DELAWARE’S JOURNEY IN ADOPTING TELEHEALTH

AN UPDATE FROM THE DELAWARE TELEHEALTH COALITION

PREPARED FOR THE DELAWARE HEALTH CARE COMMISSION

JUNE 2018
Telehealth or Telemedicine – Which is it?
WHY TELEHEALTH?

- Solution to a problem
- Patients first
- Costs and utilization
- Early intervention
- Improved access to care
- Add value
DELAWARE TELEHEALTH COALITION

http://detelehealth.wixsite.com/detelehealth
BENEFITS OF THE DELAWARE TELEHEALTH COALITION

• Networking
• Policy updates
• Technical Assistance
• Education
• Outreach
• Referral
DELWARE TELEHEALTH COALITION

http://detelehealth.wix.com/detelehealth
<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Organization</th>
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<tbody>
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<td>Connections CSP</td>
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MILESTONES IN TELEHEALTH

• 2011 Delaware Telehealth Coalition (DTC) formed
• 2012 Delaware Medicaid begins reimbursing
• 2013 Delaware Telehealth Roundtable (DHSS/DTC/MATRC)
• 2014-2016 Delaware Strategic Action Plan (SAP)
• 2015 House Bill 69
• 2015 Medicaid expands reimbursement
• 2015 *Telehealth in Delaware* conference
• 2017 Delaware Telehealth Roundtable
2017-2020 DELAWARE TELEHEALTH STRATEGIC ACTION PLAN

• Policy
  • Reimbursement
  • Ethics
  • Changes in healthcare policy
  • Interpreting/cultural competence

• Technical Assistance and Outreach
  • Training/education
  • Consumer/provider buy-in

http://detelehealth.wixsite.com/detelehealth/de-telehealth-strategic-action-plan
DELAWARE’S BIGGEST BARRIER

• No Medicare reimbursement for telehealth

• 21st Century Cures Act mandated report on telehealth

• Evidence of benefit outweighing cost for:
  • Stroke
  • Parkinson’s disease
  • ESRD

• Chronic Care Management
THE DEBATE

+Access
+Convenience
+Quality
-Costs

+Utilization
+Spending
MEDICARE EXPANDED COVERAGE

1. RPM Reimbursement (eff. Jan. 2018)

2. Expanding telestroke coverage (eff. Jan. 2019)

3. Improving access to telehealth-enabled home dialysis oversight (eff. Jan. 2019)

4. Enabling patients to be provided with free at-home telehealth dialysis technology

5. Allowing Medicare Advantage (MA) plans to include telehealth in basic benefits (public comment 9/2018; eff 2020)

6. ACOs can expand use of telehealth (Next Gen, MSSP Track II, MSSP Track III, and certain two-sided risk models). (Eff. Jan. 2020)
MORE GOOD NEWS

• Technology costs are coming down
• Reimbursement is more widely available
• Cost avoidance capabilities
• Creative models for funding
• Value based payment on the horizon
TELEHEALTH LANDSCAPE IN DE – A SNAPSHOT

- CCHS
- UD NMPCC
- Beebe/InSight
- Mid-Atlantic Behavioral Health
- DHSS
- Nemours
- Westside Family Healthcare
- InSight/RHD/Horizon/Fellowship
- Bayhealth/InSight
- CNMRI
- Bayada
- Connections CSP
- Dover Behavioral Health
- Ambient Care
- Prof. Dev.: UD PCS
e-ICU

• Tele-intensive care unit using technology
• Provides remote monitoring
• Additional layer of support for critically ill patients
• Assessment
• Interventional services
• Staffed by remote team of critical care experts across multiple units
eICU Coverage Model

- Virtually cover 73 beds at Christiana Care
- 24/7/365 eRN Coverage
- 12/7/365 eMD Coverage
- 40 Intensivists and 50 Critical Care nurses
  - All Intensivists Critical Care Board Certified
    - Medicine/Pulmonary/Trauma/Surgery/Neuro/Anesthesia/Cardiothoracic
  - All eRNs with > 5 (often > 15) years Critical Care experience
    (some continue to work both sides of camera)
- 125 – 350 patients per eIntensivist
- 40 – 50 patients per eRN
- 125 patients per HCA (Health Care Assistant)
- Data Analyst & IT Specialist
Benefits of the eICU

• Reduced ICU complication rates
• Reduced ICU length of stay
• Efficient delivery of care
• Improved productivity of clinical staff
• Improved staff morale
• Decreased turnover
• Enhanced training opportunities
## Ventilator Liberation Collaboration Results

Decreased ventilator days & hospital length of stay

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<tr>
<th>Metric Measured</th>
<th>Pre Program</th>
<th>Post Program</th>
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<tr>
<td>ICU Vent days</td>
<td>4.2 days</td>
<td>2.8 days</td>
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<tr>
<td>Hospital length of stay</td>
<td>14.9 days</td>
<td>8.9 days</td>
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<tr>
<td>Hospital Mortality</td>
<td>28.10%</td>
<td>27.40%</td>
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<tr>
<td>Versed Usage</td>
<td>5300 mg/month</td>
<td>2743 mg/month</td>
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<tr>
<td>Propofol Usage</td>
<td>283,000 mg/month</td>
<td>133,000 mg/month</td>
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<td>SBT successful/SBT done</td>
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5/2013 Data
NEXT STEPS

• Billing and Coding Trainings
• Outreach to large employers
• Monitoring related policies
• Continued TA and outreach
• School Based Health Center webinar coming up
Questions?

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