

Using Telehealth to Support Value-Based Care

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Stratis Health

- Independent, nonprofit, Minnesota-based organization founded in 1971
 - Mission: Lead collaboration and innovation in health care quality and safety, and serve as a trusted expert in facilitating improvement for people and communities
- Working at the intersection of research, policy, and practice



Objectives

1. Learn about telehealth basics including considerations for Value-Based Care.
2. Discover how the federal payment policies implemented during the pandemic related to reimbursement impact(ed) your practice and patient services.
3. Discuss ideas for successfully implementing telehealth to improve organizational goals and patient outcomes.
4. Hear from a rural clinic who has been using telehealth to manage their patient populations.

Telehealth Basics & Considerations for Value- Based Care

Polling Question #1:

Are you currently using telehealth? If yes, for how long?

- 1-1-1/2 years (since the pandemic started)
- 2-5 years
- 5+ years

Polling Question #2

What are your primary uses of telehealth?
(please type your answers into chat)

Telemedicine vs Telehealth

- Telemedicine is often used when referring to traditional clinical diagnosis and monitoring that is delivered by technology
- Telehealth is a collection of means or methods for enhancing health care, public health and health education delivery and support using telecommunications technologies
- Telehealth is not a specific service, but a collection of means to enhance care and education delivery

<https://www.cchpca.org/about/about-telehealth>



Uses for Telehealth in Value-Based Care

- Acute care: illnesses and injuries
- Chronic disease management
- Behavioral health
- Substance use disorder treatment
- Follow-up visits: medication management, post hospitalization discharge

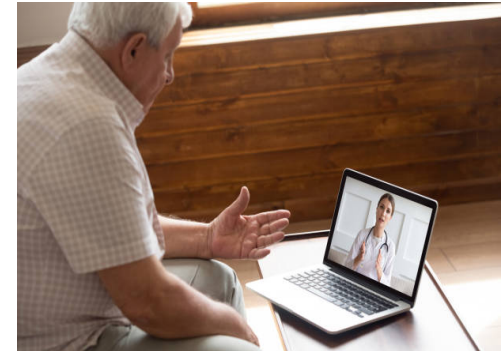
Uses for Telehealth in Value-Based Care (continued)

- Medication management
- Dental consultations/education
- Triage
- Second opinions
- Referral advice/consultations

Telehealth Settings in Value-Based Care

- Telestroke, Sleep Medicine, Weight Management, Home Dialysis
- Telepsychology/Behavioral Health – ED, inpatient, at-home, group-homes
- Cardiology/CHF/Hypertension
- Chronic Pain Management; Dementia
- Infectious Disease; Wound Management; Orthopedics
- Oncology; Dermatology; Medication Therapy, Allergy
- Palliative Care; Hospitalist Services
- Transitional Care, Remote Patient Monitoring
- County Jail – family practice services
- Educational materials

Terminology Basics



Synchronous Consultation

- Live interaction that is HIPAA compliant
 - Two-way interactive audio-visual
 - Provider to person visit
 - Second opinion consultation
 - On-demand acute care rounding

Advantages of Synchronous Delivery

- Virtual consults
- Accommodates a wide geographic distance
- Fills the gap where there is a specialty shortage

Terminology Basics (continued)



Asynchronous Consultation

- Recorded health information via secure technology
 - Store and forward
 - Digital images/documents (e.g.: x-rays, wound care)
 - Pre-recorded video

Advantages of Asynchronous Delivery

- Fewer resources needed
- Can do in off-peak hours
- Less infrastructure
- Experience doesn't have to be in real time (ie: tele-wound, tele-burn)

Remote Patient Monitoring

- Use of digital technologies to collect medical and other forms of health data from individuals
- Electronically transmit that information securely for assessment and recommendations
- Includes vital signs, weight, blood pressure, blood sugar, blood oxygen levels, heart rate, and electrocardiograms

<https://www.cchpca.org/telehealth-policy/telehealth-and-medicare>



Remote Patient Monitoring Uses



- Chronic disease management
- Behavioral health services
- Home based dialysis
- Managing mild COVID-19 cases

Remote Patient Monitoring Uses

- Remote patient monitoring (RPM)
 - personal health and medical data collection in one location via electronic communication technologies transmitted to a provider in a different location
- Uses: chronic disease management, remote ICU



Mobile Health

- Compile and distributing health information via mobile/wireless devices (cell phones, tablets, computers)
- Text messages



Mobile Health Uses

- Monitoring of chronic disease
- Prevention for addiction services
- Depression management
- Daily reminders
- Automated hospital discharge summaries
- Health care surveys

Benefits of Telehealth

- Long waits for in-person BH visits
- Saves time/travel time/costs
- Standardized care across systems
- Covers MD shortages
- Access in rural areas
- Consumer demand/patient feedback
- Expand access to crisis services
- Customer satisfaction surveys show no difference in scores, some actually prefer it
- Growth potential can be larger without bricks and mortar
- Financial benefit to be able to staff a service 24/7 in one location vs many
- Cost of professionals are shared between all customer sites
- Adds marketability



Challenges of Telehealth

- Administrative engagement
- Technical problems (lack of bandwidth, loss of connectivity)
- Patient's lack of knowledge with technology
- Patient/Physician acceptance/engagement
- Infrastructure
- Sustainability (reimbursement)
- Ethical issues (perceived depersonalization, diminished trust)
- Reimbursement
- Documentation requirements
- Credentialing

Federal Payment Policies Implemented During the Public Health Emergency

Payors for Telehealth

- Medicare
- Medicaid
- Health Plans
- Other

1135 Waiver Funding/Policy Changes

- Expands originating site to include home
- FQHCs/RHC could bill as originating site
- Expands the geographic location to include urban and rural
- Expands licensing provision to all states
- Expands eligible providers
- Adds 180+ billing codes
- Waives HIPAA enforcement during pandemic


1135 Waiver Funding/Policy Changes (continued)

- Changes reimbursement to be same as in-person visits
- Flexibility for health care providers to not charge for co-pays
- DEA registered clinicians can prescribe controlled substances for patients remotely under certain circumstances

Policy/Funding Considerations for the Future

- 100+ pieces of pending legislation
- Looking to expand elements of PHE 1135 waiver
- Outcome of legislation will shape future of telehealth post-pandemic

Real Life Experiences Using Telehealth to Manage Patient Populations

A person wearing a white dress shirt and a dark blazer is seated in a wooden chair. Their right hand is resting on their lap, holding a pair of glasses. The person is wearing several rings on their fingers. The background is a plain, light-colored wall.

LAWRENCE COUNTY HEALTH DEPARTMENT

Our Mission and Goals

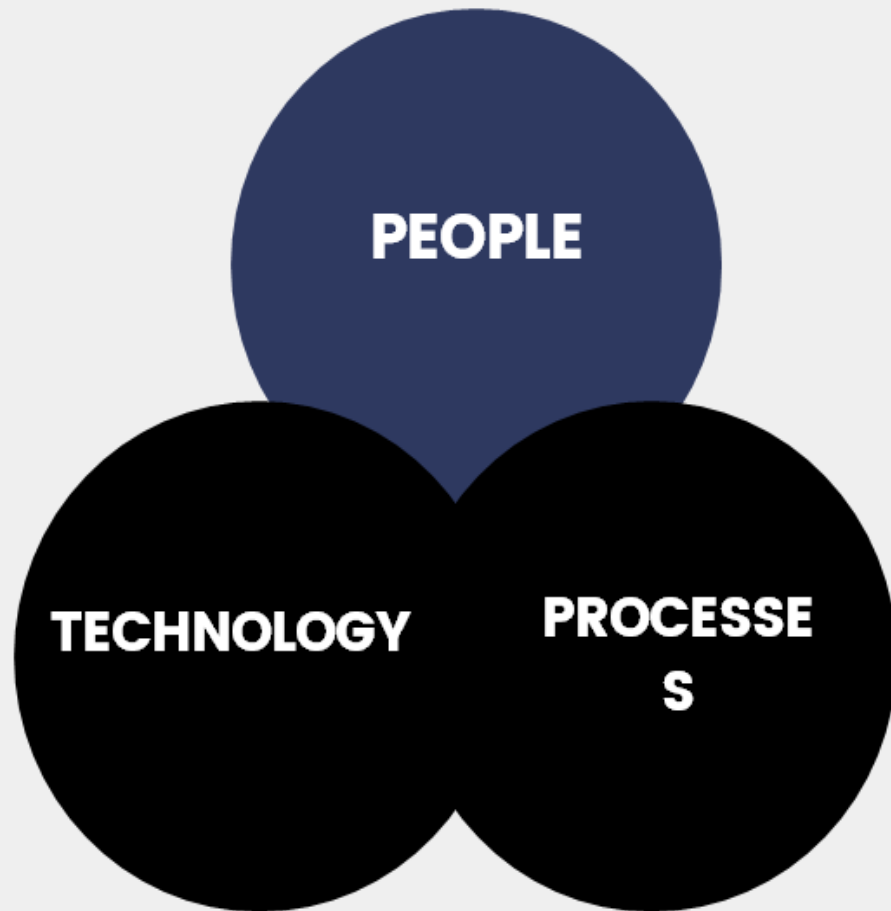
AN OVERVIEW OF OUR TELEHEALTH SERVICES.



THIS IS OUR MAIN PRIORITY.

**To provide accessible,
high-quality healthcare
to our clients remotely.**

how we implemented telehealth...



**Because
accessibility and
technology in
healthcare are
necessary now
more than ever.**

TECHNOLOGICAL CHALLENGES

- **No internet**
- **Access**
- **Compatability**
- **Digital Literacy**





Telehealth - How To Get Started

- Engage leadership
- Choose a champion/co-champion
- Engage clinicians early and often
- Understand HIPAA requirements
- Understand billing requirements
- Choose a telehealth vendor
 - Evaluate contracted services annually

Telehealth – How To Get To Started (continued)

- Prepare for telehealth workflows and protocols
- Develop a plan for informing patients
- Train staff initially as needed
- Have IT on stand-by for go-live date
- Understand consent needed for telehealth
- Conduct Plan, Do Study, Act (PDSA) cycles when first implementing
 - Make changes as needed



Must Have Resource for Telehealth Planning



Polling Question #3:

- What uses of telehealth did you learn of today that you hadn't thought of prior to today? (please type answers in chat)

Questions?

Resources

- Center for Connected Health Policy
 - <https://www.cchpca.org>
- Telehealth Federal Policies –
 - <https://www.cchpca.org/resources/covid19-telehealth-coverage-policies>
- CMS Telehealth Toolkit
 - <https://www.cms.gov/files/document/telehealth-toolkit-providers.pdf>

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