



Building Successful Telemedicine Programs

Elizabeth A. Krupinski, PhD

Associate Director Assessment Arizona Telemedicine Program

Director Southwest Telehealth Resource Center

Professor & Vice Chair for Research Emory University Department of Radiology & Imaging Sciences

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What do you think are the keys to building a successful telemedicine program?





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

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





How Will Telemedicine Tie into Practice?



- Complement/expand clinical offerings or substitute when providers 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?









Establish Your Vision

Establish Vision Aligned with Mission



Vision statement: Define 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."

Establish Vision Delivery Model





Modalities

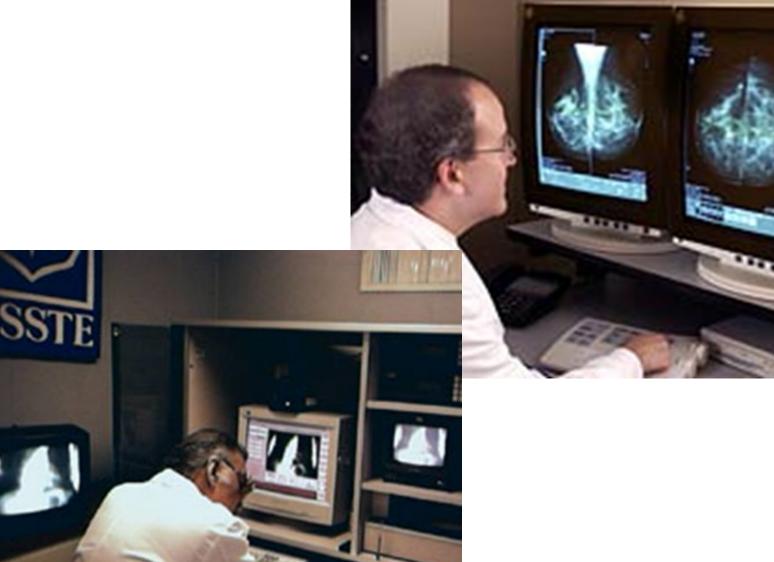
Visual Auditory "Talk is the treatment" Remote Patient Monitoring





Teleradiology











Teledermatology





Medical Imaging





Otorhinolaryngology (ENT)







Medical Imaging





Electronic Stethoscope





Music Therapy



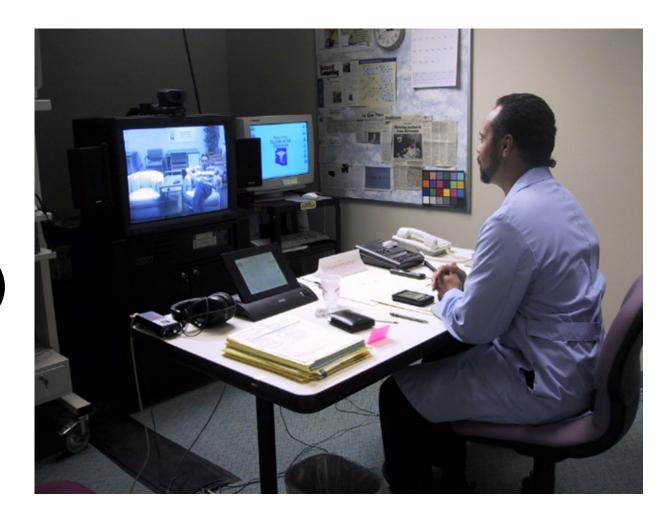
Speech Therapy





Multiple Applications

- Psychiatry/psychology
- Genetic & other counseling
- Pain management
- Nutrition (diabetes education)
- Support groups
- Hospice care







Cancer Survivor Support Group Training Patient Education









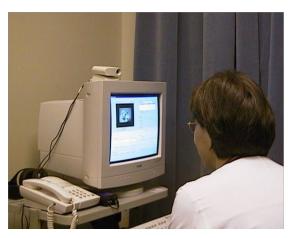




Into Homes









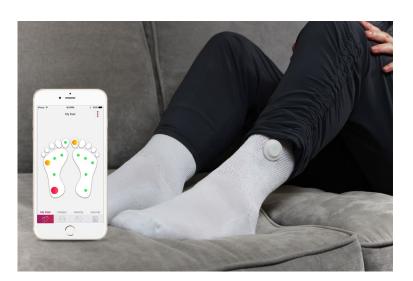


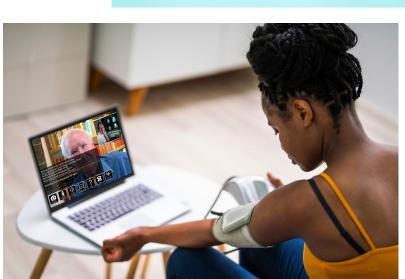






TeleICU









Teletrauma



Remote Patient Monitoring









Establish Your Vision

Reality Testing

Provider-Patient Relationship

Establish Your Vision

 Generally, once provider affirmatively acts in patient's case by examining, diagnosing, treating, or agreeing to do so, &patient accepts, relationship exists

Must establish appropriate provider-patient relationship to

prescribe







Know Legal & Regulatory Landscape

Establish Your Vision

- All laws still apply in-person or via telemedicine
 - HIPAA
 - Privacy & security
 - Licensing
 - Anti-kickback
 - Liability
 - Standard of care





Stark & Anti-Kickback Statutes



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









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 billing?











Find Right Partner(s)

- Number years in telehealth business
- How strong is management team?
- Where located headquarters, providers, tech support?
- Do you know anybody using them?
- Where did you hear about them?

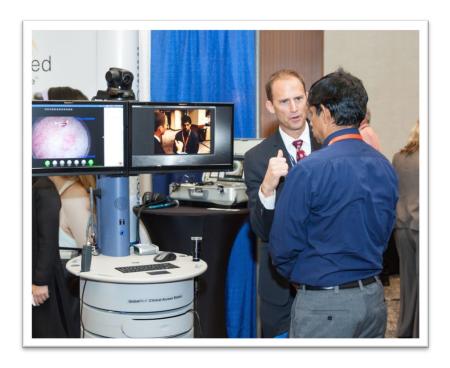




Technology Platform?

- 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 failure rate?
 - Interoperability?
 - Connections to EHRs? PACS? Does it work with your EHR & your PACS? Costs to integrate?
- Will they use whatever platform you provide?









Service Provider Option

Where to start?

Arizona Telemedicine Program (ATP) – Home page

https://telemedicine.arizona.edu/

Service Provider Directory









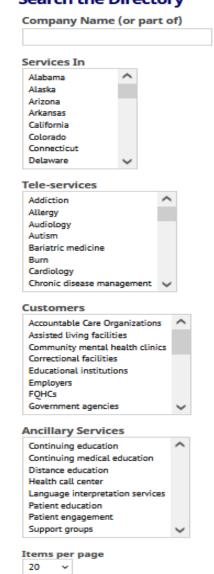


Welcome to the Telemedicine & Telehealth Service Provider Directory, a service of the Arizona Telemedicine Program. The directory is a resource for hospital and healthcare administrators and other decision-makers who want to expand or improve their healthcare services to their patients, employees, clients, 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.

https://telemedicine.arizona.edu/servicedirectory







Search listings

Clear search









Due Diligence, Documentation & Your Contract









Due Diligence: References

- Request customer list/references & 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 web
 - Go to trade shows & conferences
 - Look for user groups









The Contract

Do Your Due Diligence

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











Form Your Partnership & Integrate Telemedicine into Your Workflows

Form a Partnership



- Telemedicine service programs 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 Status Quo

Form Your
Partnership &
Workflows

- Identify & leverage proponents/champions: CMO, CNO
- Identify & embrace outliers: Reach out, make them part of process, hear & address their concerns
 - e.g., "Big Brother": eICU does not mean you are being watched 24/7 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 & Guidelines



- ATA & Professional Society Practice Guidelines:
 - Multiple specialties: telepathology, teleICU, telemental health, teledermatology, telerehabilitation, home telehealth, diabetic retinopathy
 - Primary & urgent care, telepresenting, core operational guidelines
 - Remote healthcare data management









Train Your Providers & Staff

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





AAMC Telehealth Competencies

- 1. Patient Safety & Appropriate Use of Care
- 2. Data Collection & Assessment of via Telehealth
- 3. Communication via Telehealth
- 4. Ethical Requirements & Legal Requirements for Telehealth
- 5. Technology for Telehealth
- 6. Access & Equity in Telehealth





Domain

Domain 1: PATIENT SAFETY AND APPROPRIATE USE OF TELEHEALTH

Understanding when and why to use telehealth, as well as assessing patient readiness, patient safety, practice readiness, and end user readiness.



Tiered	
Competency	/

Entering Residency (Recent Medical School Graduate)	Entering Practice (Recent Residency Graduate) All prior competencies +	Experienced Faculty Physician (3-5 Years Post-Residency) All prior competencies +
1a. Explains to patients and caregivers the uses, limitations and benefits of telehealth - the use of electronic communications technology to provide care at a distance	1b. Explains and adapts practice in the context of the limitations and benefits of telehealth	1c. Role models and teaches how to practice telehealth, mitigate risks, and assess methods for improvement
2a. Works with patients and caregivers to evaluate their readiness and access to technology to incorporate telehealth into their care during (real or simulated) encounters	2b. Works with patients and caregivers to evaluate and remedy patient and practice barriers to incorporating telehealth into their care (e.g. access to and comfort with technology)	2c. Role models and teaches how to partner with patients and caregivers in the use of telehealth







Didactic UAMS & UofA



Simulated Counselor



Simulated Patient



Observers





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 team process; be transparent
- Invite input/suggestions
- Tell them in more than one way (meetings, website, emails, etc.)





Marketing Externally

- Let your community know 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











Evaluate Your Program

Evaluation: How to Start

- View transition on relative basis:
 - Have we improved?
 - In what ways?
 - To what extent?
- Use measurable, objective data choose metrics in advance
- What are you concerned with? Ex: Patient Experience Improvement Toolkit (Reproductive Health National Training Center) https://rhntc.org/resources/patient-experience-improvement-toolkit
 - Assess patient experience; Improve clinic systems; Improve patient interactions; Improve the clinic environment; Improve staff experience and engagement







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?)







Get out there & build the future of healthcare!











ekrupin@emory.edu

@EAKrup @SWTRC1





