

“Building Successful Telemedicine Programs”

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Boston Logan International Airport Medical Station –
Connecting to the Massachusetts General Hospital



Dr. Kenneth Bird

First Case - April, 1968

Where to start?

Assess Your Market & Need



Establish Your Vision



Build Your Financial Plan



Form Your Partnership & Workflows



Do Your Due Diligence



Find Your Partner



Train Your Staff



Market Your Service



Evaluate Your Program

Assess Your Market & Need

Involve Stakeholders in All Phases of Decision-making

Assess Your
Market &
Need

- Internal stakeholders:
 - Administrators & business office
 - Clinical (all healthcare professionals, not just physicians)
 - Support staff (e.g., case coordinators)
 - IT
 - Legal
- External stakeholders:
 - Patients & patient groups/representatives
 - Other healthcare providers (e.g., local medicine man)

What Is Needed in Your Community?

- **Look at patient data & outcomes (e.g., # diabetics, # diagnosed with late stage diabetic retinopathy)**
 - **For your community**
 - **For your hospital/system**
- **Look at local physician coverage gaps (e.g., ? no neurologists)**
- **What healthcare services are patients having to travel or be transported for?**
- **Look at regulations (e.g., penalties for readmission)**

How Will Telemedicine Tie into Your Practice?

- **Complement/expand your clinical offerings or substitute when your providers are unavailable?**
- **What specialty services?**
- **What hours will telemedicine be offered?**
- **Personnel requirements?**
- **What are service goals? Provider-patient? Provider-provider?**
- **Where are you connecting? Provider office? Telemedicine clinic? Patient home?**

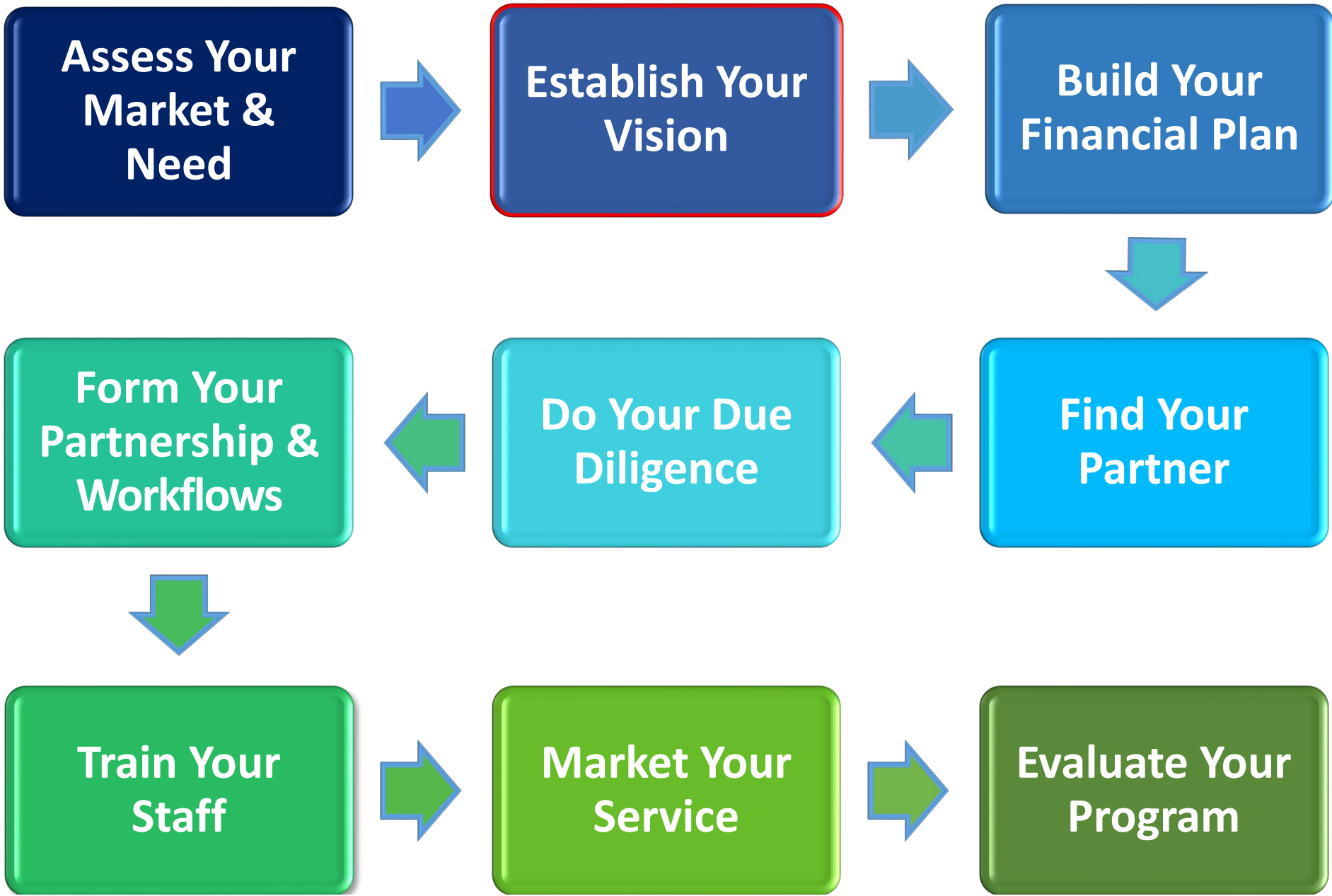


How Will Telemedicine Tie into Your Practice?

- *Recommended approach:*
 - *Choose one or two of the most important services and start with them*
 - *Don't take on too much at one time*
 - *Expand upon initial service; build program incrementally*
 - *Figure out process for integrating 1-2 services effectively & efficiently, then expand*
- “Tele-everything” **Disaster!**

Reasons to Partner with a Service Provider

- **Capability to deliver clinical services without interruption**
 - Recruit & retain practitioners
 - Large networks of credentialed healthcare providers
- **Partner can handle back-office functions (reports and billing)**
- **Partner can manage or co-manage program**
- **Experience/expertise**
- ***Support***
 - Help desk
 - Legal & regulatory
 - IT
 - Administrative
 - Marketing



Establish Your Vision

**Establish Your
Vision**

Establish a Vision Aligned with Your Mission

Establish a Vision of the Delivery Model

Establish a Vision Aligned with Your Mission

Establish Your
Vision

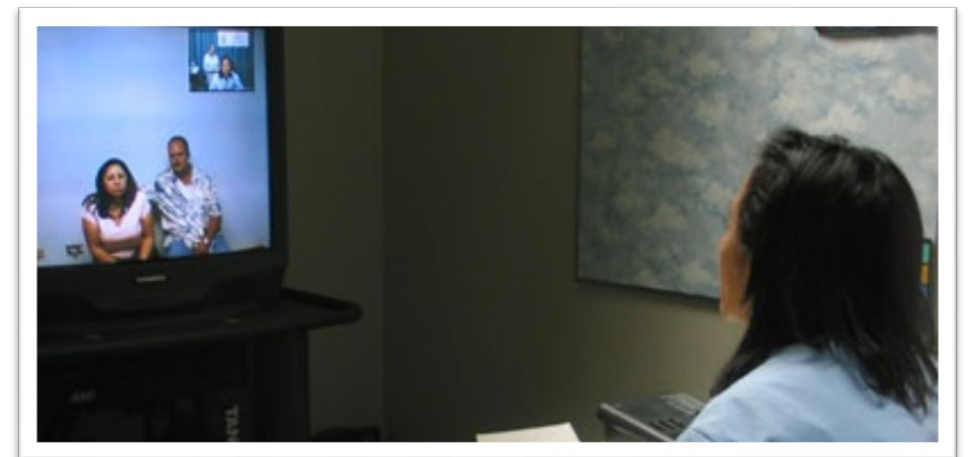
- Vision statement: Define the optimal desired future state; provide guidance & inspiration
 - *“Our vision is to fully incorporate telehealth technologies into the routine business and practices for the provision of health care in our County and throughout Arizona.”*
- Mission statement: Identify and understand the objective(s) the telemedicine service will accomplish – what it does, who does it, how it does what it does
 - *“Our mission is to improve the health of citizens in our county through the development and evaluation of innovative health care and education services supported by health information technologies.”*

Establish Your Vision

Reality Testing

The Physician-Patient Relationship

- **Generally, once a physician affirmatively acts in a patient's case by examining, diagnosing, treating, or agreeing to do so, and the patient accepts, a relationship exists**
- **Must establish an appropriate physician-patient relationship in order to prescribe**



Know the Legal and Regulatory Landscape

- **All the laws still apply regardless of whether it's in-person or via telemedicine: HIPAA, privacy & security, licensing, anti-kickback, liability, standard of care.**



Know the Legal and Regulatory Landscape

Establish Your
Vision

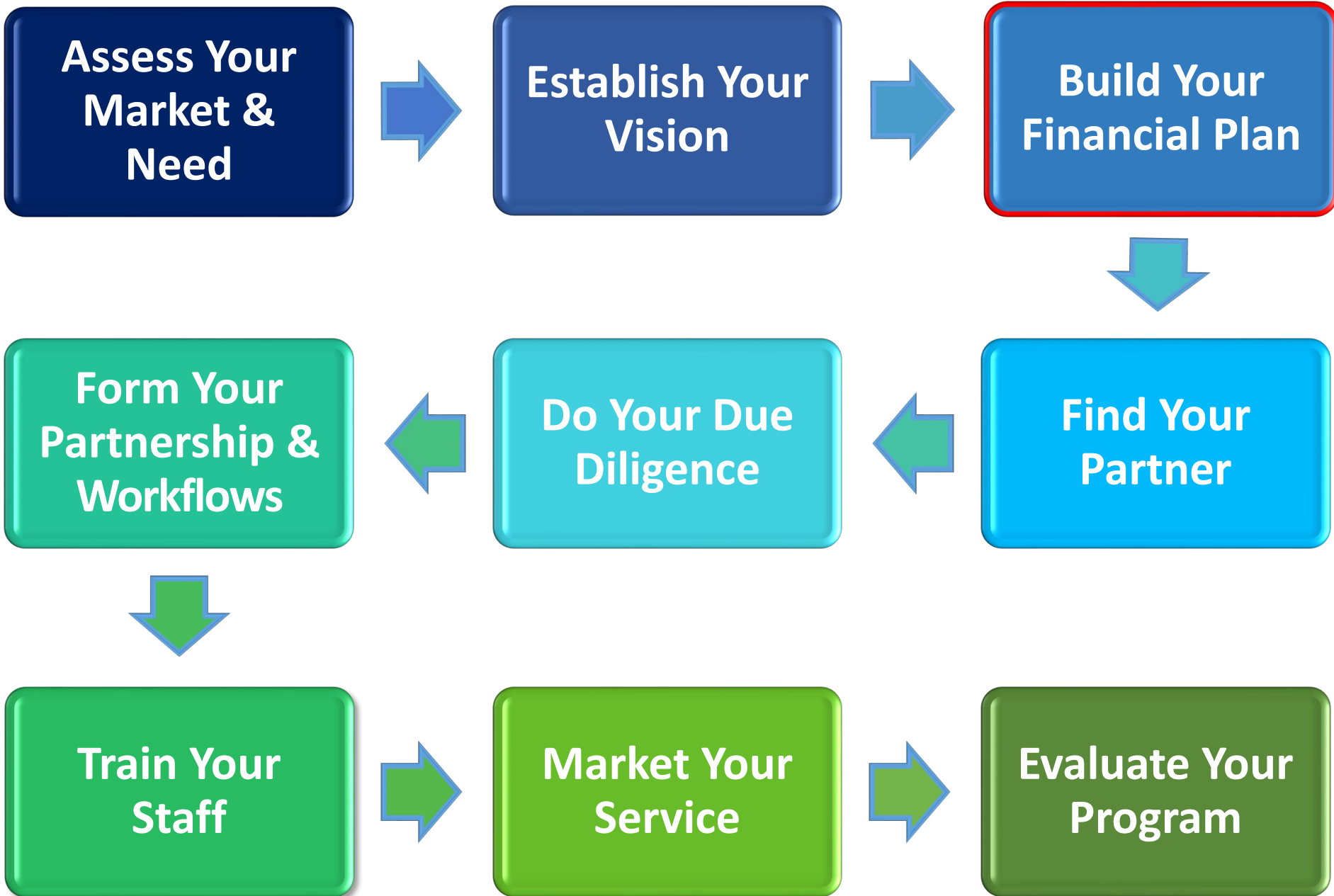
- **Informed consent & education:**
 - Mitigates risk
 - Informed consent is required by AZ law
 - For Behavioral Health under AHCCCS (administered by ADHS/DBHS) informed consent must be obtained by at least 1 year BH experience—also, separate informed consent required for recording a video session.
 - *Even if informed consent not required*, should educate patient about unique aspects of telemedicine compared to traditional visit
- **Arizona does not require an in-person exam to establish Provider-Patient Relationship: Video technology must be adequate to conduct history and physical exam remotely**
- **Medicare also allows video substitute for in-person exam**

Stark & Anti-Kickback Statutes

- Stark Law prohibits physicians from referring patients for designated health services to an entity with which the physician has a financial relationship.
- AKS prohibits offering or soliciting anything of value, directly or indirectly, in return for patient referrals.
- Telemedicine may be subject to fraud and abuse laws if the use directly or indirectly generates reimbursement from a federal health program.
- Equipment leases or the provision of free telemedicine equipment to referral sources **should be evaluated under fraud and abuse laws.**

Credentialing & Privileging of Tele-providers

- ***CMS Proxy Credentialing Rule:***
 - *Allows medical staff of hospital where patient is being treated via telemedicine to rely on the credentialing and privileging done at the Medicare-certified hospital where the telemedicine practitioner is located and credentialed*
 - *Written agreement required*
 - *Streamlined: Obtaining medical staff privileges at a hospital takes 2-3 months*
 - *May require hospital bylaw amendment*
- ***Or, retain complete credentialing of all telemedicine providers using existing credentialing process***

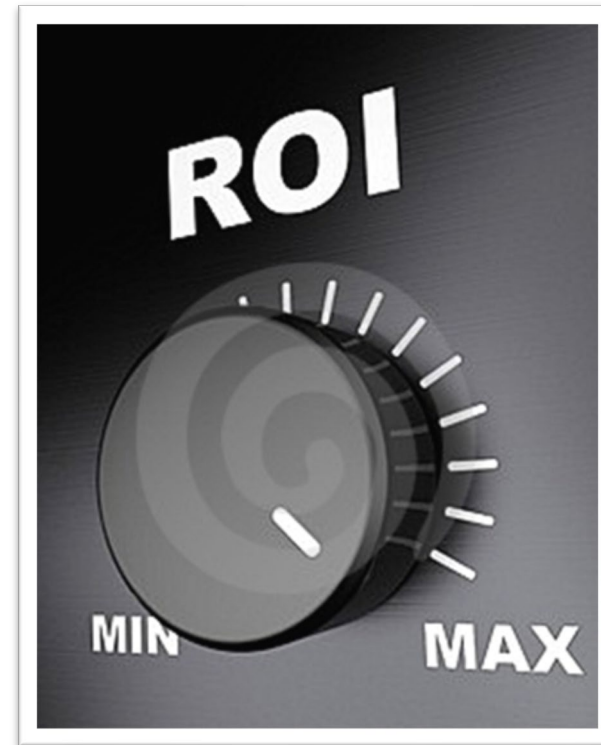


Build Your Financial Plan

Build Your Financial Plan

Build Your
Financial Plan

- Return on investment
 - Savings
 - Revenue
 - Strategic contribution
 - Penalty avoidance
- Payment for services
 - Subscription
 - Fee-for-service
 - Direct from patient
 - Who will do the billing?



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**Form Your
Partnership &
Workflows**



**Do Your Due
Diligence**



**Find Your
Partner**



**Train Your
Staff**



**Market Your
Service**



**Evaluate Your
Program**

Find the Right
Partner(s)

TELEMEDICINE APPLICATIONS

Where to Start?

- Arizona Telemedicine Program (ATP) – Home page
- ATP -- Service Provider Directory

<https://telemedicine.arizona.edu/servicedirectory>



Welcome to the Telemedicine & Telehealth Service Provider Directory, a service of the Arizona Telemedicine Program. The directory is a resource for hospital and healthcare administrators and other decision-makers who want to expand or improve their healthcare services to their patients, employees, clients, etc. The directory lists companies providing medical specialty services (such as radiology, rheumatology, neurology, psychiatry) and ancillary services (such as patient education and language interpretation) through telemedicine to healthcare providers such as hospitals, clinics, nursing homes, private practices and urgent care centers.

Service Providers: [List your company here.](#)

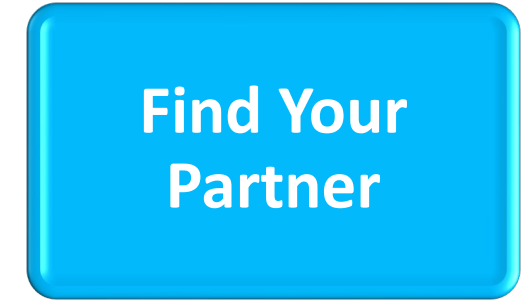
Search the Directory

Company Name (or part of)

Services In	Tele-services	Customers	Ancillary Services
Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware	Addiction Allergy Audiology Autism Bariatric medicine Burn Cardiology Chronic disease management	Accountable Care Organizations Assisted living facilities Community mental health clinics Correctional facilities Educational institutions Employers FQHCs Government agencies	Continuing education Continuing medical education Distance education Health call center Language interpretation services Patient education Patient engagement Support groups

Items per page
20

142 record(s) found, scroll down to see results. Page 1 of 8 page(s); up to 20 displayed per page.



Questions to Start With

- **Does their history and implementation plan sync with your organization and goals (mission & vision)?**
- **Number of years in telehealth business**
 - **If they're a startup, who are their investors and how committed are they?**
 - **Who are their customers? Will they provide references?**
- **How strong is their management team?**
 - **Expertise and experience**
 - **Healthcare experience or only IT and technical?**
- **Where are they located – headquarters, providers, tech support?**

Past Performance



- Number of sites potential partner has taken live
- Number of customers – past & present
- How many telemedicine cases have they done? What kind?
- What is their growth rate?
- Can they provide data to back up their claims?
 - Clinical
 - Financial

**Find Your
Partner**

Questions to Start With

- **Do they have experience with the coverage and capability you need?**
 - Hours of availability
 - Wait times for consults
- **Are they willing to work with your organization's size and number of consultations?**
- **Do they have a robust implementation plan?**
 - In writing
 - Proven, battle-tested

**Find Your
Partner**

How Strong is their Clinical Team?

- **Number of physicians/providers in the specialty you need, at the level you need (# and qualifications), and licensed in Arizona (or your state)**
- **Clinical experience, training, degrees, board certification, lawsuits**
- **If academic institution: faculty, fellows or residents?**
- **How strong is their clinical team?**

What Technology Platform Do They Use?

Find Your Partner

- How strong is their platform?
 - Does it meet standards?
 - FDA-approved devices?
 - HIPAA compliant?
 - Reliable, easy to use? How many clicks/how much training is required?
 - What is the failure rate?
 - Interoperability?
 - Connections to EHRs? PACS? Does it work with your EHR and your PACS? Costs to integrate?
- Or, will they use whatever platform you provide?



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**Do Your Due
Diligence**



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**Train Your
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**Market Your
Service**



**Evaluate Your
Program**

Due Diligence, Documentation & Your Contract

Due Diligence: Background Check

Do Your Due
Diligence

- Do they have proper licensure, etc.?
- What is their malpractice history and insurance?
- Do they have third-party credentials (e.g., [Joint Commission](#), [American Telemedicine Association](#), [Office of the National Coordinator for Health Information Technology certified HIT](#))?
- What is their BBB rating?
- Have they had trouble with IRS?
- Have they been in trouble with medical organizations?
- Have there been lawsuits against them?

Due Diligence: References

Do Your Due
Diligence

- Request a customer list/references and contact them
 - Are you happy with this company?
 - What have they provided to you?
 - What have your challenges been with this company?
- Find and interview customers not given as references
 - Search the web
 - Go to trade shows & conferences
 - Look for user groups

The Contract

Do Your Due
Diligence

- Ensure they have appropriate medical malpractice insurance, liability insurance
- Who will own the data? What data? Who will have rights to retain copies of the data? To license it, to sell it? For how long?
- Who will be responsible for continuity of care?
- Consider annually renewable contract
- Cover expansion

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**Evaluate Your
Program**

Form Your Partnership &
Integrate Telemedicine
into Your Workflows

Form a Partnership



- Telemedicine service programs are not one-sided, turnkey programs
- Requires effort on both sides:
 - putting together a program and educating the user ends (client org staff, health care provider org staff, and patients)
 - integrating workflows
- Collaborate with partner on what program will look like; form unity of vision for what you are trying to accomplish

Recognize You Are Changing the Status Quo

Form Your
Partnership &
Workflows

- Identify and leverage the proponents/champions: CMO, CNO tend to be important sponsors
- Identify and embrace the outliers: Reach out, make them part of the process, hear and address their concerns
 - e.g., “Big Brother”: eICU does not mean you are being watched 24/7; just that trends are being identified that need your attention
 - e.g., Will I have to become a technical expert?
 - e.g., Will my patients receive care as good as in person?

Agree on an Implementation Timeline

- Technical implementation is not what takes time
- Most time is spent working with the staff:
 - ensure messaging and impact is well understood
 - invaluable for successful implementation and ongoing relationship
 - Make sure everyone (not just providers) is trained
- Don't rush
- Do some dry runs (i.e., mock trial runs) with simulated patients before doing any actual cases

Communicate Internally & With Partner

Form Your
Partnership &
Workflows

- Project goals and plan, team members
- Site review by partner
- Tele-providers need to respect the pre-existing relationships and transfer arrangements in the community
- Reasonable and measurable expectations
- Trackable & well-defined metrics to measure telemedicine progress
- [Standards and guidelines](#) to be used for this service

Standards and Guidelines

Form Your
Partnership &
Workflows

- ATA Practice Guidelines:
 - Multiple specialties including telepathology, teleICU, telemental health, teledermatology, telerehabilitation, home telehealth, diabetic retinopathy
 - Also primary and urgent care, telepresenting, and core operational guidelines
 - Remote healthcare data management
 - others

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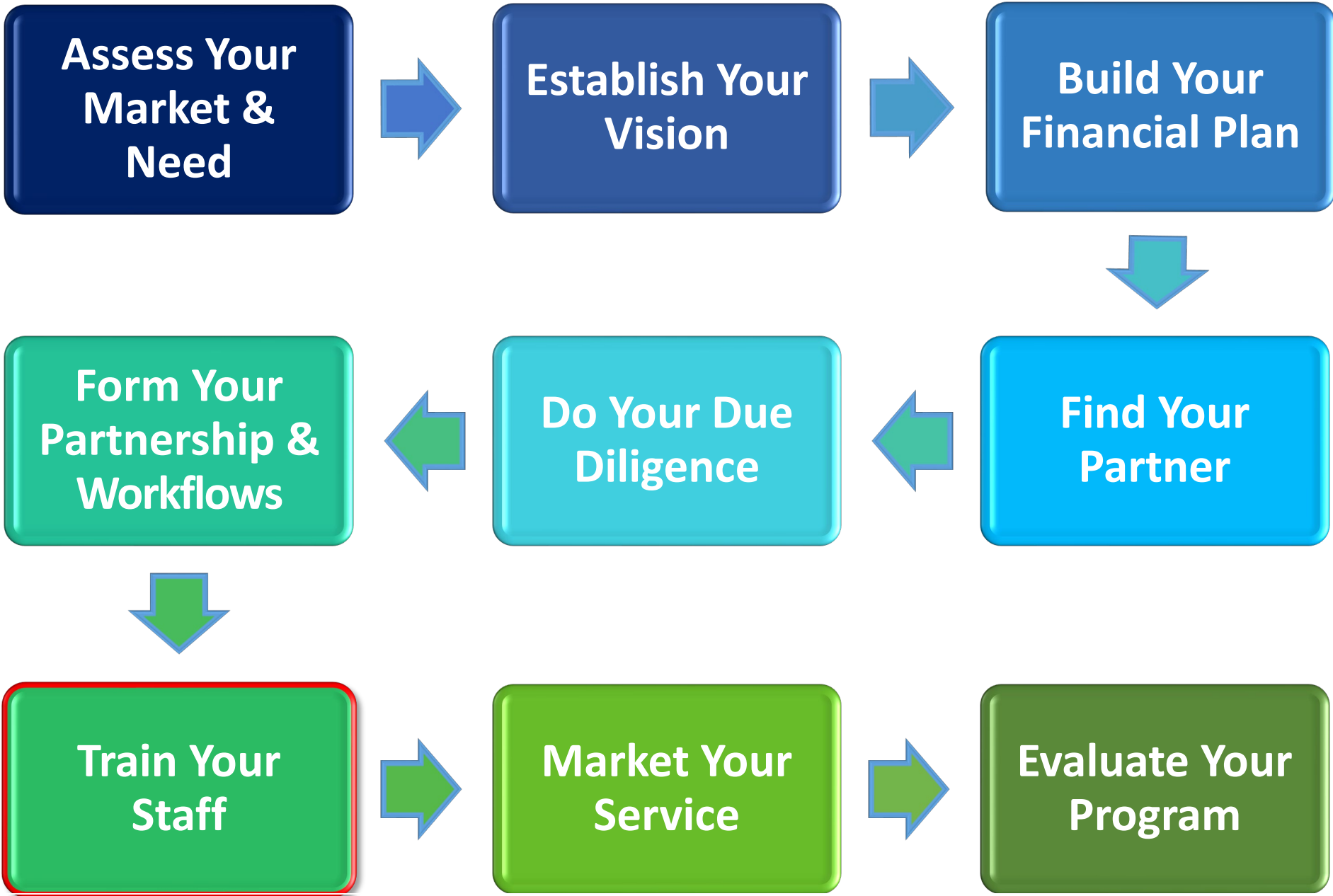
**Train Your
Staff**



**Market Your
Service**



**Evaluate Your
Program**



Train Your Providers & Staff

**Train Your
Staff**

Train Your Providers & Staff

- **Telemedicine is an integrated component of your institution or practice and should be part of the normal position expectations**
- **Determine who needs to be trained (usually everyone)**
- **Determine content & extent of training needed for each position involved**
- **Determine how to provide the training & how often (for new users as well as refresher training)**
- **Evaluate training results**

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**Market Your
Service**



**Evaluate Your
Program**

Market Your Service

Marketing Internally

Market Your
Service

- **Let people & stakeholders know what your results are**
 - **Consult numbers**
 - **Patient outcomes**
 - **Patient satisfaction**
 - **Staff satisfaction**
- **This is a team process; be transparent**
- **Invite input/suggestions**
- **Tell them in more than one way (meetings, website, emails, etc.)**

Marketing Externally

- **Let your community know there is a new service available**
 - **Press release**
 - **PSA**
 - **Website and web content marketing (SEO)**
 - **Blog with email updates/sign-up**
 - **Letter to patients**
 - **Success stories**
 - **Social media**
- **Cite partner experience & successes**

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Evaluate Your Program

Evaluation: How to Start

- View transition on a relative basis:
 - Have we improved?
 - In what ways?
 - To what extent?
- Use measurable, objective data – choose metrics in advance
- What are you concerned with?

What to Measure

- Patient-centered outcomes (e.g., clinical markers, reduced hospital stays)
- Provider-centered outcomes (e.g., diagnostic accuracy, efficiency & efficacy)
- Business outcomes (e.g., increased profits, reduced travel costs)
- Technical outcomes (e.g., faster network, more reliable communications, redundancy, better peripheral technology)
- Program outcomes (e.g., more sites added to network, number of consults, is the program growing?)

Evaluate Your
Program

Evaluation Resources

- Southwest Telehealth Resource Center Online Learning Module: [Evaluation](#)
- [Telehealth Resource Centers Toolkits](#)

Thank you!

Questions?

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