



PEDIATRIC TELEHEALTH

How American Well Works with Pediatric Health Systems

More than 20 million children across the United States have inadequate access to healthcare.¹ Pediatric health systems are acutely aware of this issue, and are adopting innovative solutions to better care for their patients. American Well is partnered with some of the most prestigious pediatric health systems across the country on innovative telehealth programs, including:

- Children's Health of Dallas
- Children's Hospital & Medical Center Omaha
- Children's Mercy
- Children's National
- Nemours Children's Health System
- Pediatric Associates

American Well's telehealth platform allows these health systems to tailor workflows to meet the unique care needs of pediatric patients. Here's a look at how some of our pediatric partners are utilizing American Well to customize care for a range of pediatric conditions, for urgent care to psychiatry, cystic fibrosis and obesity.

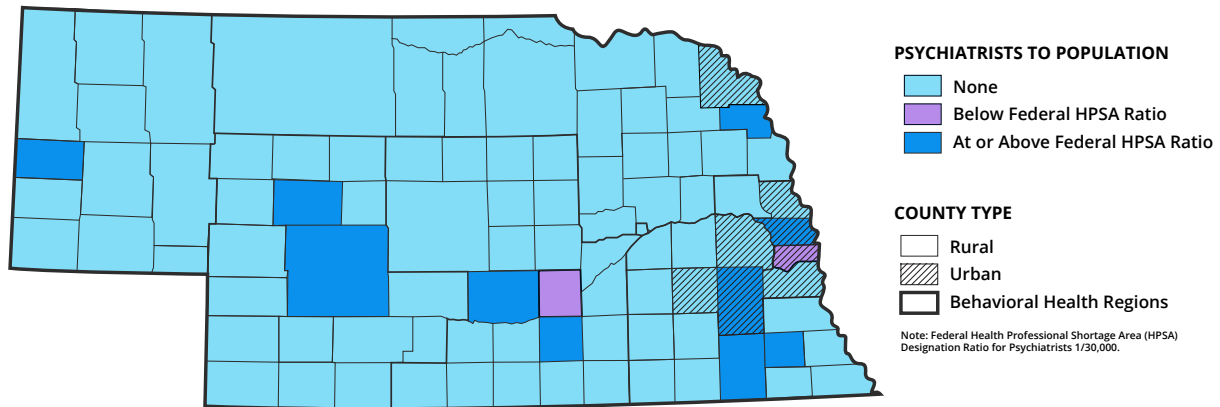
Children's Hospital & Medical Center of Omaha: Pediatric Telepsychiatry

Children's Hospital & Medical Center, located in Nebraska's largest city, Omaha, is a non-profit health system serving children in a five-state area: Nebraska, Iowa, South Dakota, Kansas and Missouri. As the only free-standing children's hospital in Nebraska, Children's is the largest practice of board-certified pediatricians, pediatric nurse practitioners and pediatric physician assistants in the area.

Nebraska, like many of the other states Children's serves, has a severe shortage of psychiatrists. With a population of roughly 1.9 million people, Nebraska only has around 156 practicing psychiatrists. Eighty-four percent of these psychiatrists are practicing in metropolitan areas, which leaves only 25 psychiatrists to cover the remaining 70,000 square miles of the state. To combat this overwhelming need for better psychiatric care access, Children's partnered with American Well to build a robust pediatric telepsychiatry program.

¹ Unfinished Business: More than 20 Million Children in U.S. Still Lack Sufficient Access to Essential Health Care, Children's Health Fund, November 2016

GEOGRAPHIC DISTRIBUTION OF PSYCHIATRISTS IN NEBRASKA



Developing a Pediatric Psychiatry Program & Workflow

The program structure was designed to have Dr. Jennifer McWilliams, a child and adolescent psychiatrist at Children’s Hospital & Medical Center in Omaha, remotely care for pediatric patients across Nebraska and Iowa. Children’s partnered with six sites throughout these two states—including primary care offices, hospital systems in rural communities, and their own physician clinics—where patients went to receive psychiatric care remotely. At each of these sites, a room was designated for remote psychiatry visits with Dr. McWilliams.

Through this workflow, Dr. McWilliams delivers general pediatric psychiatry, including evaluations and follow-up appointments, for children ages four to 19. The breakdown of conditions is very similar to what Dr. McWilliams sees in outpatient clinics: depression, anxiety, ADHD, and autism. “Basically, anything I see in my office I’ll see via telehealth,” says Dr. McWilliams.

Children’s has done significant research and due diligence into the prescribing of controlled substances via telehealth. Through talking with the U.S. Drug Enforcement Administration and examining the Ryan Haight Act, Children’s determined they are in full compliance with the prescription rules for controlled substances via telehealth. Because all of Children’s patients are at a primary care office, hospital or physician clinic when receiving care, Dr. McWilliams can safely prescribe and adjust controlled substances while in full compliance with the law.

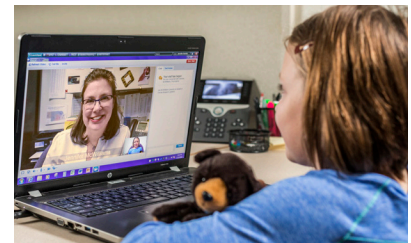
Results: Increased Demand for Telepsychiatry

In one year, Dr. McWilliams conducted more than 600 telepsychiatry visits. The positive response caused a surge in demand from clinics who wanted access to these telepsychiatry visits. Due to the demand, Children’s has since expanded to two additional clinics, with pending requests from a half dozen more.

Children’s was also able to reduce windshield time for patients and providers. If it weren’t for telehealth, Dr. McWilliams would have had to travel to each of the six sites, which would equate to around 26 hours of windshield time driving per week. If the patients were required to travel to Dr. McWilliams, some of them would be traveling up to eight hours a day for what could be a twenty-minute appointment.



Dr. McWilliams conducts a video visit



Through the program, Dr. McWilliams has also been able to reduce the no-show rate of follow-up psychiatry appointments by 50%. Follow-up no-show rates for in-person psychiatry appointments are around 10%; however, with telehealth those no-show rates have dropped to 5%.

600+
visits conducted by 1 psychiatrist, with plans to expand to more

50%
Reduction in psychiatry follow-up appointment no-show rates

26^{HRS}
Weekly windshield time avoided due to telehealth

Nemours Children’s Health System: Urgent Care and Specialty Pediatric Care

Nemours Children’s Health System, an internationally recognized children’s health system that owns and operates more than 80 care locations spread throughout six states, including two freestanding Children’s Hospitals, partnered with American Well to develop a comprehensive pediatric telehealth program.

The telehealth program spans the continuum of pediatric care, from direct-to-consumer telehealth for urgent care, to specialty care such as post-hospitalization follow-up, obesity and clinical trials.

Urgent Care Telehealth

Nemours launched its direct-to-consumer urgent care telehealth program, CareConnect, and now offers live video visits with its board-certified pediatricians to patients and their families.

The health system also utilizes [American Well’s Exchange](#) to make their pediatricians available on other healthcare systems’ telehealth platforms. This is particularly relevant to adult health systems that may not have pediatricians or pediatric experts on staff. For Nemours, the Exchange not only takes its trusted brand further, it extends their clinical network for referrals and pediatric consults, allowing physicians to see new patients in every state CareConnect operates.



Nemours’ pediatric urgent care telehealth service

In two years, Nemours enrolled more than 17,000 patients in its urgent care program, and 97 percent of patients or their families said they were “highly satisfied” with the service.

Specialty Care Telehealth

In addition to its successful pediatric urgent care telehealth service, Nemours has also deployed telehealth for specialty care. Below are a few examples of Nemours’ specialty care programs:

Obesity clinic: Nemours operates a pediatric multidisciplinary obesity clinic in Wilmington, Delaware, which is comprised of psychologists, dieticians and clinicians. The clinic treats kids from all over the state, who in many cases must drive long distances to get care. To ease the burden of travel on these patients and their families, Nemours began offering follow-up appointments via telehealth. The in-person follow-up

appointments typically saw high no-show rates due to the distance families needed to travel. After they began offering this visit via telehealth, Nemours ran a survey to gauge patient and family satisfaction and found that 90 percent of patients and their families were “very satisfied” and 10 percent were “satisfied” with the care received.

Schools: Nemours also created the first-ever school-based telehealth clinic at a school for children with special needs in Orlando. Using American Well CarePoint, a telemedicine cart, Nemours physicians provide on-site care to students, and via American Well’s multiway video feature, a student’s parents can also be included in the visit for more collaborative care.

Expert Care & Clinical Trials: Dr. Richard Finkel, a Nemours physician who is internationally known for his research into and treatment of neuromuscular disorders, has been using telehealth to see children with spinal muscle atrophy. With telehealth, Dr. Finkel expanded his outreach to screen patients for clinical trials and helps provide guidance to families across the country who otherwise would have to travel long distances to see him.

Post-hospitalization: When patients are discharged from a Nemours facility, the health system provides a 24-to-48-hour telemedicine check-in call. This allows patients to check in on their time and ask questions. In addition, a lot of Nemours surgical sub-specialties are using telehealth for post-op visits with patients and their families. “It’s a win-win not only for the patients and families—who really appreciate the convenience of not having to drive to see their physician—but also for our physicians,” says Carey Officer, Operational Vice President at Nemours.



Nemours’ pediatricians can connect with school nurses and students for remote visits via American Well’s Telemed Tablet

Children’s Health: Cystic Fibrosis, Teen Substance Abuse, School-Based Care

Children’s Health, a pediatric health system located in Dallas, Texas, has a large, diverse pediatric patient population spanning both urban and rural communities. Almost 75 percent of the health system’s patients are on Medicaid and deal with health access and socioeconomic issues that prevent them from getting the care they need. Their needs range from asthma management (over 556,000 children in Texas have asthma) to obesity programs (15% of kids in Texas are obese) and mental health counseling.

Due to the large footprint Children’s serves and the number of at-risk pediatric patients within its umbrella of care, the health system viewed telehealth as something its pediatric population could benefit from.



School-Based Care

Children’s Health launched its school-based telehealth program in 2013, starting with a handful of schools. Today, the health system is in more than 100 schools in the area and growing. “We place telemedicine carts in nurses’ offices so the patient and school nurse can connect with board-certified pediatricians to assess and

treat everything from pink eye and rashes to asthma and strep,” says Julie Hall Barrow, EdD, Vice President of Virtual Health and Innovation at Children’s Health. “This has gotten an excellent reception from parents, who don’t have to miss work to take their child to a doctor’s appointment, as well as from the patient, who doesn’t need to leave school to see a physician.”

Children’s also recently launched a school-based telebehavioral health program in six high schools. These patients have behavioral health visits with physicians from their school counselor’s office, again reducing school absenteeism by bringing behavioral health services to the patient where they are. “Giving these students remote access to behavioral health services — which are typically hard appointments to get — has really been a bright light for our school-based program,” says Hall-Barrow.

Finding Where Telehealth Fits within Hospital Service Lines

Children’s Health has also expanded virtual health through its hospital service lines, and it is currently using telehealth for food and allergy, nutrition, orthopedic surgery follow-up, cystic fibrosis counseling, blood disorders, teen substance abuse and more. These use cases were spearheaded by physician champions who saw a way for telehealth to fit into their practice and make it better, and the results have been fantastic. As an example, Children’s has some cystic fibrosis patients who live over two hours away from the health system. “We were running into a lot of compliance issues with these patients because they were having difficulty managing their care, but also found it hard to drive the two hours for a visit,” says Hall-Barrow. “As soon as we implemented the cystic fibrosis telemedicine program, we saw a lot of improvement with them keeping their appointments and meeting with the provider.”

The health system has seen similar results with its teen recovery program for patients with substance abuse issues. This program has had low compliance because these patients typically need to visit Children’s Health clinics three times a week. But with telemedicine, they can complete their individual visit and family visits remotely, which has resulted in positive feedback.

Whether you’re a pediatric health system looking to deploy urgent care telehealth; integrate telehealth into your nurse triage line; build a robust school-based program; or deliver specialty pediatric services to unique populations, there are health systems across the country successfully running these types of programs. To learn more about pediatric telehealth, [click here](#).