

## Telehealth via Text

Dean W. Bartholomew, MD, FAAFP  
June 2<sup>nd</sup>, 2019

## Direct Primary Care – Breaking the Mold

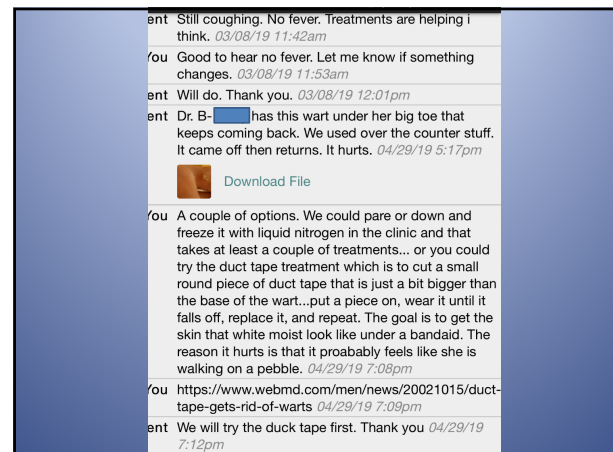
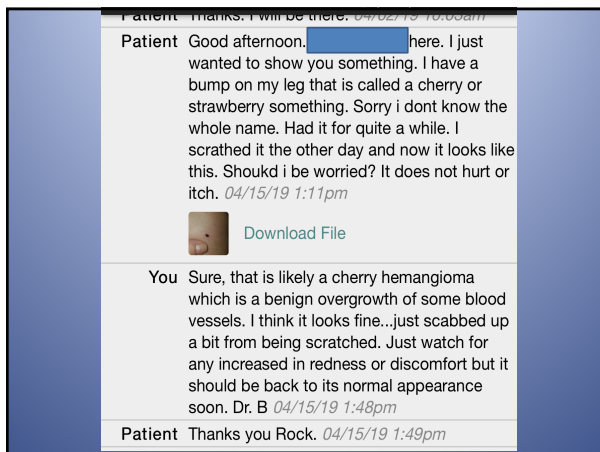
- Without the constraints of insurance contracts that determine how we can interact with our patients and if/how we get paid...
  - We use HIPAA compliant software to text our patients.
  - The patients sign a HIPAA waiver knowing that texting from their personal device is not HIPAA secure.

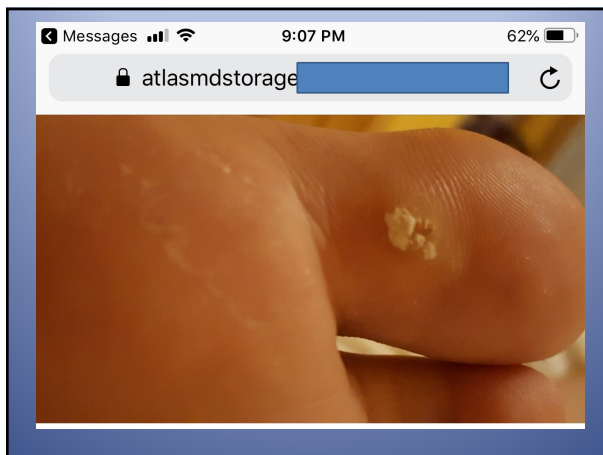
## Texting...Welcome to the 21<sup>st</sup> Century

- Benefits for the Physician
  - I care for more patients during a clinic day via text than I do in person.
  - Texting allows for less disruptive communication after hours.
  - Turns a 15 min “acute” appt in to a 1-2 minute text exchange
  - Texts go straight in to the chart...no further documentation needed.

## Texting...Welcome to the 21<sup>st</sup> Century

- Benefits for the Patient
  - Texting is part of the “access” that patients pay for in DPC
  - Patient gets “their” doctor...not a nurse with a triage book of which the flow diagram always seems to end with “take them to the ER.”
  - Massive time savings for the patient
    - Kid with a rash
  - It just makes sense!





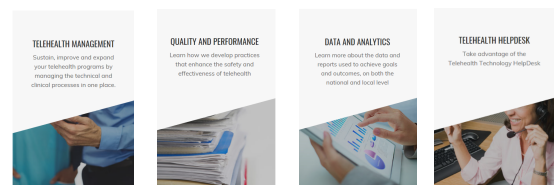
## Shortcomings

- Not all conversations are appropriate for text but this is remedied with a phone call
- Texting errors
  - Spelling / Auto-correct
  - Texts sent to you that were meant for someone else.

## Questions?



## Welcome to Telehealth












Resource: Department of Veterans Affairs [VHA Telehealth Services](#)

## About VHA Telehealth Services

The term Telehealth is defined as the use of Telehealth technologies to provide clinical care in circumstances where distance separates those receiving services and those providing services. The value VA derives from Telehealth is not in implementing Telehealth technologies alone, but how VA uses health informatics, disease management, care/case management and Telehealth technologies to facilitate access to care and improve the health of Veterans with the intent to provide the right care in the right place at the right time. VA is recognized as a world leader in the development of telehealth services which are now mission critical to the future direction of VA care to Veterans.








Resource: Department of Veterans Affairs [VHA Telehealth Services](#)

## Telehealth Programs

 <b>HOME TELEHEALTH</b> In-home care and case management principles to coordinate care using health informatics, disease management and technologies.	 <b>PRIMARY CARE</b> The implementation of using telehealth technologies to bring primary care and that first point of consultation to the Veterans patient community.	 <b>STATE VETERANS HOMES</b> VA provides assistance to States by participating in the cost of construction and Veterans care and ensuring that State Veterans Homes meet VA Standards.
 <b>SPINAL CORD INJURY/DISORDER</b> To support and maintain the health, independence, quality of life, and productivity of Veterans with spinal cord injuries and disorders.	 <b>TELEICU</b> Intensive care units cater to patients with severe and life-threatening illnesses and injuries, which require constant, close monitoring and support.	 <b>TELEMOVE</b> Using Telehealth technologies to facilitate the national weight management program designed to help Veterans lose weight in order to improve their health.
 <b>TELE NUTRITION</b> TeleNutrition provides the ability to pre-screen and determine if a referral is necessary for nutrition education without requiring the patient to travel.	 <b>TELEWHOLEHEALTH</b> The Whole Health System focuses on self-empowerment, self-healing and self-care with three components, The Pathway, Well-being Programs, and Whole Health Clinical Care.	 <b>TELEWOUND CARE</b> TeleWound Care uses a holistic approach which provides coordination of care using different telehealth technologies across multiple telehealth specialties.

Resource: Department of Veterans Affairs [VHA Telehealth Services](#)

## Telehealth Programs

 <b>SPECIALTY CARE</b> For each patient a treatment program is developed from experienced physicians, nurses, and rehabilitation therapists work to bring each patient care.	 <b>DENTAL CARE</b> The study, diagnosis, prevention, and treatment of diseases, disorders and conditions of the oral cavity and of adjacent, related structures and tissues.	 <b>MENTAL HEALTH SERVICES</b> Using real time video-based telehealth technologies to care for Veterans psychological and emotional well-being, sometimes into the Veterans home.
 <b>PATHOLOGY</b> Store-and-Forward TelePathology is an emerging technology that enables the examination of pathological specimens that are obtained from a distant site.	 <b>PHARMACY</b> Provide health education, self-care ideas, encourage, guide and support healthy behavior changes that promote wellness or reduce the risk of illness.	 <b>REHABILITATION</b> Using telehealth technologies to diagnose, evaluate, and manage Veterans of all ages with physical and/or cognitive impairment and disability.
 <b>SURGICAL CARE</b> The treatment of injuries or disorders of the Veteran patients by incision or excision, then using telehealth to facilitate post-operative care.		

Resource: Department of Veterans Affairs [VHA Telehealth Services](#)

## Technology Overview

Clinical Video Telehealth (CVT) technology in the VA is videoconferencing-based and enables patient and provider participants at separate locations to see and hear each other, and interact in real-time. CVT requires high-speed connections (high bandwidth) between sites because of the volume of data that is exchanged. CVT technology is essentially two types: 1. Dedicated CVT systems illustrated below, and more recently 2. Web cameras and Personal computers running videoconferencing software for secure encrypted CVT.

CVT systems are often equipped with diagnostic peripherals (e.g. otoscopes, dermoscopes, close-up exam cameras) and auxiliary document cameras that can be integrated into the videoconference so that dynamic clinical video or static x-rays, cardiology traces and other information can be incorporated into clinical encounter.

CVT is especially useful for:

General medicine and several specialty care areas

Mental Health

Situations involving barriers to access, such as distance, geography, climate/weather, cost, etc.

Situations where motion contributes to diagnosis and/or treatment

Situations where it enables or improves effective patient-provider communication

Resource: Department of Veterans Affairs [VHA Telehealth Services](#)



### TelePrimary Care Resource Center

While Primary Care plays a central role in the local community, using health care professionals to act as a first point of consultation for all patients, TelePrimary Care is the implementation of using telehealth technologies to bring primary care and that first point of consultation to the community, and more specifically, to the Veteran.

VHA and Telehealth Services are doing much more than just establishing small, community based clinics in cooperation the Office of Rural Health, but have also developed mobile telehealth clinics that provide access to primary care as well as TeleMental health and follow-up, medical consultation. VHA Telehealth Service is actively involved in developing more resources to support the implementation of TelePrimary care in more locations.

Resource: Department of Veterans Affairs [VHA Telehealth Services](#)

## ClearSteth Stethoscope



### Amazing Sound Quality

ClearSteth delivers clear, crisp sound with filtering capabilities on both sides to emphasize focus on bell or diaphragm ranges throughout the exam. ClearSteth will also automatically adapt to the available network bandwidth on either side of the connection, while still maintaining sound quality. No matter where you or your patient are located, ClearSteth will continue to provide high sound quality. Without the hassle of poor quality interference, you can be sure that the healthcare decisions that you make are based on clinically sound evidence.

### Versatile and Secure

Allows users on various networks to access encrypted auscultation connections with the push of a button. ClearSteth is interoperable with the RNK PCP-USB, ThinkLabs One, and 3M® Littmann® 3200 stethoscopes. Share data with fellow clinicians and patients more easily than ever before. Encrypted auscultations will ensure that patient security and privacy is still the number one priority.

### User Friendly Interface

Improve workflow by allowing users to stay logged into the application and display all participants in your telesteth program during the consultation. Your telesteth program will provide team members the opportunity to collaborate with one another in real time. Our user friendly interface provides the platform for a more time and cost effective appointment for both your organization and the patient.

Resources: <https://www.globaimed.com/solutions/connected-devices/stethoscopes/clearsteth/>

Resource: Department of Veterans Affairs [VHA Telehealth Services](#)

## Total HD Camera



Weighing in at just four ounces, the TotalExam™ HD is the first true HD video examination camera for use in telemedicine. The sleek, modern look and small size is designed with the comfort of the user in mind. It offers ground-breaking video technologies until now only available to professional studios and HD television stations.

It is faster and easier to acquire the best freeze frame images because the camera's count back frame analysis automatically selects the clearest view among 17 frames.

Still images obtained from the camera's superior resolution are six-times the clarity of standard definition cameras, making features crystal clear upon enlargement.

All the camera's function buttons are conveniently located on top, making image acquisition and adjustment a simple one-handed operation.

The integrated auto-focus takes the guesswork out of capturing the clearest images and, when desired, can be turned off.

Go green with TotalExam® HD. The LED light carousel uses as little as 8 watts of power compared to fluorescent lighting in other cameras that consume 40 watts.

GlobalMedia Group, LLC.

Resource: Department of Veterans Affairs [VHA Telehealth Services](#)

## Audiology Cart

### TeleAudiology Resource Center



TeleAudiology focuses on the delivery of commonly occurring and high frequency patient encounters between two clinical care sites. The development of TeleAudiology is particularly significant within the Department of Veterans Affairs due to the large population of Veterans who live with hearing loss. Meeting the needs of Veterans from rural and under-served areas has been a well-understood challenge within VA. For the increasing number of Veterans seeking hearing health care, the opportunity now exists for quality care that is closer at hand.

TeleAudiology services include fitting and adjustment of hearing aids, aural rehabilitation groups and tinnitus groups. Remote programming of hearing aids gained momentum with the National TeleAudiology Pilot Initiative funded by Telehealth Services in 2009. The TeleAudiology Pilot is a joint effort between Telehealth Services and the Audiology and Speech Pathology National Program Office. The diagnostic groups considered when using a TeleAudiology modality mirror those found in a traditional face-to-face encounter. TeleAudiology is anticipated to include the identification, functional diagnosis/assessment, and non-medical treatment/management of auditory, vestibular, balance, and related impairments.

Resource: Department of Veterans Affairs [VHA Telehealth Services](#)

## Conferencing/Education



### TeleMOVE! Resource Center

MOVE is a national weight management program designed to help Veterans lose weight, keep it off and improve their health. TeleMove is a very robust and fast growing telehealth modality. There has been a major change in clinical practice related to weight management. Ongoing surveys of the National Weight Control Registry indicated that a majority of individuals who were maintaining a 10-percent weight loss were weighing themselves on a daily basis. Several studies have looked at this and also examined the importance of daily weighing during the course of treatment (not just as a weight maintenance strategy). The evidence is piling up that daily weighing is a critical program element in weight management interventions. Daily weight has become a standard in contemporary weight management research protocols, and this is becoming a standard recommendation for clinical weight management programs. For MOVE! and/or TeleMOVE! emphasizing daily weighing is using the best evidence to help our Veterans.

Resource: Department of Veterans Affairs [VHA Telehealth Services](#)

## TOPCON Camera TRC



### TeleRetinal Imaging Resource Center

Visual impairment is a common complication of diabetes. VHA is able to outperform the commercial managed care sector in screening for this. Maintaining and exceeding current rates of screening for diabetic retinopathy is the VHA's rationale for exploring the use of TeleRetinal imaging. Based upon a productive partnership with the Department of Defense (DoD) and the Joslin Vision Network (JVN) in Boston, VHA has implemented pilot TeleRetinal imaging programs in over 130 sites since FY2000. TeleRetinal Imaging has two distinct components, each requiring their own training. TeleRetinal Imager training for those who will be capturing images of Veterans' retinas, or TeleRetinal Reader training for those who will be reading those images.

Resource: Department of Veterans Affairs [VHA Telehealth Services](#)

## Home Telehealth



Home Telehealth (HT) is defined as a program into which Veterans are enrolled that applies care and case management principles to coordinate care using health informatics, disease management and technologies such as in-home and mobile monitoring, messaging and/or video technologies. The goal of Home Telehealth is to improve clinical outcomes and access to care while reducing complications, hospitalizations, and clinic or emergency room visits for Veterans in post-acute care settings, high-risk Veterans with chronic disease or Veterans at risk for placement in long-term care.

VHA has developed a national home telehealth information technology infrastructure with the necessary back-up and redundancy systems to support the ongoing care of these patients. VHA has standardized the input of vital sign data from the home as Health Level Seven (HL-7) messages that are incorporated into the VHA computerized patient record system (CPRS). VHA employs a range of technologies that vary in their levels of cost and sophistication to match the needs of the Veteran patient.

Resource: Department of Veterans Affairs [VHA Telehealth Services](#)

## TeleMental Health Resource Center



TeleMental Health Clinical Services are used to treat virtually every DSM (Diagnostic and Statistical Manual) diagnosis, including affective disorders, anxiety disorders/PTSD, psychotic disorders, and substance use disorders. These services are employed to deliver virtually every treatment modality including individual therapies, group therapies, medication management, family therapy, couples therapy, cognitive behavior therapies, evidence based psychotherapies, psychological testing, etc. TeleMental Health is also building a robust program providing Clinical Video Telehealth into the patient's home using telecommunication technology.

Delivery of TeleMental Health services take place at multiple sites of care including VA Medical Centers (VAMC), VA Community Based Outpatient Clinics (CBOC), VA Residential Care Centers, non-VA healthcare facilities, student health centers, homeless shelters, supervised housing sites, and patients' residences. Clinicians from multiple mental health professions and specialties including psychiatrists, psychologists, advanced practice clinical nurse specialists, physician assistants, social workers, RNs, addiction specialists, vocational rehabilitation specialists, and trainees deliver care to the Veterans.

Resource: Department of Veterans Affairs [VHA Telehealth Services](#)

## Cisco Jabber Video VMR/VOD



While Clinical Video Telehealth (CVT) in the Home has many potential and exciting uses, the first Clinical Video Telehealth into the Home application focuses on the delivery of commonly occurring and high frequency patient encounters between a clinical care site and the patient's home. The most common uses are between the patient home and a VAMC, CBOC, contract clinic or a provider who teleworks from home. The following services can use Clinical Video Telehealth in the Home to increase access to their patients such as Home Based Primary Care, TeleMental Health and other Specialty Services.

**Program Planning and Development**  
Services considering using Clinical Video Telehealth in the Home should contact their VISN Telehealth Manager/Lead and/or the Facility Telehealth Coordinator to assist in putting the planning team together. Using shared resources and experiences from other disciplines is extremely helpful for any telehealth program. Each VISN has a telehealth infrastructure to support all telehealth operations.

Resource: Department of Veterans Affairs [VHA Telehealth Services](#)

## Questions?

## Telehealth Clinical Panel Discussion Incorporating Telehealth into Care Coordination Programs

Faith Jones and Deb Anderson

Sunday, June 2, 2019



## Objectives

Following this presentation, the participant will understand:

- The role of the care coordinator in primary care practices
- How to leverage the relationship between care coordinators and patients to facilitate the use of telehealth technologies



## Changing Models

"Our goal is to recognize the trend toward **practice transformation** and overall improved quality of care, while preventing **unwanted** and **unnecessary** care"

CMS CFR 11-12-2014

"CMS's focus is on putting patients first, and that means protecting the doctor-patient relationship"

CMS Administrator Seema Verma 7-17-2018

<https://www.cms.gov/Outreach-and-Education/Outreach/Files-and-Resources/Downloads/c2018-07-17-Verma-SE.pdf>



## Care Delivery Models

"...new and evolving care delivery models, which feature an increased role for non-physician practitioners (often as care coordination facilitators or in **team-based care**) have been shown to improve patient outcomes while reducing costs, both of which are important Department goals as we move further toward quality and value-based purchasing of health care services in the Medicare program and the health care system as a whole."

Vol. 80 Wednesday, No. 135 July 15, 2015, P 226



## Team Based Care

### Care Coordination uses a Team Based Care Approach

**Shared goals:** The team—including the patient and, where appropriate, family members or other support persons—works to establish shared goals that reflect patient and family priorities, and can be clearly articulated, understood, and supported by all team members.

**Clear roles:** There are clear expectations for each team member's functions, responsibilities, and accountabilities, which optimize the team's efficiency and often make it possible for the team to take advantage of division of labor, thereby accomplishing more than the sum of its parts.

**Mutual trust:** Team members earn each other's trust, creating strong norms of reciprocity and greater opportunities for shared achievement.

**Effective communication:** The team prioritizes and continuously refines its communication skills. It has consistent channels for candid and complete communication, which are accessed and used by all team members across all settings.

**Measurable processes and outcomes:** The team agrees on and implements reliable and timely feedback on successes and failures in both the functioning of the team and achievement of the team's goals. These are used to track and improve performance immediately and over time.

Source: Mitchell et al., 2012

## Chronic Care Management

### Practice/Billing Eligibility

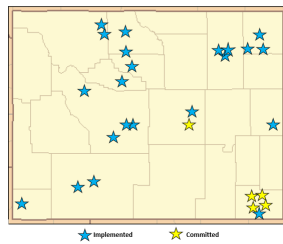
- Certified EHR Technology
- After hours access
- Patient Agreement/Consent
- Care Planning
- At least 20 minutes per Calendar month

### Patient Eligibility

- Medicare Patient
- Two or more chronic conditions expected to last at least 12 months or until the death of the patient
- At significant risk of death, acute exacerbation, decomposition, or functional decline without management

## Care Coordination Growth and Development in Wyoming

Wyoming CCM Implementation Project - 06/01/2019



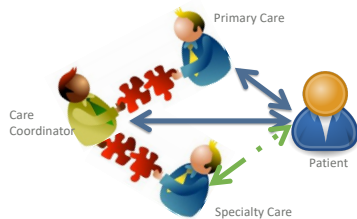
★ Implemented ★ Committed

## Leveraging Care Coordinator Relationships

Relationships  
Relationships  
Relationships



## Connecting CCM Patients to Specialty Services



Patient / Primary  
Care Provider  
Relationships  
Patient / Care  
Coordinator  
Relationships  
Patient / Specialty  
Provider  
Relationships

## WYOMING TELEHEALTH PROVIDER PROMOTION TO CCM

**Telehealth Provider** **Lisa J. Enikolaitis, DO**  
Phone: (307) 736-7600  
Fax: (307) 736-7644  
Specialty: Urology  
St. John's Urology  
555 East Broadway Ave, Suite 229  
PO Box 13009  
Jackson, WY 83002

**Telehealth Provider** **Scott Thompson, DPM, LD, CLC, CDE**  
Phone: (307) 340-1104  
Fax: (307) 351-1405  
Specialty: Diabetes  
Forefront Wellness Education Center  
804 W Sunset Drive  
Riverton, WY 82501

**Telehealth Provider** **Kristina Lantz, DSH, BCBA, LMT**  
(307) 686-8225 Fax (307) 676-1038  
Specialties: Primary Care Behavioral Health, Behavioral Health  
Consultation, Integrated Care, Behavior Analysis  
Forefront Wellness Education Center  
804 W Sunset Drive, Suite 229  
Riverton, WY 82501  
102 Platten Ave  
Cody, WY 82414

**Telehealth Provider** **Eric A. Wampan, MD, FACS**  
Phone: (307) 736-7600  
Fax: (307) 736-7644  
Specialties: General Surgery, Minimally Invasive Surgery  
Interventional Endoscopy, ERCP  
St. John's General Surgery  
555 East Broadway Ave, Suite 229  
PO Box 430  
Jackson, WY 83001

## Telehealth Technologies

- No longer cost prohibitive
- Easy to use across various platforms including cell phone apps
- Be secure – Use Encryption



## Terminology

### Telemedicine

the remote diagnosis and treatment of patients by means of telecommunications technology

### Telehealth

the distribution of health-related services and information via electronic information and telecommunication technologies

### Virtual Health

Virtual health encompasses several digital and telecommunication technologies used to deliver health care



## Changes for Telehealth Billing for Medicare

- Expanding Medicare-covered telehealth services to include prolonged preventive services
- Change in the originating site to include patient's home for substance use disorder or a co-occurring mental health disorder



## Changes for Virtual Health Billing for Medicare

- Paying clinicians for virtual check-ins (brief virtual appointments via video or audio communications)
- Paying clinicians for evaluation of patient-submitted photos
- Remote Monitoring

**Training  
Coming  
SOON!**



## CHARGING VS. TRACKING

### Billable Visit

- No Double Dipping
- Continue to bill for eligible services
- If service is billable do not track time
- Specialty Visit
- Originating Site Visit
  - Q-3014



### Time Tracking

- No Double Dipping
- Track all time for non-billable services
- Do Not track time if billing for the visit
- Track time for all of the referral management and appointment set up



## Contact Information

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