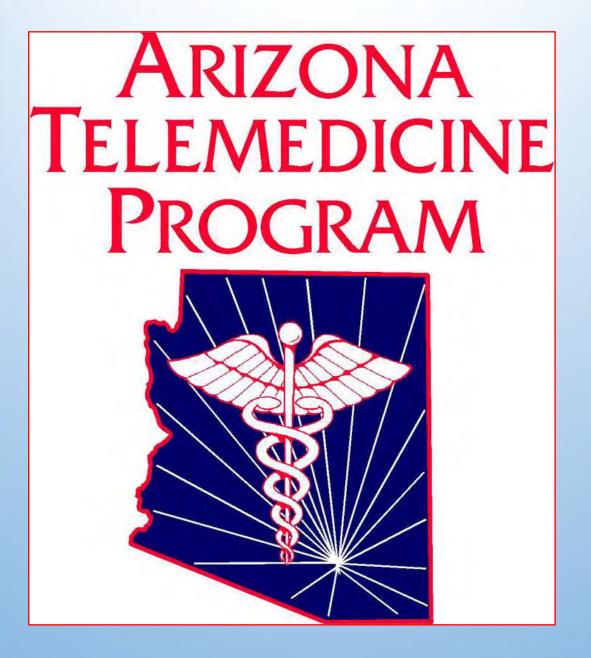
# Building a Successful Telemedicine Program

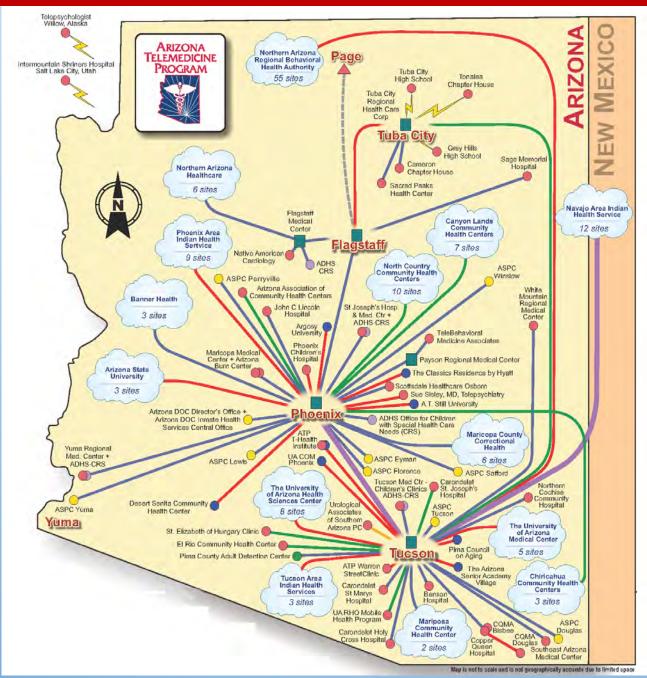
Ronald S. Weinstein, MD

Founding Director, Arizona Telemedicine Program





#### ARIZONA TELEMEDICINE NETWORK





## Where to start?







**Build Your Financial Plan** 



**Workflows** 



**Do Your Due** Diligence



**Find Your Partner** 



**Train Your** Staff



**Market Your** Service



# Assess Your Market & Need



# 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?



#### 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?







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## 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 our routine practices for the provision of health care in our County."

**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 inperson or via telemedicine: HIPAA, privacy & security, licensing, anti-kickback, liability, standard of care.



- 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.







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# 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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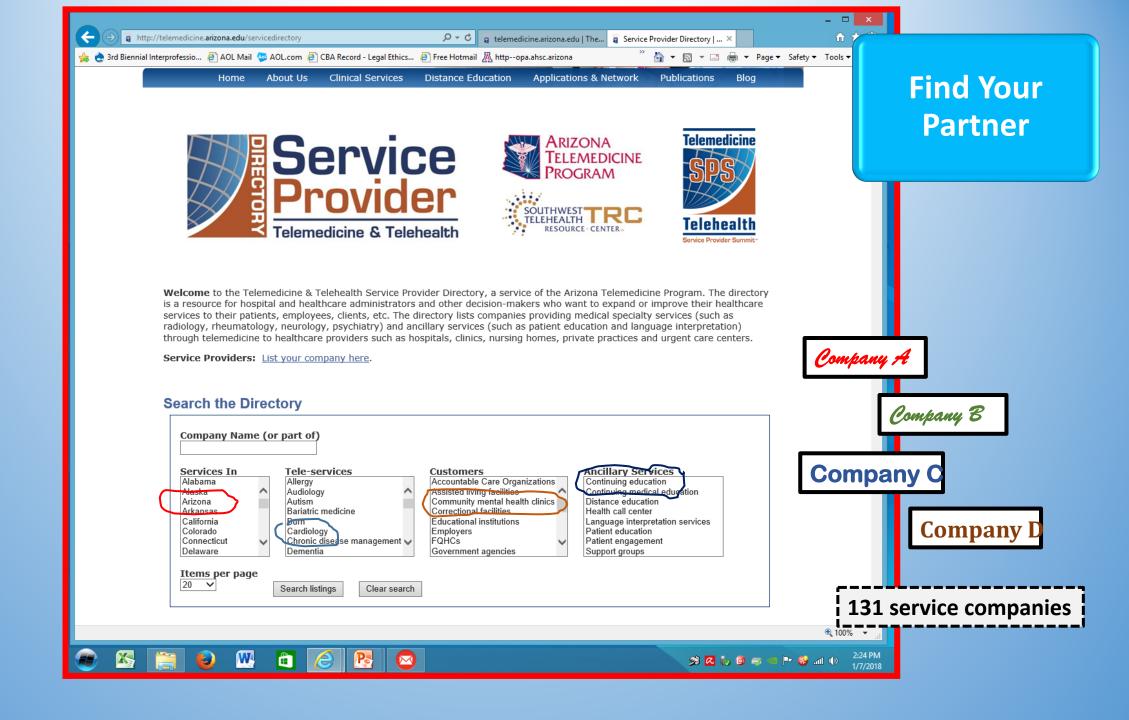
# Find the Right Partner(s)

#### TELEMEDICINE APPLICATIONS

Where to Start?

• Arizona Telemedicine Program (ATP) – Home page

ATP -- Service Provider Directory



# Find Your Partner

# **Overview:**Service Provider Directory







Number of years in telehealth business

How strong is your management team?

Where are the located – headquarters, providers, tech support?

# 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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# Due Diligence, Documentation & Your Contract

### Due Diligence: References

- 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

Do Your Due Diligence

#### The Contract



- 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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# 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
- <u>Collaborate</u> 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



- 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?

#### Standards and Guidelines



- 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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Staff



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# Train Your Providers & 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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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** 

# Evaluate Your Program

#### **Evaluation: How to Start**

Evaluate Your Program

- 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?)





- Southwest Telehealth Resource Center Online Learning Module:
   <u>Evaluation</u>
- Telehealth Resource Centers Toolkits

#### Questions!

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