

# *Expanding Capacity through Telehealth*

September 18, 2015

**Joey Marie Horton**  
**Executive Director**

[jhorton@NoCoFamilyHealth.org](mailto:jhorton@NoCoFamilyHealth.org)



**Mary Zelazny**  
**CEO**

[Maryz@flchealth.org](mailto:Maryz@flchealth.org)



# *Telehealth & the Triple Aim*

## **Improved Access:**

- Increased access to specialists, primary care doctors, behavioral health providers, remote home monitoring

## **Better Care:**

- Reduced readmissions into the hospital
- Better access to clinical data (remote monitoring)
- More clinical educational opportunities, expertise/ knowledge sharing
- Care coordination

## **Lower or Stabilized Costs:**

- Remote monitoring enables patients to be monitored at home
- Lower utilization rates of ambulatory care
- Better access = lower costs per patient

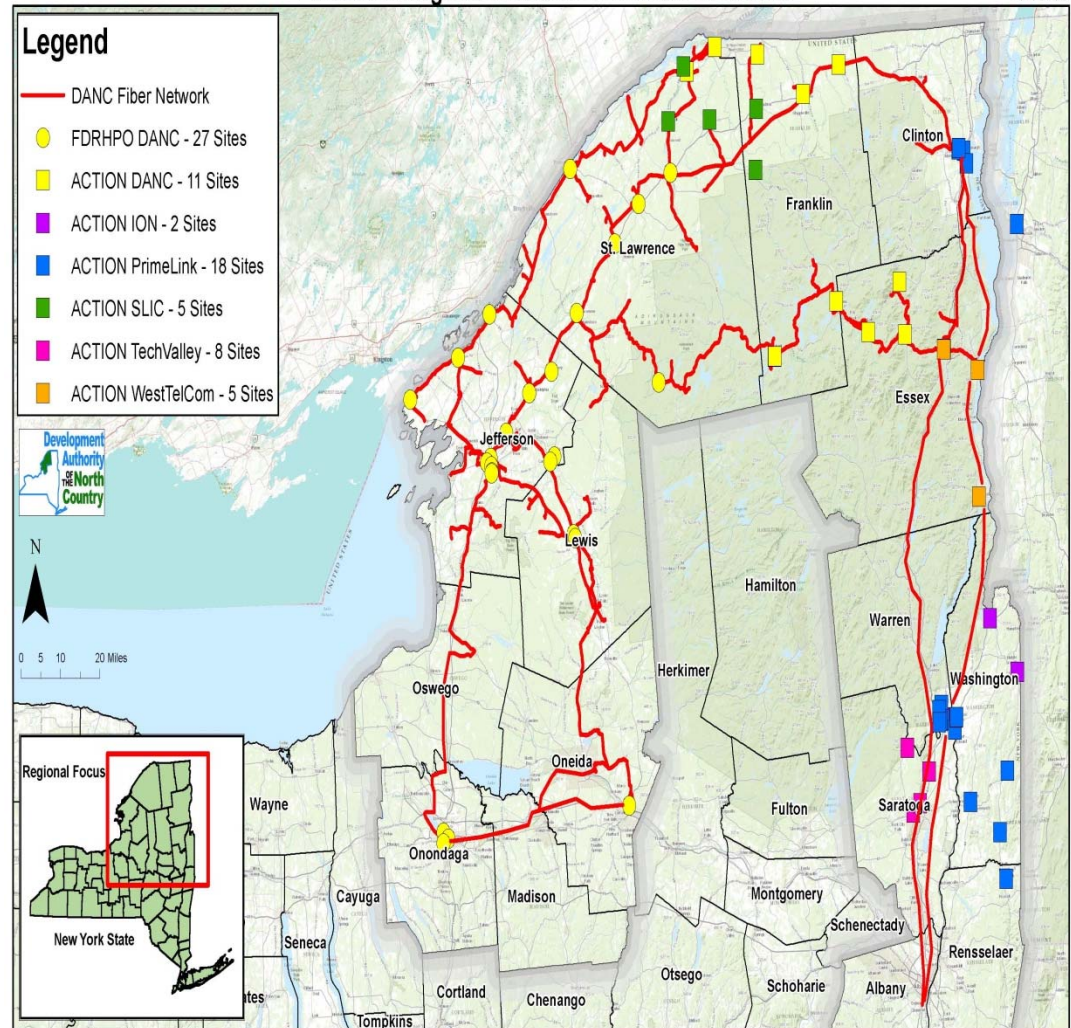
# The North Country Infrastructure



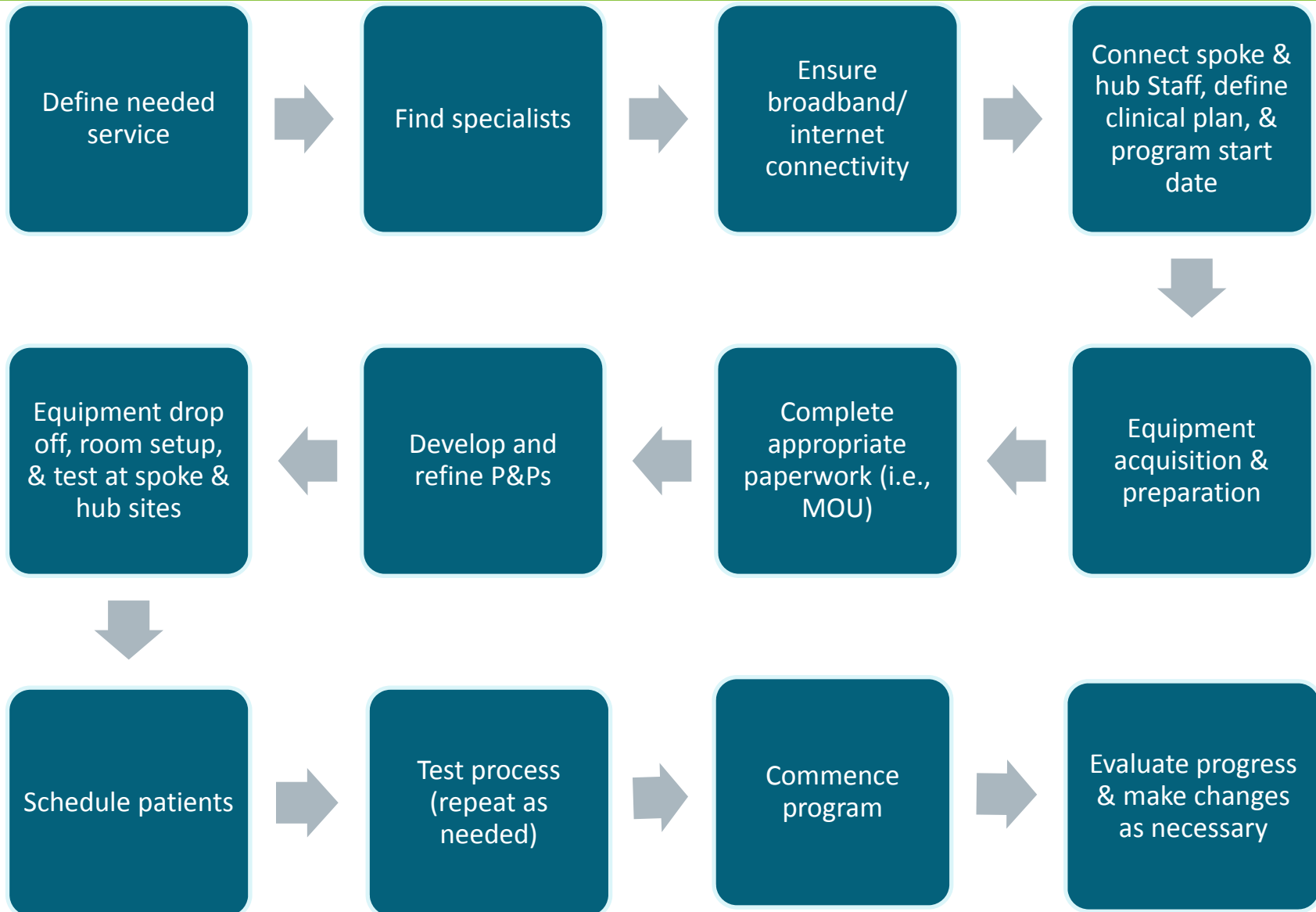
"Building a Strong North Country Healthcare System"

Fort Drum Regional Health and ACTION Locations

4-15-13



# Implementing telehealth is a process, not a destination



# Lessons Learned

1. Develop your joint clinical plan early: What clinical needs can be met using telehealth solutions?
  - a. Begin where there is momentum
2. Must have clinical, administrative, and IT champions at both the hub and spoke sites
3. Ensure quality internet connection and appropriate bandwidth
4. Develop written policies and procedures that are shared by both Hub and Spoke sites
5. Understand the costs in money, time, talent, and energy and the potential benefits
6. Know your payer mix and understand reimbursement
7. Develop metrics for success aligned with organizational goals (i.e. DSRIP)
8. Collaborate with partners like NETRC, ATA, and PPSs
9. Always remember, telehealth is not about fancy equipment and technology; it is a **tool** used to improve access and enhance quality of care

# The Finished Product...

Here are some examples.....

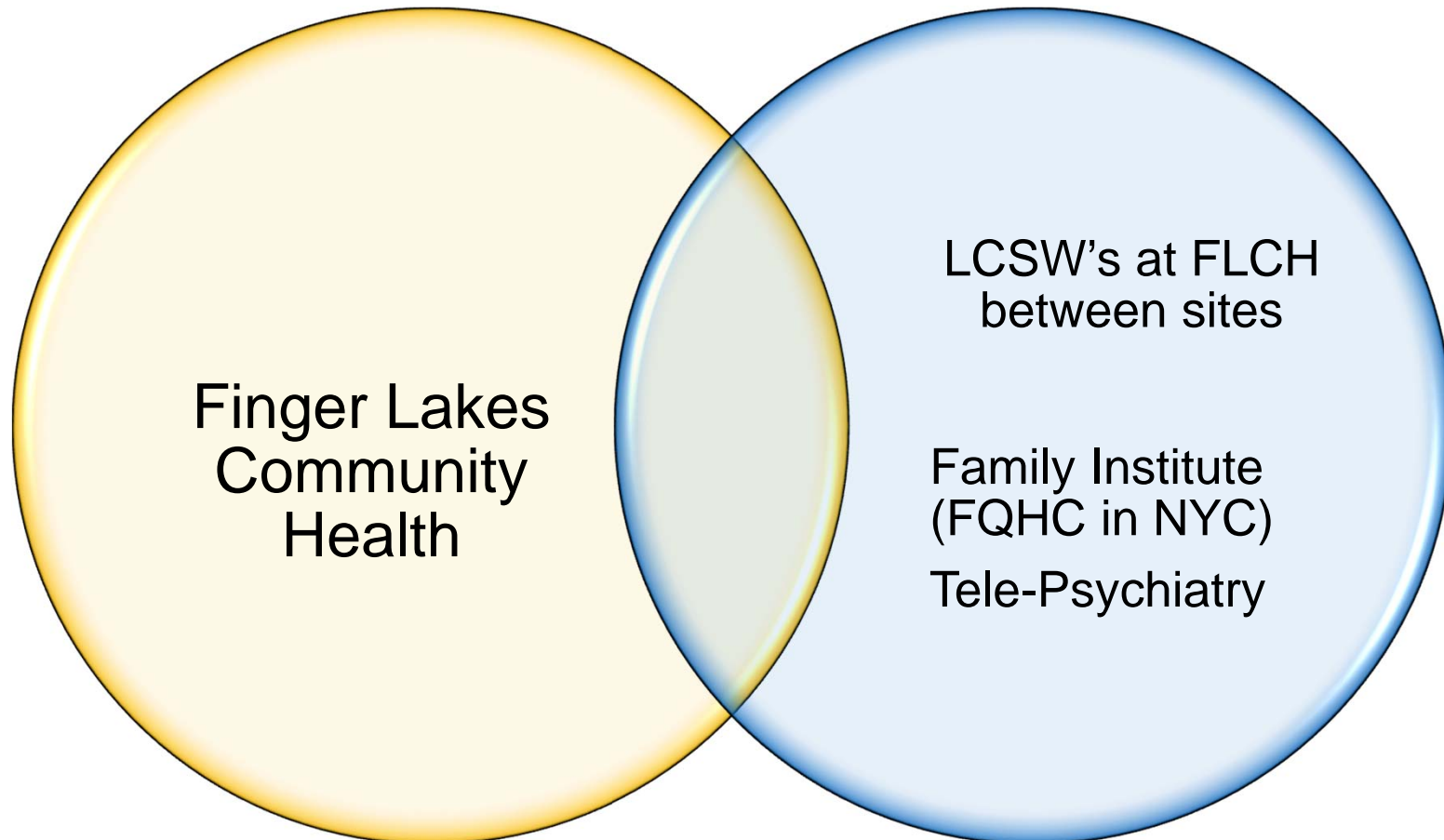


# *FLCH Telehealth Services*

Services offered at our Health Centers using telehealth:

- Psychiatry – Adults & Children over 5yrs.
- Counseling Services (LCSW)
- Pediatric Neurology
- Pediatric Dentistry
- HIV/AIDS Care
- Diabetic Retinopathy
- Remote Home Monitoring
- Hep C Treatment
- Nutrition Therapy
- Pulmonology
- Dermatology
- Other:
  - Interpretation Services
  - Provider Precepting
  - Provider Clinical Meetings
  - Administrative Meetings
  - Staff Training

# *Tele-Mental Health*



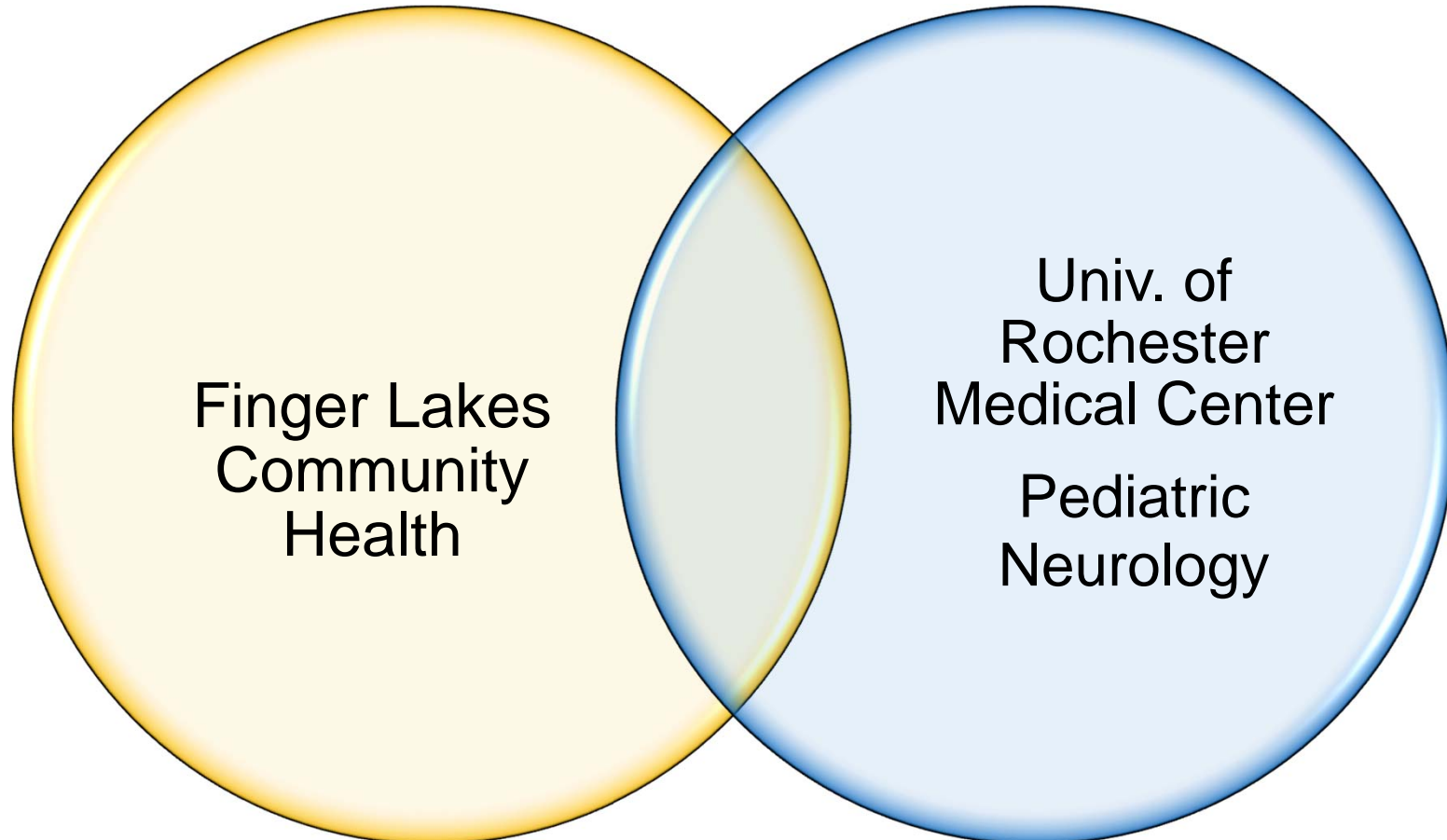


# *Tele-Mental Health Outcomes 2010-2014*

- 63% had decrease in PHQ-9 scores
- Mean time to consult = 19 days
- Mean time to treatment = <24 hours
- 0% referred to Emergency Room
- 17% referred to higher level of care
- Increased interaction between primary care provider, LCSW and psychiatrist

**High patient and provider satisfaction!**

# *TelePeds Neurology*



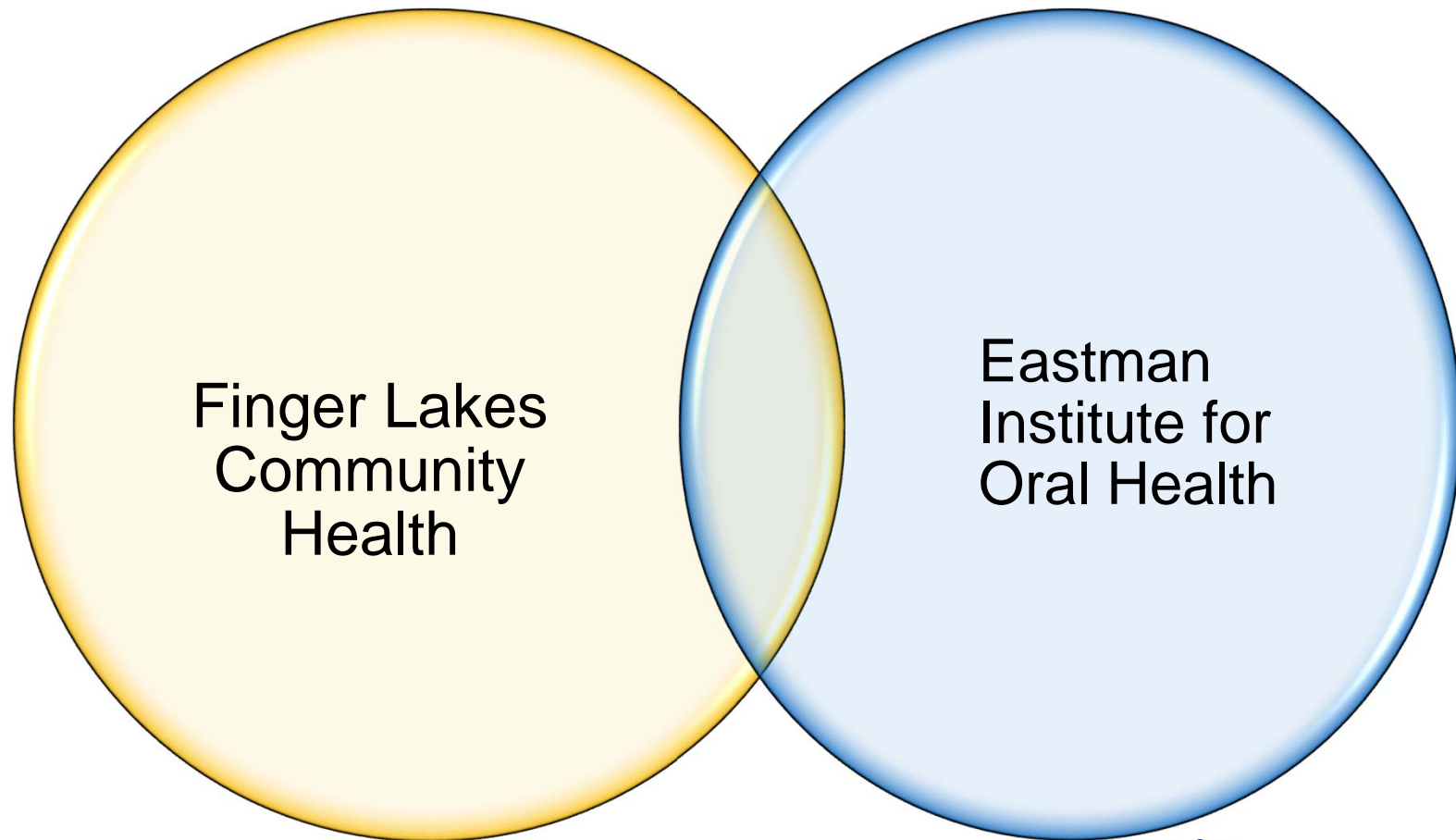
# *TelePeds Neurology Outcomes*

Focus Population: Children with poorly controlled symptoms of ADHD or other diagnoses.

- Decreased time to treatment (38 days vs 60 days). Exceeded national averages on NCQA performance measures
- 90% had changes or additions to their medication regimens
- 95% diagnosed with mental health co-morbidity
- 32% started mental health medications
- 100% referred to behavioral health
- 40% showed improvement in function at school and home

**High patient and provider satisfaction!**

# *TelePeds Dentistry*



# TelePeds Dentistry Outcomes

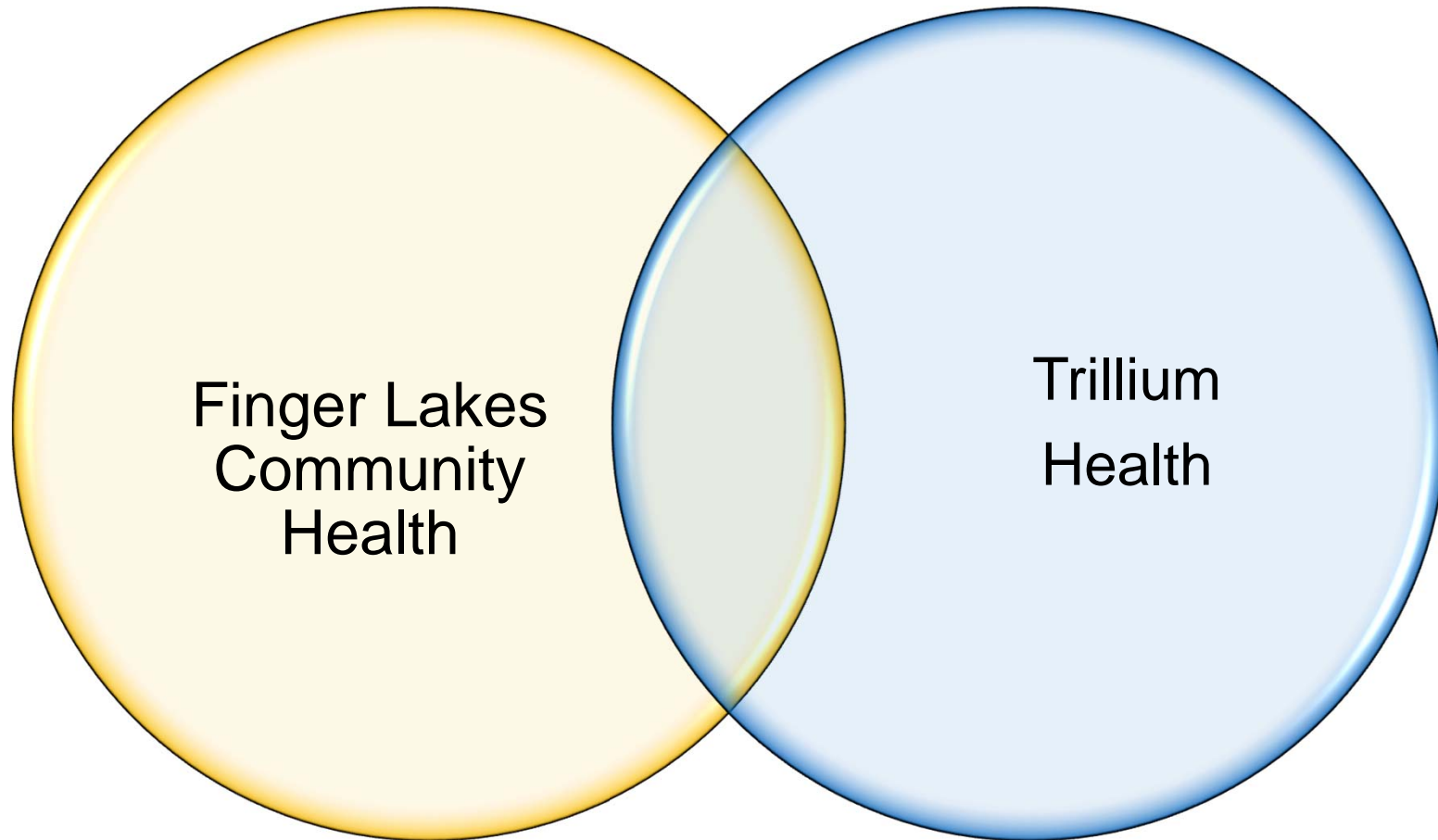
## 2013-2015 (to date) Outcomes:

- Decreased travel to Pediatric Dentist (average 54 miles each way). From 5 in person visits down to 2 in person visits. All other visits done virtually.
- Decrease in “no show” rates by 76%.
- Improved access to care: 97% of children referred had **all** treatment completed.
- Increased interaction between dental providers and Dental Specialist
- Children’s 1<sup>st</sup> appointment wait time went from 8 months to current level of 3 weeks.

***Over 400 children have gone through this program. Currently we have over 85 more children on registry preparing for treatment.***



# *TeleAC (HIV/AIDS Care)*



# *TeleAC (HIV/AIDS Care)*

- Adherence to HIV appointments: from 86% to 100%.
- Adherence to PCP appointments: from 57% to 91%.
- Negative Viral Load: from 29% to 67% of patients.
- PHQ 9 screenings: from 30% to 80% of HIV patients.
- Cervical PAP: from 66% up to 100% for HIV patients.
- HCV Screening: from 57% up to 100% for HIV patients.

**Data demonstrates the benefit of offering specialty HIV services within the primary care setting**

# *Resources*

## **American Telemedicine Association**

<http://www.americantelemed.org/>

## **Northeast Telehealth Resource Center**

<http://netrc.org>

## **Medicaid Update – March 2015, 31(3) – Telemedicine Coverage to be Expanded**

[http://www.health.ny.gov/health\\_care/medicaid/  
program/update/2015/2015-03.htm#tel](http://www.health.ny.gov/health_care/medicaid/program/update/2015/2015-03.htm#tel)