TELEHEALTH FOR HEALTH SYSTEMS: GUIDE TO BEST PRACTICES



Overview

Telemedicine delivers care that's convenient and cost effective – letting physicians and patients avoid unnecessary travel and wait time. Health systems that offer telehealth see increased referrals, higher patient satisfaction ratings, and better care co-ordination – especially when they offer access to limited specialty care. When used for post-surgical applications, telehealth promises to help lower readmissions. And for health systems that have accepted payment based on an Accountable Care contracts, telehealth is a way to ensure that patients stay within your system for all their care.

Historically, deploying telemedicine meant huge investments for health systems. Expensive custom hardware, costly pilot studies, and travel to pre-approved locations for patients and doctors were the norm. Today? Not so.

With innovations in technology and increased patient sophistication, telemedicine – increasingly referred to as telehealth – no longer requires costly and difficult investments. Now health systems can implement telehealth entirely with software by using smartphones, tablets, and virtually any web-enabled computer.

Advances such as built-in cameras, better sound, and higher bandwidth networks are making it easier than ever to connect with patients – not just in special clinical locations – but in their homes and offices. This window into patients' home environments gives clinicians valuable insight that can lead to better care. Without the historical downsides, savvy health systems are now looking to implement next-generation, consumer-friendly telehealth.

Figure 1: Applications of Telehealth in Health Systems



Doctor-Prescribed Telehealth:

In this model, doctors and their support staff will use telehealth as a way to better care for existing patients from their brick-and-mortar practices. At American Well, we have seen applications of doctor-prescribed telehealth across a spectrum of clinical areas, including: cardiology/heart failure, dermatology, diabetes, hospice, neurology pediatrics, post-surgical home care, psychiatry, and oncology. Such programs typically have outcome-related objectives such as handling patient concerns, medication titration, and follow-up care without travel or delay; bringing specialty care to a broader geography within a referral network; avoiding re-admissions; and improving patient satisfaction.



Online Urgent Care:

These "web walk-ins" help patients deal with minor acute, episodic conditions, much like in an urgent care setting. The value to health systems is that they keep patients in the system rather than seeking care elsewhere from exernal, disjointed settings. And the mobile app puts your brand right in the patient's pocket, so when they do have more extensive care needs, they can rely on their on-going relationship with your system.



Employer Sales:

Increasingly, health systems are selling telehealth services directly to employers as a way to provide immediate access to care, typically in concert with narrow networks and PCMH/ACO services. Such arrangements can work well for health systems (and generate substantial savings for contracted employers) by concentrating care. Telehealth kiosks are a key part of the equation for employers – rapidly replacing costly on-site clinics that typically rely on separate staff and can serve only the largest offices. Kiosks serve a real need to keep work force onsite rather than travelling to clinics.

Getting Started

Planning for an effective telehealth implementation starts with making the right decisions about people and workflow, selecting a system that's easy to activate and ready to scale, and planning a communications program that will bring physicians and staff as well as patients to table. To get started, your organization needs:

- An effective partner;
- The right internal team;
- Collaborative planning.

In this eBook, you'll learn how to select the right partner, assemble the right internal team and develop an implementation plan for a seamless telehealth launch.

Part One: Pick the Right Partner

There are a wide variety of telehealth services on the market, representing all things from high-cost, high-tech telepresence systems, all the way to low-tech/limited-value "healthcare roulette" telephone call-back models. It's critical to know what you're getting before you make the investment.

There are a few key elements any product you choose should have. The most critical are what we like to call the 5 C's: consumer-friendly, clinically-integrated, customizable, compliant with regulations, and robust clinical operations. Here's how you can identify all five in a possible partner.

1. **Consumer-friendly:** With patient-centricity driving reforms across healthcare, health systems need to start thinking like retailers. That means making it as easy as possible for patients to get the right care at the right time. From mobile apps to minimal wait time, make sure your partner has a high "net recommender score" (the percentage of people who would recommend the service to friends and family). Retailers consider this score the gold standard in customer satisfaction, so take a page from their book and make sure your telehealth partner has stellar satisfaction ratings.

Elements that consumers look for in a positive telehealth experience include a choice of doctors available; transparent physician profiles including a photo, list of professional interests, where they went to school, and affiliations; patient choice of device – especially support for video visits on mobile devices; integrated e-prescribing; easy record keeping; support for dependents; and the ability to see the same doctor again, not always be handed off to the "next available".

We always recommend that executives involved in a telehealth selection process try a visit as a patient – not a pre-planned "demo," which can always be made to look good – but a bona fide, no warning, show-up-and-use-the-system experience that will sort out players that deliver from those that have good Powerpoint presentations.

Figure 2: What Patients Want



- Ease of use
- Affordable

Figure 3: What Physicians Want



- High patient satisfaction
- Clinical integration
- Security and compliance

2. Clinically-integrated: Doctors conducting a telehealth visit need information about the patients they see, and data generated from a telehealth visit needs to end up back in your system of record. At a minimum, the telehealth system should capture information that can easily be exported to any EMR to maintain the ongoing patient record.

The best systems will also import data to a visit through realtime web services that require little ongoing oversight from your (already taxed) IT resources. But since deep EMR integrations can take time, look for a vendor that can do a phased approach, with import/export capabilities in CCR, CCD, and custom formats.

3. Customizable: In order to attract and retain patients (and drive patient lifetime value), your telehealth service needs to reflect your health system's brand and unique care expertise. In addition to basic branding principles like using your health system's logo, look for a partner that enables your own physicians to serve patients via the telehealth system. Make sure your partner can help you as needed with covering services for "lights on" 24/7 physician availability – with appropriate reporting back to your in-house physicians.

Be sure your telehealth partner can support not only mobile and web access, but also kiosks – which are gaining popularity as a way to manage urgent care overflow in the Emergency Department and urgent care clinics.

Many health systems find they want the option to build several separate "online practices" that mirror brick-and-mortar ones.

Others envision new types of practices – such as an online diabetes practice combining endocrinologists, eye doctors, podiatrists, fitness coaches, and diabetes educators.

- 4. Compliant: The telehealth regulatory landscape is evolving rapidly. As recently as 2011, there where only a handful of states that had permissible medical board guidelines and legislation that allowed any form of telehealth to take place. That has evolved favorably in the years since, but each state is different. Any vendor that promises uniform application across all 50 states either doesn't understand the complexities involved or is simply willing to gamble against the state medical boards. Make sure you pick a partner who won't put your doctors' licensure and professional reputation at stake just to close a sale.
- 5. Clinical Network Operations: While building and staffing an online medical practice is similar to managing a brickand-mortar practice, there are additional complexities and intricacies. Health systems should look for a telehealth partner with expertise and experience creating and managing a scalable workforce of providers, managing supply/demand and schedule adherence, and forecasting patient volume and needs. Your telehealth partner should also be able to ensure quality through automated data reviews (including diagnosing and prescribing patterns, and patient satisfaction scores) and periodic chart reviews, and provide ongoing telehealth training and clinical guidelines. Also of critical importance is the ability manage multi-state licensing and credentialing required for operating inter-state telehealth services.



Figure 4: Access Across Devices

Part Two: Assemble the Right Team

After you've selected a telehealth partner you need to identify the internal team that will make your implementation a success. The right team consists of a diverse group of cross-functional hospital administrators and stakeholders. If you build the team correctly, your launch will turn into an organization-wide effort rather than a small project led by only one team. In our experience, the best teams include the following key players:

Executive Sponsor

The Executive Sponsor champions the project, setting objectives, obtaining budgets, accepting responsibility for issues escalated from the Project Manager, and signing off on core documents such as the Project Charter.

Clinical Lead

The Clinical Lead is a senior clinician who will help define the major use cases and the scope of the program. They will review clinical protocols and establish new ones if needed, gather clinical input to inform the work-flow, and set quality and satisfaction standards for patients and physicians.

Project Manager

The Project Manager coordinates internal implementation and serves as the day-today contact for your telehealth partner. They should be sufficiently familiar with clinical office workflow to offer guidance during design. During implementation, the Project Manager participates in all phases of the project, from initial planning to reporting against goals.

Technical Lead

The Technical Lead is a member of your IT department who completes the discovery questionnaire and installation checklist, and works with your vendor's integration team to ensure two-way information flows.

Marketing Lead

The Marketing Lead is the point-person for branding, messaging, and communications planning. They should also own the project roll out plan and work to execute it in conjunction with your vendor.

Legal Liaison

The Legal Liaison works to review and define the legal text and disclaimers included in the telehealth system and to ensure compliance.

Early Adopters

Identifying and engaging early physician adopters is often overlooked as a key component to a successful telehealth rollout. Select a small group of "hand-raisers" who are interested in telehealth and exploring new ways to care for patients. They'll help you make telehealth work, build a suite of best practices, produce case studies to get their colleagues on board, and drive widespread adoption.

Figure 5: American Well Trends



VIDEO FOR THEIR VISIT

American Well®



Source: Cisco Customer Experience Report , 2013

Figure 7: Patient and Physician Satisfaction with American Well



Part Three: Create an Implementation Roadmap

Once you've selected a telehealth partner and assigned your team, you'll need to formalize an implementation plan. We recommend thinking about implementation in the following stages: Setup, Design, Configure and Test, and Launch and On-going. At each stage your vendor partner should take the journey with you, helping with best practices, bearing most of the technical work, and ensuring that key outstanding business and clinical issues are resolved before moving to the next stage gate.

Implementation Checklist

Stage #1: Set Up

- Schedule a project kick-off meeting to confirm the timeline and set initial clinical and operational goals for the program.
- Ask your vendor partner for in-depth product training so your project team knows the in's and out's of your new solution.
- Ask your vendor to host a technical training for your IT and development teams so they understand the solution scope and can collaborate on a realistic integration roadmap.

Stage #2: Design

- Determine your use cases, which patients will be eligible, which providers will deliver care, and how patients will access it.
- Decide on your goals and metrics for success.
- Identify early physician adopters who will help deploy telehealth, create best practices, and build case studies.
- Determine the service name, design aesthetics (including logo), and URL.
- Plan messaging and the rollout of communications to patients and physicians.
- Discuss technical design items such as data feeds and third party integration.
- Finally, review and sign off on a statement of work and project charter.

Stage #3: Configure and Test

- Create branded online and mobile practices to serve your use cases.
- Ensure any data feeds are prepared and connected.
- Conduct testing of system integration and user interface.
- Host physician and support staff training if you're using your own physician team.
- Identify any outstanding clinical issues for your use case and resolve them.

Stage #4: Launch and On-going

- Have a telehealth visit yourself and become a product evangelist!
- Communicate internally as part of launch and throughout the program.
- Execute an ongoing communications program for both patients and doctors.
- Regularly survey doctors and patients about their experience with the service.
- Set up reporting and regularly review progress against the project's objectives.

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