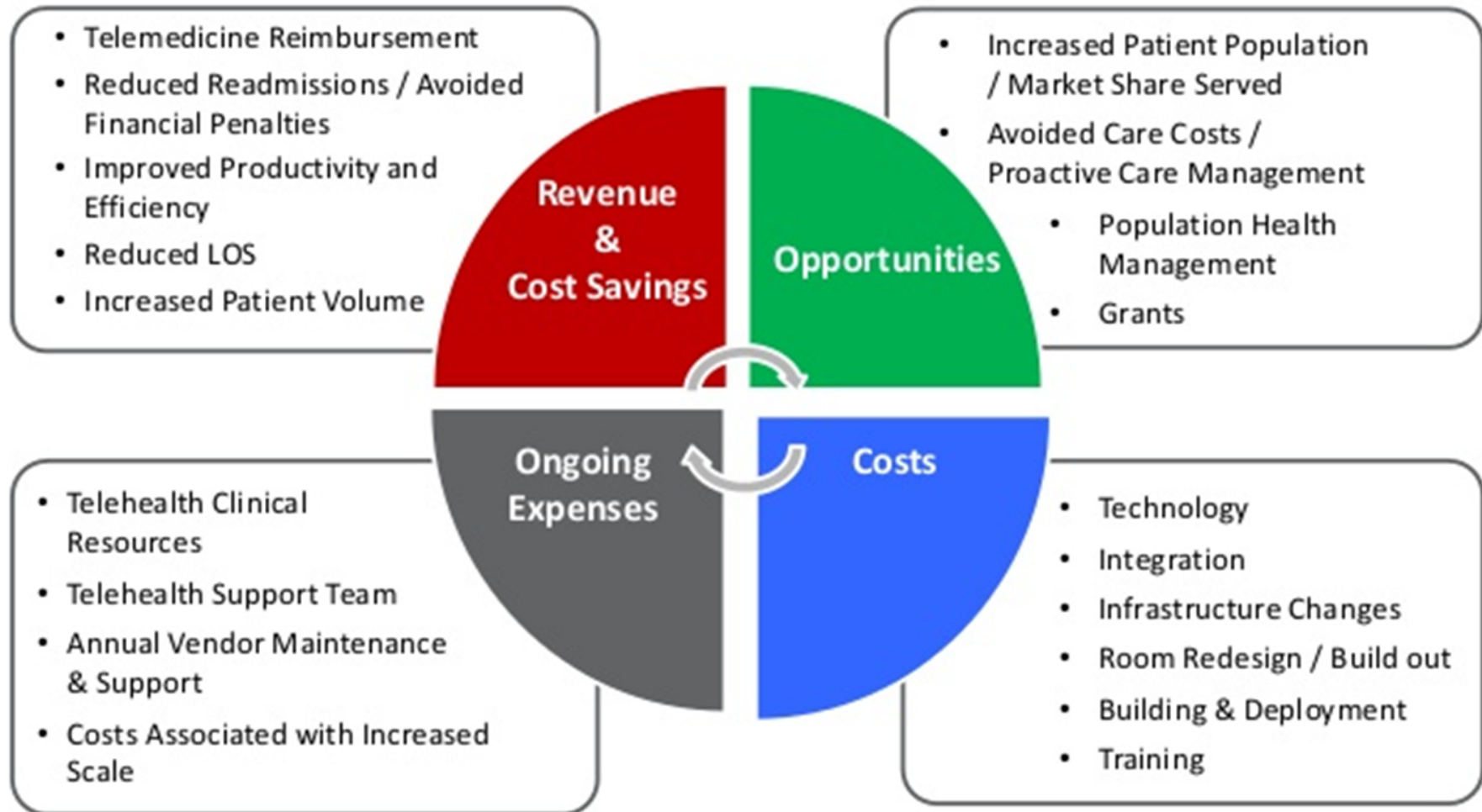 - Easily accessible info (Cheat Sheet) and IT personnel

ROI and Sustainability

- No one-size fits all method but….
- Define the need – use your data
- A solid argument is key
- Review the literature
  - https://www.netrc.org/resources.php
- Develop your metrics to demonstrate outcomes
- Decide best fit financial model & metrics
- Know your state regulations – advocate for change if necessary/possible
- Use existing practice guidelines & protocols

Budget Planning

Telehealth
Financial Areas

Revenue & Cost Savings
- Telemedicine Reimbursement
- Reduced Readmissions / Avoided Financial Penalties
- Improved Productivity and Efficiency
- Reduced LOS
- Increased Patient Volume

Opportunities
- Increased Patient Population / Market Share Served
- Avoided Care Costs / Proactive Care Management
  - Population Health Management
  - Grants

Ongoing Expenses
- Telehealth Clinical Resources
- Telehealth Support Team
- Annual Vendor Maintenance & Support
- Costs Associated with Increased Scale

Costs
- Technology
- Integration
- Infrastructure Changes
- Room Redesign / Build out
- Building & Deployment
- Training

Source: Subsidium Healthcare

Evaluation Strategy

KEEP CALM AND DELIVER OUTCOMES

Indicators: Realistic, concrete activities, products or other services measured by straightforward processes (frequency, amount of time or surveys)

Steps required to achieve:

    Performance Targets & Outcomes

Performance Targets: Conc
will achieve a 25% increas
based on individual *Indica*

Outcomes: Assessments o
successfully or not. Based on a
Performance Targets.
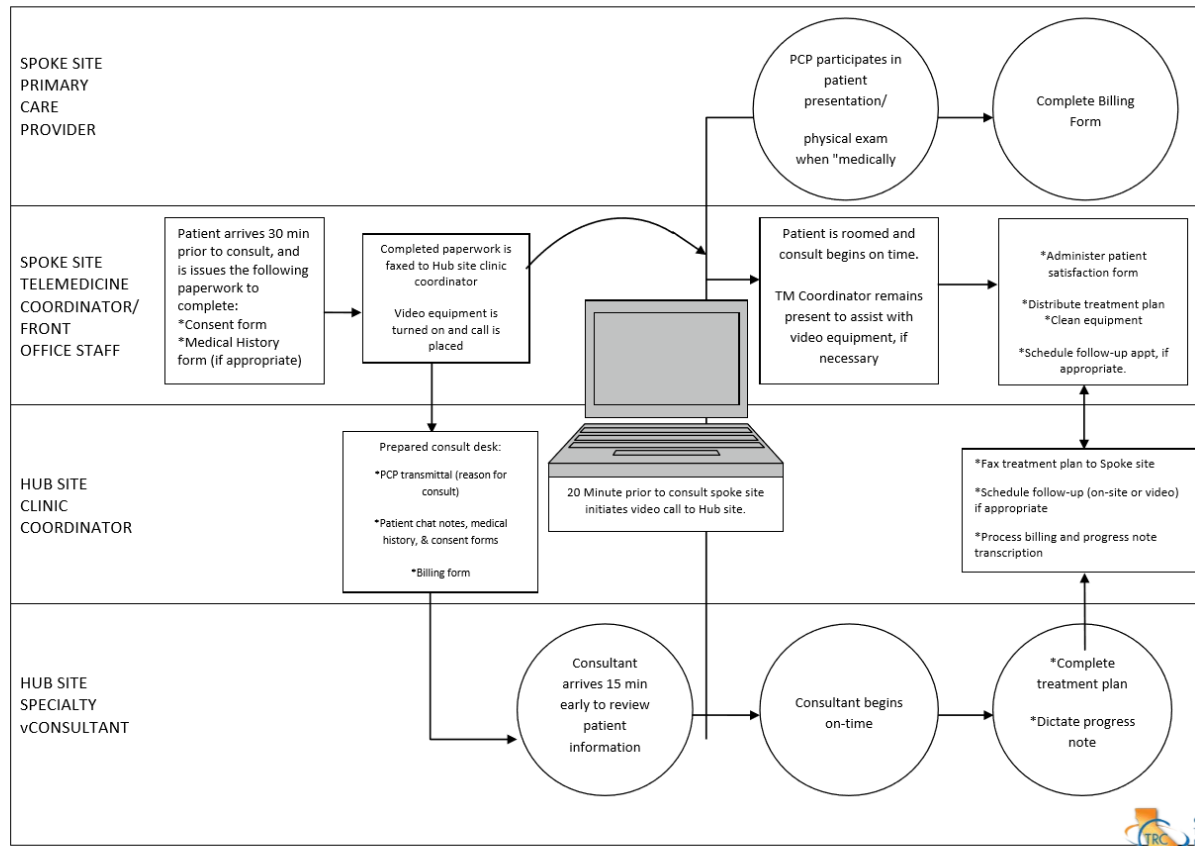
What to include?

Where you expect telehealth to have positive or negative change

Delivery Models

- Various Models to Consider
  - PCP joins toward end of consult (e.g. Specialty consults)
  - Patient only, with later follow-up with PCP (e.g. Behavioral Health consults)
  - Contracted Provider (e.g. Specialty services via contractual relationship) [Pros/Cons of Telehealth Contracting Models](#)

- Clinical and Financial Needs Met?

- Scheduling
  - Block scheduling vs. Integration throughout the day
  - Goals: Maintain flow and productivity; effective billing/payment

Workflows

- Match y... ...workflows as closely as possible
- Clearly ... provide...
- Focus o...
- Ensure ... workflo...
- Address ...
- A few re...
  - Nati... ...Clinic Wor...
  - Calif...
  - CTR ... e 4)

SPOKE SITE PRIMARY CARE PROVIDER

PCP participates in patient presentation/ physical exam when "medically

Complete Billing Form

SPOKE SITE TELEMEDICINE COORDINATOR/ FRONT OFFICE STAFF

Patient arrives 30 min prior to consult, and is issues the following paperwork to complete:
*Consent form
*Medical History form (if appropriate)

Completed paperwork is faxed to Hub site clinic coordinator

Video equipment is turned on and call is placed

Patient is roomed and consult begins on time.

TM Coordinator remains present to assist with video equipment, if necessary

*Administer patient satisfaction form
*Distribute treatment plan
*Clean equipment
*Schedule follow-up appt, if appropriate.

HUB SITE CLINIC COORDINATOR

Prepared consult desk:
*PCP transmittal (reason for consult)
*Patient chat notes, medical history, & consent forms
*Billing form

20 Minute prior to consult spoke site initiates video call to Hub site.

*Fax treatment plan to Spoke site
*Schedule follow-up (on-site or video) if appropriate
*Process billing and progress note transcription

HUB SITE SPECIALTY vCONSULTANT

Consultant arrives 15 min early to review patient information

Consultant begins on-time

*Complete treatment plan
*Dictate progress note

Tips to Get Started

- Find a **champion(s)**
- Think big, **Start small**
- Focus time, effort and $ on **program development and a sustainable business model**, then choose technology that fits your plan
- **Keep technology simple** when possible – what fits your needs and budget?
- **Reach out** to your TRC and/or folks who have already done this!
- **Lead advocacy efforts** for program development and policy growth

Questions? Contact Us

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Resources

- **National Telehealth Resource Centers**
    www.telehealthresourcecenters.org

- **Northeast Telehealth Resource Center**
    www.netrc.org

- **Mid-Atlantic Telehealth Resource Center**
    www.matrc.org

- **Center for Connected Health Policy**
    www.cchpca.org

- **Telehealth Technology Assessment Center**
    www.telehealthtechnology.org

- **American Telemedicine Association**
    www.americantelemed.org

- **Center for Telehealth & e-Health Law**
    www.ctel.org

Appendix – Sample Programs

Primary Care by Boat

Maine Seacoast Mission (ME):

- 110 years old with history of spiritual and medical care provided by nurses visiting the islands.

Program Description and Outcomes:

- Telemedicine started 15 years ago to four islands visited by Sunbeam - 3 by Sunbeam and two land-based units operated by trained medical assistants

- Benefits Include:
  - Increased access to primary care and behavioral health services on 5 islands
  - Significant savings (time and $$ for patients/families)
  - Improved health outcomes and quality of life

TeleWOW!

Weight loss program for kids at EMMC works to boost confidence, teach healthy lifestyles

Courtesy of EMMC Community Relations

Eastern Maine Medical Center:

- WOW! Program: Way to Optimal Weight - tiered program for children and adolescents (age 4-19), with body mass index (BMI) at or above 85th percentile designed for children who are at higher risk for weight related health problems

Program Description and Outcomes:

- Multidisciplinary visits via live videoconferencing
  - MSW, clinician, and nutritionist take turns
- Benefits Include:
  - Provides program access and health benefits to patients in some of Maine's most rural communities
  - High Patient and family satisfaction – decreased travel time/cost
  - High satisfaction among provider team

Speech Telepractice

Waldo County General Hospital

Michael Towey, MA, CCC-SLP

Manager Speech-Language Pathology Department

Fellow of the American Speech-Language-Hearing Association

National TRC Webinar – Innovation and Impact with Speech Language Pathology Telepractice

Telepsychiatry in SNFs

University of Vermont Medical Center:

- Academic medical center links 16 hospitals and three nursing homes in VT and NY with services in: pediatric critical care, telederm, and NH telepsychiatry; implementation of palliative care, maternal and fetal medicine, teleneurology, and teleortho
- Telepsychiatry program serves nursing homes in VT and upstate NY

Program Description:

- Workflow includes: 1) Pre-consultation review of patient history, meds; 2) Case Synopsis w/RN; 3) Full Psych Assessment and other studies as needed; 4) Follow up: MD consult note, medications, care approaches
- Collaborative model with nurse, social worker and family/caregivers on site with patient
- Technology: point-to-point, live video with PTZ camera

Teledermatology

University of Vermont Medical Center (VT):

- Academic medical center with a five-hospital network in VT and northern NY.

Program Description/Setup:

- Uses Access Derm, a free, HIPAA compliant application sponsored by American Academy of Dermatology to facilitate referrals from primary care providers for remote dermatology consults using mobile devices and the internet (store and forward).

- Outcomes of pilot included:
  - Post-implementation: 44 SAF consults
  - Average response time of SAF consult: 9.2 hrs
  - Average wait for appointment: 12.9 days vs. 60.2 days for traditional consults (**78.6% reduction**)
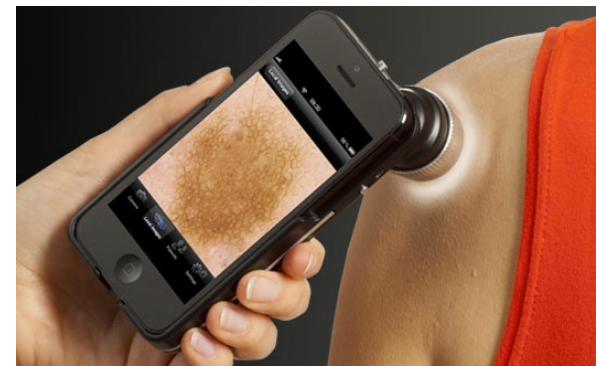
Teleretinal Screening

Finger Lakes Community Health (NY):

- Community/Migrant Health Center (FQHC) with 9 sites

Program Description:

- Primary care providers identify patients who need Diabetic Retinopathy Screening. Images are taken using the EyePACS system and an EyePACS eye specialist will read/grade image.

- Benefits include:
  - Significantly increased screening rates to meet HEDIS measures
  - Increased early identification and treatment of retinopathy
  - Allowed FLCH to negotiate incentive payments with their ACO

Teledentistry - Senior Living Facility

Case Study

- RDH from a local practice scheduled to provide hygiene services in local senior living facility

- Uses MouthWatch TeleDent system with laptop and intraoral camera

- Performs 50 reimbursable screenings-records patient info, individual exam details, and high-quality intraoral images during visit
  - Sessions can be live videoconferencing with dentist (synchronous) or recorded to the cloud to be reviewed at a later time by the assigned provider (asynchronous)

- Outcomes:
  - 5–10 residents schedule restorative care at affiliated dental practice
  - Practice increases revenue by providing outreach to the community without adding more chairs

School-based Telepsychiatry

Athol Hospital/Heywood Healthcare (MA):

- Critical access, non-profit acute care hospital serving 9 Communities in North Quabbin Region.

Program Description and Outcomes:

- Collaborative program between hospital, school district, and behavioral health, initially supported by grant funds

- Benefits Include:
    - Increased access to vital child psychiatric services
    - Improved medication management
    - High student, family and provider satisfaction
    - Anticipated outcomes: Decreased ED utilization and improved academic achievement

Photo courtesy of AMD Global Telemedicine

Launched 1st school in 2016 – funding from MA HPC and HRSA to expand to four more!

Remote Patient Monitoring

MaineHealth Care at Home:

- Fully licensed not-for-profit provider of home health care (nursing, PT, OT, speech, home health aide, and counseling services) 24/7 throughout 3 counties.

Program Description:

- 4G tablet with pre-loaded software and peripherals (scale, pulse oximeter, BP monitor, etc.) at patient home
- Algorithms highlight patients at ↑ risk for readmission
- Served 474 Patients (CHF, COPD, Diabetes) 4/2015 – 4/2016;
  - Patient Adherence: 85%;
  - 75% reduction in overall 30-day readmission rate (4.2% compared to state average of 16.6%)