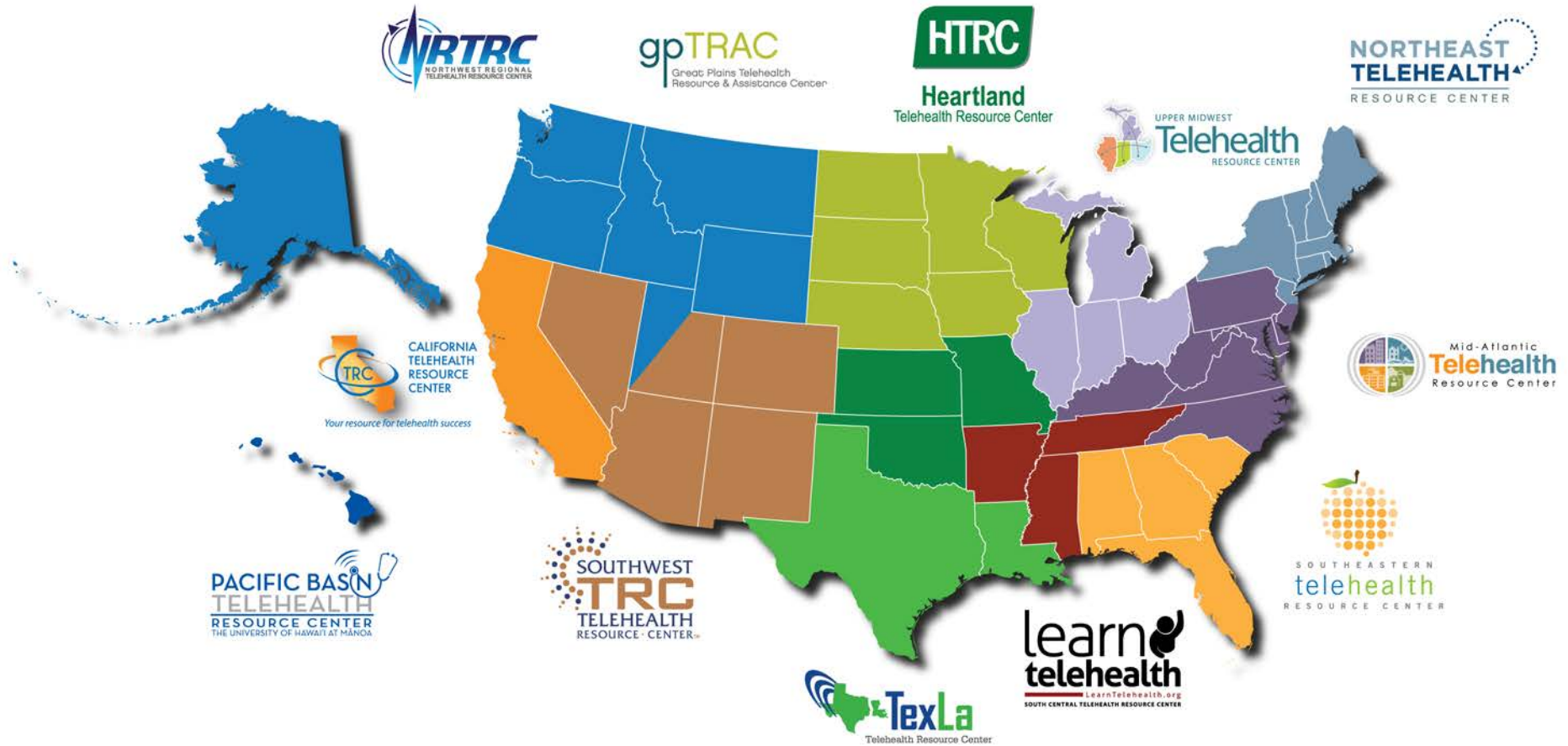


Telehealth Landscape and Experience in Maine and Beyond

September 22, 2017

Danielle Louder – Program Director
Northeast Telehealth Resource Center
Co-Director - MCD Public Health

TelehealthResourceCenters.org



2 National Resource Centers

NRTRC	gpTRAC	NETRC
CTRC	HTRC	UMTRC
SWTRC	SCTRC	MATRC
PBTRC	TexLa	SETRC

12 Regional Resource Centers

About Us



www.netrc.org



**MCD
Public Health**
Insight Innovation Impact

www.mcdph.org

— THE —
University of Vermont
MEDICAL CENTER

www.uvmhealth.org

Who do we serve?

- ✓ Individual Providers
- ✓ Community & Urban Hospitals
- ✓ Academic Institutions
- ✓ National, State, or Regional Associations
- ✓ Federal, State, Regional, or Local Government Agencies
- ✓ Legislators/Policy makers
- ✓ Health Systems
- ✓ Rural Clinics
- ✓ Federally-Qualified Health Centers (FQHC)
- ✓ Critical Access Hospitals (CAH)
- ✓ Primary Care Clinics
- ✓ Ambulatory Care Centers
- ✓ Nursing Homes
- ✓ Schools
- ✓ Vendors
- ✓ *and many others!*

We provide:

- ✓ Short and long term technical assistance services for organizations
- ✓ Education for the telehealth workforce
- ✓ Access to educational materials
- ✓ Access to specialized tools + templates
- ✓ Access to telehealth experts willing to share their experiences
- ✓ Monthly newsletter updates and other alerts on telehealth in the northeast
- ✓ Support for collaboration that fosters a favorable environment for telehealth
- ✓ *And more!*



Where is telehealth?

- Academic Medical Center
- Airplane
- Boat
- Celebrity Tour Bus
- Coal Mine
- Community Health Center
- Community Mental Health Center
- Disaster Zone
- FQHC
- Home
- Hospital



Public Health Dept.
Public Library
Nursing Home
Oil Rig
Prison
Refugee Camp
Retail Pharmacy
Rural Health Center
Public School
Space Ship
And Many More!

Select Telehealth Uses

- Behavioral Health
- Burn
- Cardiology
- Dentistry
- Chronic Care Management
- Dermatology
- Education / Grand Rounds
- Emergency Services / Trauma
- Family Planning
- Genetics
- Home health
- Infectious Disease
- Medication Adherence
- Neurology /Stroke care
- Obstetrics and Gynecology
- Oncology
- Ophthalmology
- Pain Management
- Pathology
- Pediatrics
- Palliative Care
- Primary Care
- Psychiatry
- Radiology
- Rehabilitation
- Rheumatology
- Surgical
- Wound Care
- *And more!*

Benefits of Telehealth

Increased patient access to providers (travel)

Timelier access to providers

Improved continuity of care and case management

Reduced ER Utilization

Improved access to training and other educational services

Cost savings in care delivery

Reduction or prevention of complications, decreased readmissions

Patient Satisfaction

Challenges for Telehealth

Start-up costs
and connection
fees

Availability of
broadband or
other

Need for training and
workforce development

Increase in staffing
demand in some
instances

Provider push back

Confusing legal and
regulatory landscape

Licensure
restrictions

Reimbursement
inconsistencies

Reimbursement for Telehealth

Reimbursement depends on the state and payer:

Medicare: has set specific (limiting) requirements

- Patient site must meet rural eligibility requirements – see Medicare [Payment Eligibility Analyzer](#)
- Covered services expand each year, however key limitations remain: [Telehealth Services Fact Sheet 2017](#)

Medicaid: reimbursement and requirements vary greatly state by state – 48 states cover in some form (~~Ø~~ MA, RI)

Private Payers: laws governing reimbursement by private insurers in 35 states and Washington D.C., but language varies significantly, and not all mandate coverage

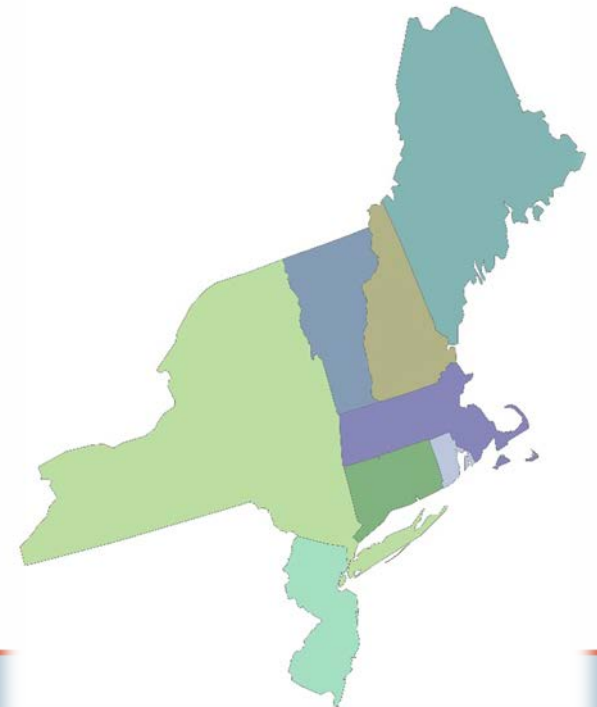
[2017 State Telehealth Laws & Reimbursement Policies](#)

Center for Connected Health Policy

Telehealth Policy in the Northeast

Current Regional Policy:

- Private payer parity:
CT, ME, NH, NJ, NY, RI (2018), VT
- Medicaid coverage:
CT, ME, NH, NY, VT
- Ongoing activity in MA, but still lacking parity laws



Telehealth Policy: MaineCare

MaineCare: Telehealth reimbursement through legislative rulemaking process

- Updated [MaineCare telehealth rules](#) went into effect April 2016 - significant changes include removing prior approval process, originating site fee, and adding telemonitoring services
- Requires secure, HIPAA “compliant” equipment and patient choice/consent
- Also established new limitation for FQHCs regarding use of encounter rate for telehealth services; strongly contested among stakeholders - amended language in progress [10-144-101 Ch. II, Sec. 40](#)

Telehealth Policy: ME Private Parity Law

- **Enacted in 2009** – ME and NH first in the northeast
- Mandates **coverage of live audio/video**, not store and forward or remote patient monitoring
- Language includes **coverage parity**, but not payment parity
- Does not specify eligible providers or eligible originating sites (patient location)
- [LD949](#) – would expand current private payer law to include asynchronous and telemonitoring; also requires insurers to provide professional liability insurance which covers services provided via telehealth

Telehealth Policy: Implications and Challenges

Enacted December 2016: Telemedicine Standards of Practice adopted: ME Boards of licensure for [Medicine](#) and [Osteopathic](#)

Continued Challenges Across Payers:

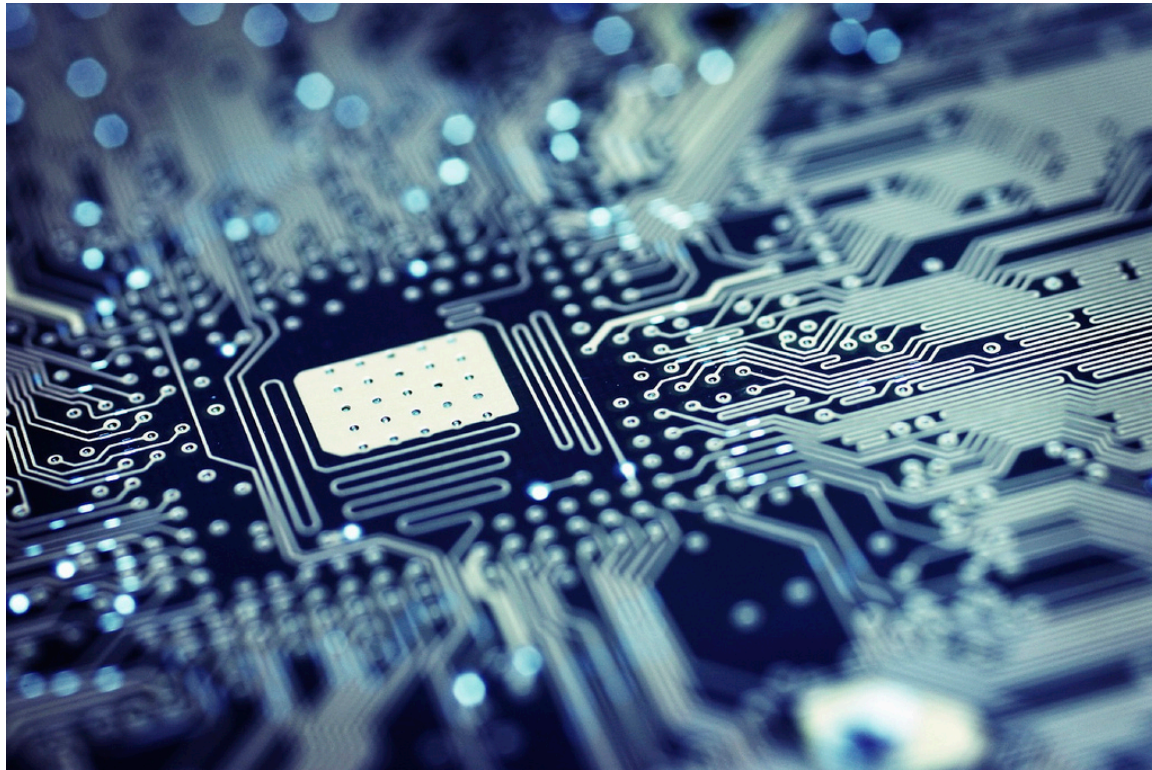
- Inconsistent interpretation and/or implementation
- Limitations on covered services and modalities – i.e. no reimbursement for store-and-forward/asynchronous (yet)
- Coverage versus payment parity potentially problematic

In 2017 – 44 states have introduced over 200 pieces of telehealth related legislation!



Telehealth Technology

From smartphones to robots, there are a variety of tools available!



Off-the-Shelf



Peripherals



Telemedicine Carts



Field Kits



Touch Screen Laptop



Stethoscope



Pulse Oximeter



12-Lead ECG



Ultrasound



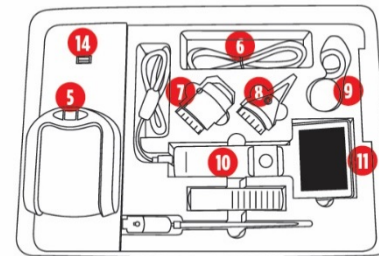
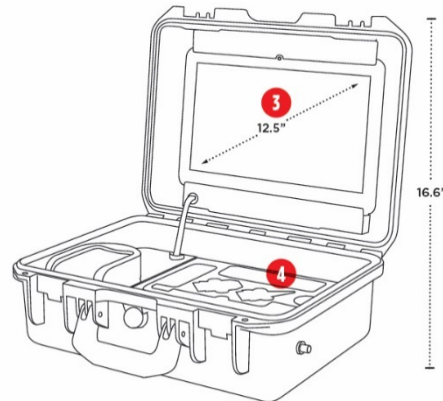
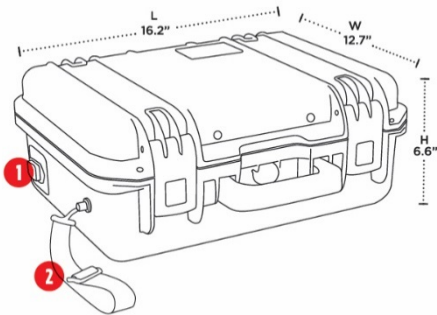
All-in-one (AIO) Scope



Speakerphone



HD Webcam



Remote Presence



In the Northeast, Telehealth Gets Creative With Good Results

mHealth Intelligence



<http://mhealthintelligence.com/news/in-the-northeasttelehealth-gets-creative-with-good-results>

Primary Care by Boat

Maine Seacoast Mission (ME):

- 110 years old with history of spiritual and medical care provided by nurses visiting the islands.

Program Description:

- Telemedicine started 14 years ago to four islands visited by Sunbeam - going off island for a medical appointment can be a 2- 3 day trip.
- Primary Care provided on 5 islands, 3 by Sunbeam and two land-based units operated by trained medical assistants.



Pediatric Teledentistry

Finger Lakes Community Health (NY):

- Community/Migrant Health Center (FQHC) with 9 sites.

Program Description:

- Uses point-to-point telehealth network to connect clinic pediatric patients in rural NY with dental providers in Rochester, NY.
- Benefits include:
 - Decreased travel time for patient/families and Health Liaisons
 - Treatment and follow-up compliance rates > 90%



TeleWOW!

Eastern Maine Medical Center (ME):

- 411-bed medical center - medical staff of more than 450 physicians provides three-quarters of the primary-care services offered in the Bangor area, as well as specialty and intensive services to northern two-thirds of the state
- WOW! Program: Way to Optimal Weight - tiered program for children and adolescents (age 4-19), with body mass index (BMI) at or above 85th percentile - designed for children who are at higher risk for weight-related health problems

Program Description:

Multidisciplinary visits live videoconferencing:

- MSW, clinician, and nutritionist take turns
- Provides program access to patients in some of Maine's most rural communities
- Patient and family satisfaction high

Weight loss program for kids at EMMC works to boost confidence, teach healthy lifestyles



Courtesy of EMMC Community Relations

School-based Telepsychiatry

Athol Hospital/Heywood Healthcare (MA):

- Critical access, non-profit acute care hospital serving 9 Communities in North Quabbin Region.

Program Description/Setup:

- Collaborative program between hospital, school district, and behavioral health, supported by grant funds.



Photos courtesy of AMD Global Telemedicine

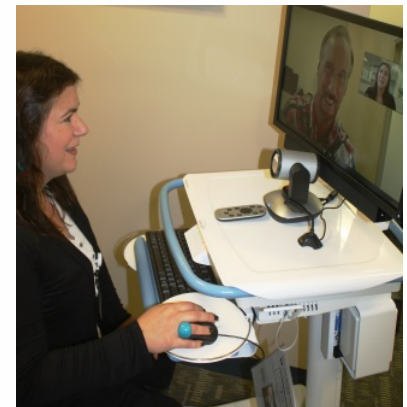


Launched one school last year – funding from MA HPC to expand to 2 new sites this year!

Telepsychiatry in a CHC

CHC of Cape Cod

- Staff Psychiatrists conduct Telepsychiatry visits throughout our 3 locations using real-time video conferencing
 - Increases access to Behavioral Health appointments, Decrease transportation barriers, and Reduce the cost of providing quality care
 - Patients have saved lost wages in time away from work and reduced transportation needs
 - Increases efficiency in Controlled Substance RX Management
- Sustainability Plans:
 - Continue to bill for visits; expand to additional Providers
 - Increased integrated Telemedicine scheduling-more fluidity between in-person and telehealth visits
 - Increase in overall volume of visits



Teleretinal Screening

Finger Lakes Community Health (NY):

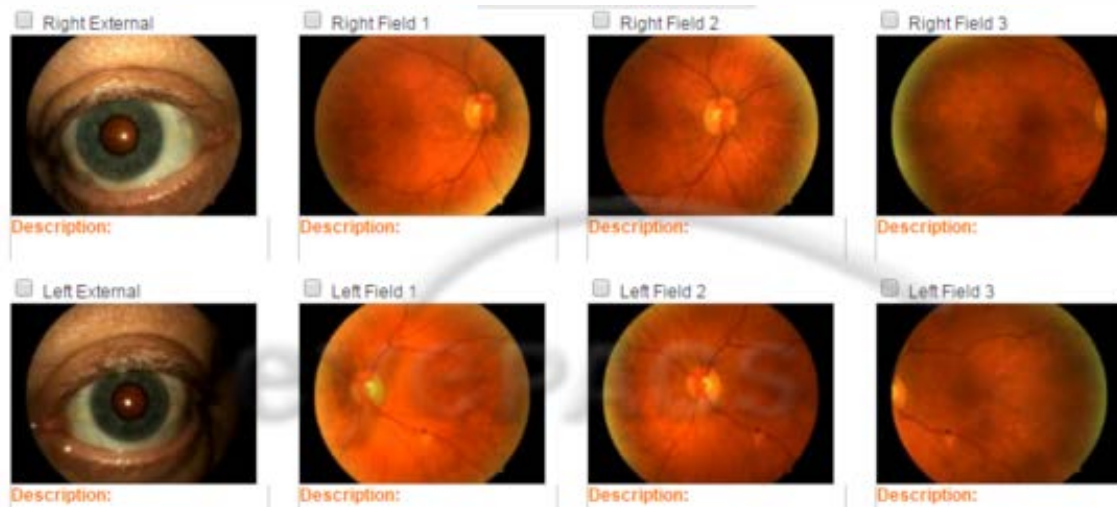
- Community/Migrant Health Center (FQHC) with 9 sites

Program Description:

- Primary care providers identify patients who need Diabetic Retinopathy Screening. Images are taken using the EyePACS system and an EyePACS eye specialist will read/grade image.
- Significantly increased screening rates allowed FLCH to negotiate incentive payments with their ACO.

Business model: public and private payers, managed care, ROI via improved patient outcomes, grants

Teleretinal Screening



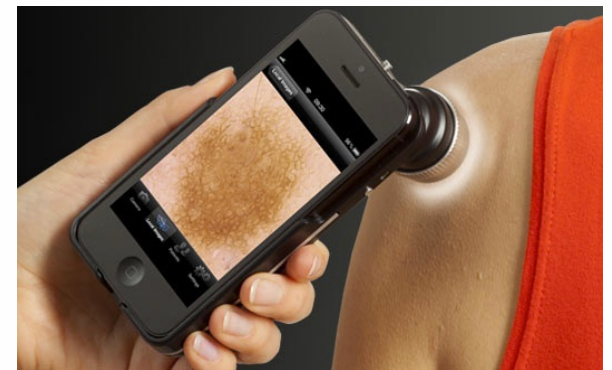
Teledermatology

University of Vermont Medical Center (VT):

- Academic medical center with a five-hospital network in VT and northern NY.

Program Description/Setup:

- Uses Access Derm, a free, HIPAA compliant application sponsored by American Academy of Dermatology to facilitate referrals from primary care providers for remote dermatology consults using mobile devices and the internet (store and forward).
- Outcomes of pilot included:
 - Post-implementation: 44 SAF consults
 - Average response time of SAF consult: 9.2 hrs
 - Average wait for appointment: 12.9 days vs. 60.2 days for traditional consults (**78.6% reduction**)



New England Innovation

eConsults: [Community Health Center, Inc.](#) (CHC) worked with CT DSS to submit successful proposal to CMS, to establish a structure for reimbursement of eConsults for Medicaid patients, specific to cardiology. Initial pilot shows promising results:

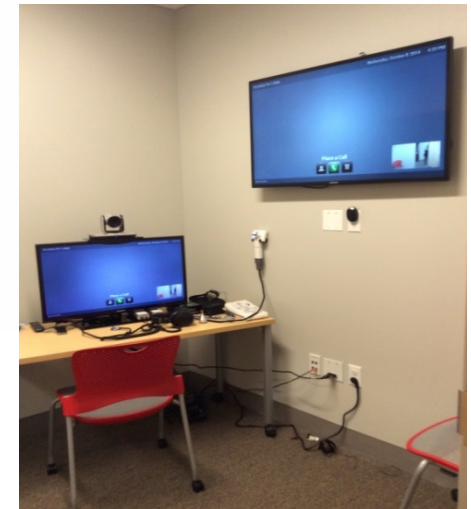
- Thirty-six primary care clinicians participated in the study, referring 590 patients. In total, 69% of e-consultations were resolved without a visit to a cardiologist.
- Days to a review for electronic consultation vs a visit for control patients were 5 and 24, respectively.
- Review of 6-month follow-up data found fewer cardiac-related emergency department visits for the intervention group.

J. Nwando Olayiwola, MD, MPH, FAFAP, et al. [Electronic Consultations to Improve the Primary Care-Specialty Care Interface for Cardiology in the Medically Underserved](#); *Ann Fam Med*; March/April 2016 vol. 14 no. 2 133-140

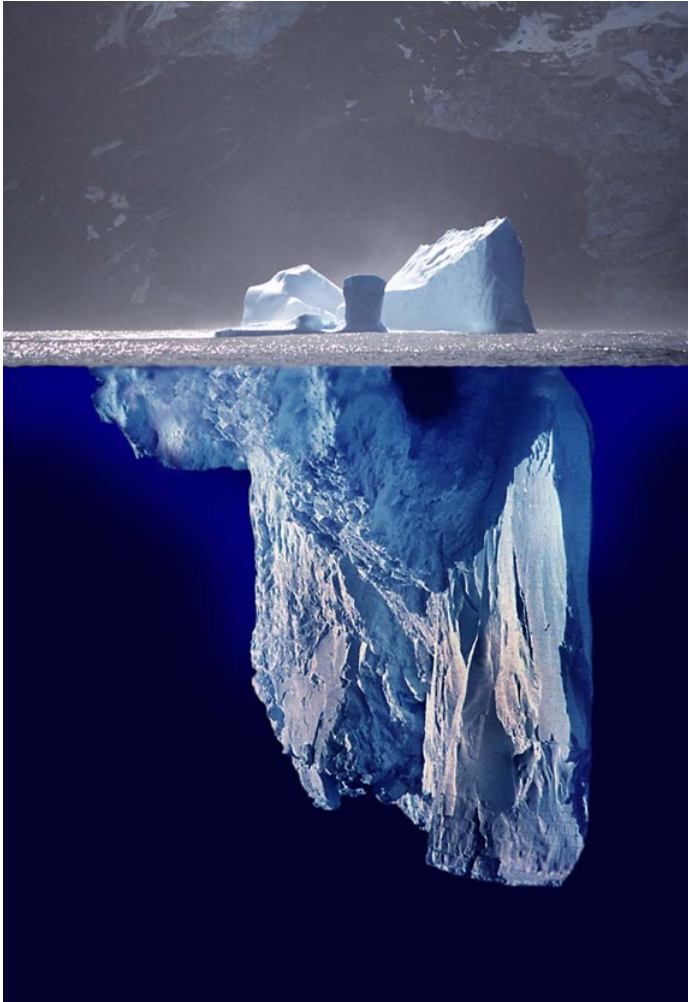
Project ECHO: Medical education model focused on enhancing capacity of rural primary care providers to manage complex patients locally, through specialty support - lots of interest in New England!

UMass Amherst Telehealth Lab

- Faculty at UMass, College of Nursing strategized and actualized infusion of Telehealth technology and skills into their undergraduate and graduate degree programs!
- Embedding telehealth content throughout their curricula:
 - Seamless - technology becomes an integral part of the learning for every student
 - Key Contact: Jean DeMartinis, Associate Professor (jdemart@nursing.umass.edu)



Tip of the Iceberg!



Questions that NETRC receives include:

- Reimbursement
- Program development
- Strategic planning and market analysis
- Licensing & credentialing
- Malpractice & liability
- Regulations & other legal considerations
- Internet prescribing
- Technology selection
- Security, privacy, & HIPAA compliance
- Workforce development and training
- Best practices and networking
- Tools, sample forms, templates, etc.
- Program evaluation
- Research and Supporting Evidence
- *And more!*

Questions? Contact Us



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Resources

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- **Center for Connected Health Policy**
www.cchpca.org
- **Telehealth Technology Assessment Center**
www.telehealthtechnology.org
- **American Telemedicine Association**
www.americantelemed.org
- **Center for Telehealth & e-Health Law**
www.ctel.org
- *And many great regional programs willing to share!*