Project ECHO Nevada: A Flex Program Partnership That Makes Sense

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ECHO vs. Telemedicine

ECHO Telehealth  
ECHO Supports Community Based Primary Care Teams  
Patients reached with specialty knowledge & expertise

Traditional Telemedicine  
Specialist Manages Patient Remotely

Source: Michelle Iandiorio, M.D., Project ECHO New Mexico
Project ECHO Nevada Background

• Planning began in late 2010

• Rural road trips/site visits/needs assessment during July and August 2011

• First clinic launched April 2012 – Diabetes ECHO

• Received $500,000 appropriation from the 2015 legislature

• Currently, 12 active ECHO clinics + 3 inactive
Project ECHO Nevada Clinics for Primary Care Providers

• Sports Medicine*
• Gastroenterology
• Public Health
• Behavioral Health in Primary Care*
• Pain Management*
• Diabetes/General Endocrine*
• Antibiotic Stewardship
• Rheumatology
• Hepatitis C
• Geriatrics*

*behavioral health specialist(s) on interdisciplinary team
Project ECHO Nevada Clinics for Behavioral Health Providers

- Mental Health Professional Development Group (Junior Clinicians)
- Mental Health Professional Development Group (Experienced Clinicians)
- Psychology Internship Supervision Group
- Marriage and Family Therapist Internship Supervision Group
What Does ECHO Have to do with Flex?

• Works with a broad range of rural providers, including all 13 Critical Access Hospitals in Nevada

• ECHO and Flex Program goals are aligned
  • Improved population health
  • Improved recruitment and retention of health workforce
  • Both programs are guided by ongoing health care needs assessments and evaluation
  • Well-aligned with transition to value-based models

• Technology increases efficiency for providers
## Recruitment and Retention

### Physician and Primary Care Workforce – 2014

Number per 100,000 Population

<table>
<thead>
<tr>
<th>Profession</th>
<th>Rural &amp; Frontier</th>
<th>Urban</th>
<th>Nevada</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allopathic Physicians (MD)</td>
<td>72.8</td>
<td>183.4</td>
<td>172.3</td>
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<tr>
<td>Adv Practitioners of Nursing (APN)</td>
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<td>33.2</td>
<td>31.9</td>
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<tr>
<td>Osteopathic Physicians (DO)</td>
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<td>21.6</td>
<td>21.0</td>
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<tr>
<td>Physician Assistants (PA)</td>
<td>14.1</td>
<td>20.9</td>
<td>20.2</td>
</tr>
<tr>
<td>Primary Care Physicians (MD &amp; DO)</td>
<td>49.6</td>
<td>90.4</td>
<td>86.3</td>
</tr>
</tbody>
</table>

Impact and Outcomes of Project ECHO Nevada

• Build the capacity of rural and frontier primary care workforce
• Reduce professional isolation and improve primary care recruitment and retention
• FREE CME and nursing CEU credits for rural physicians, P.A.s, nurses, and pharmacists
• Improve reimbursement to participating rural hospitals, clinics, and providers
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