Telemedicine to the Rescue

Learn how telemedicine is an aid in helping rural community hospitals

December 2, 2015. Start time is 12:00 PM CST (1:00 EST)

Featured Presenters

Telemedicine Policy: **Updates & Opportunities**	Success Story: **Connect rural patients with "big-city" specialists**	Telemedicine: the Future is NOW

Gary Capistrant
Chief Policy Officer,
American Telemedicine Association

Allie Paquette
Application Analyst, Imaging & Clinical Systems,
Baystate Health

Dr. Ana Maria Lopez
Associate Vice President for Health Equity and Inclusion,
University of Utah Health Sciences Center

Telemedicine Policy:

Gary Capistrant
Chief Policy Officer

American Telemedicine Association

How can telemedicine help keep rural hospitals from closing?

❖ Benefits from telehealth for rural hospitals

❖ Opportunities for Medicare to expand rural coverage

AMD Global Telemedicine — *The Future of Medicine...Now!*

American Telemedicine Association

Baystate Health

UNIVERSITY OF UTAH HEALTH SCIENCES

Opportunities for Medicare to expand rural coverage

❖ Broaden coverage into metro area fringes, such as covering all critical access hospitals and sole community hospitals

❖ Allow follow-patient care for chronic conditions to avoid readmissions penalties and improve patient care management, such as video "house calls"

❖ Allow coverage for "store and forward," such as for wound management

Recommended policy resources

American Telemedicine Association

- ❖ AmericanTelemed.org

- ❖ ATAwiki.org

Federal government

- ❖ HRSA.gov/ruralhealth

- ❖ HRSA.gov/telehealth

Success Story:

How to better connect rural patients with "big-city" specialists

Allie Paquette
Application Analyst, Imaging & Clinical Systems

Baystate Health

❖ Find out how small community medical centers in rural Massachusetts are leveraging telemedicine technology

❖ Hear what medical specialties have benefited the most and why

❖ Learn new ways to standardize telemedicine equipment/choices

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Background

❖ Baystate Health is a 5-hospital health system with 1 primary trauma center and 4 tertiary hospitals

❖ Earliest telemedicine initiatives at the health system were for acute stroke

❖ Through grant funding, efforts began to expand telemedicine services

Scope

❖ Utilize telemedicine to provide specialist access to patients in tertiary locations

- ❖ Minimize travel time and maximize efficiency of seeing patients for specialist physicians

- ❖ Reduce the need for patients to travel out of their communities to the main hospital

- ❖ Provide faster access to appointments for specialized care

❖ Reduce transfer of patients to Baystate Medical Center to improve patient experience and keep care in the local hospitals

Clinical Use Cases

❖Neurology

❖Cardiology

❖Speech Pathology

❖Psych

❖Geriatrics/Palliative Care

❖Critical Care

Telemedicine Equipment Solutions

❖ Types of solutions

    ❖ Telemedicine carts with medical devices

    ❖ Video consultation only solution

❖ Requirements

    ❖ Ease of use for physicians and tele-presenters

    ❖ Secure network connection

❖ Technical requirements

    ❖ Wireless or wired solution at remote site end

    ❖ Device utilization for consulting providers

Other Considerations

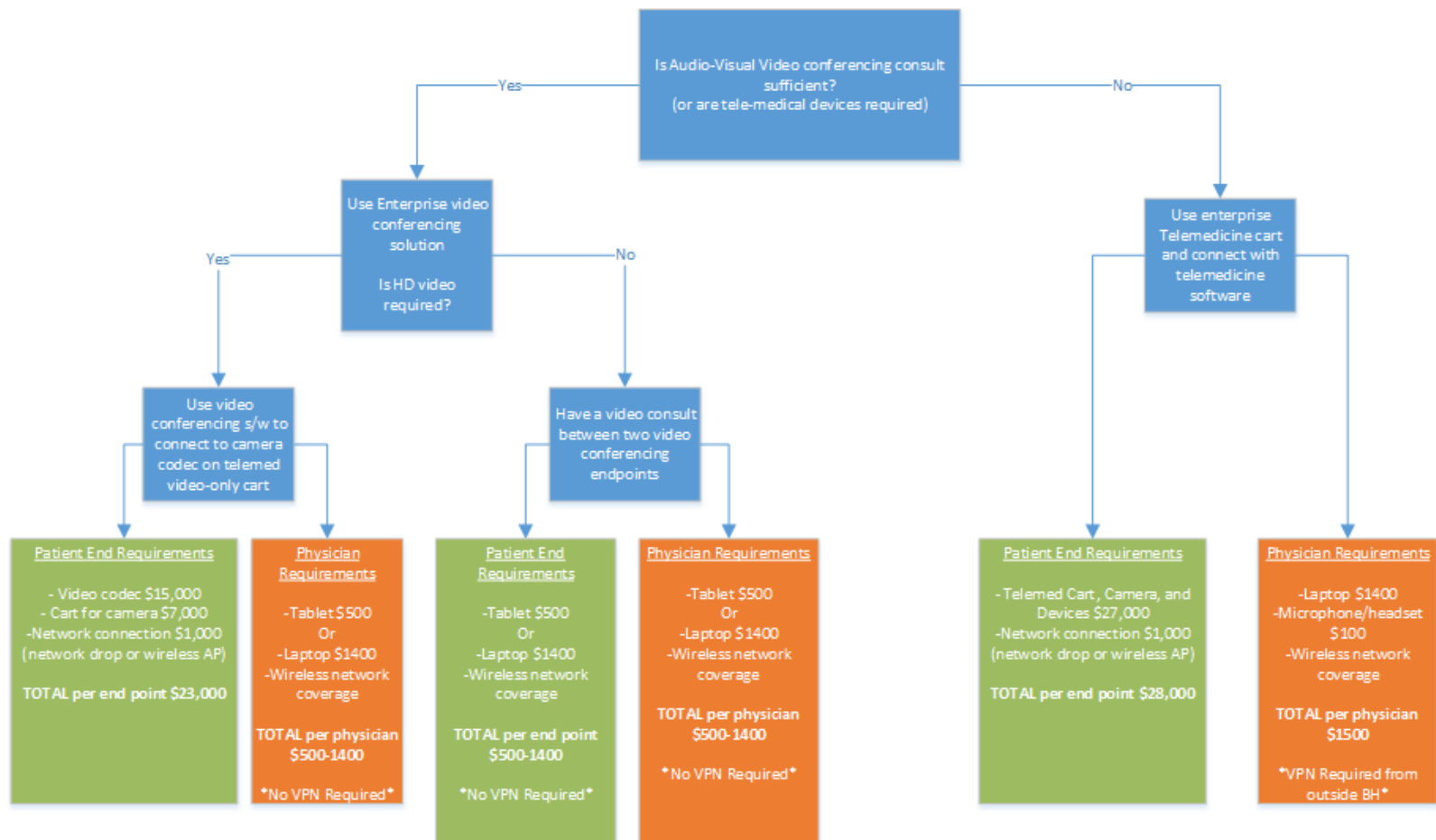❖Clinical workflow

❖Inpatient vs. Outpatient consults

❖Scheduling

❖Communication

Standardization and Expansion

❖ Telemedicine use cases are rapidly increasing and clinical teams are coming in with new requests weekly

❖ Our goal is to develop standard, packaged solutions

  ❖ Readily available for budgeting and quick request-to-implementation time

  ❖ Aid in support of expanding service area

Telemedicine Equipment Decision Guide

Telemedicine: the Future is NOW

Dr. Ana Maria Lopez
Associate Vice President for Health Equity and Inclusion,

UNIVERSITY OF UTAH
HEALTH SCIENCES

ARIZONA
TELEMEDICINE
PROGRAM

❖ "Telemedicine": concept is generally understood

❖ Different scenarios in a rural hospital/clinic setting where telemedicine is useful

❖ Ways to bundle services for follow up care, to allow for increased access to care

❖ A use case example of oncology follow up services from a distance with chemo delivered at local hospital

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Telemedicine

In US,
64% own a smartphone
90% own a cell phone
70% shop online regularly
15% do not use the internet*

*Pew Research Center

Video Calls

http://alliosnews.com/wp-content/uploads/2011/03/iPad-2-Facetime.png

Telemedicine in the future:

Portable Telemedicine System:
the new Doctor's Bag

Examination Camera

Video Conferencing

Digital Stethoscope and Headphones
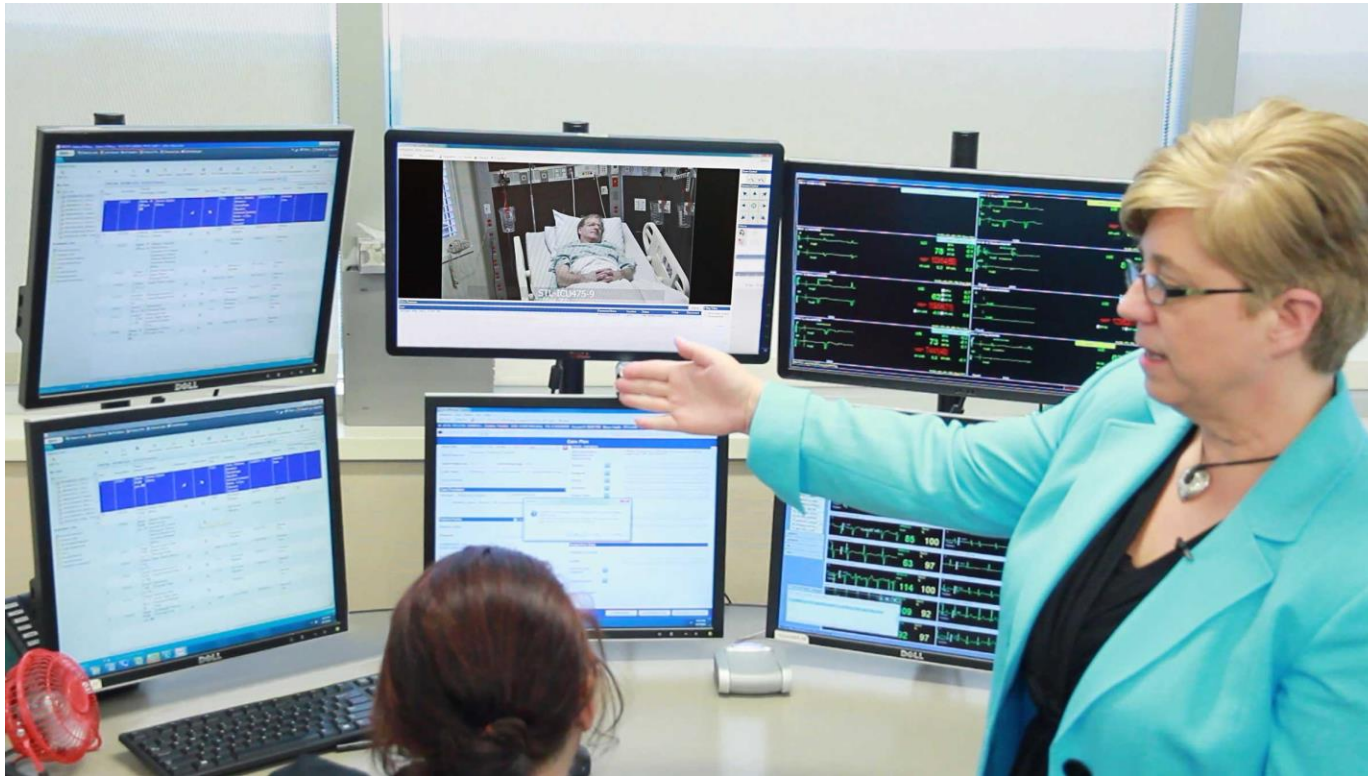
Medical Devices:
Otoscopes, VSM, ECGs, etc

Wireless LAN Connection

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Telemedicine in the future: scenarios

http://www.forbes.com/sites/patrickmoorhead/2014/05/13/vidyo-gets-the-jump-on-next-generation-telemedicine/
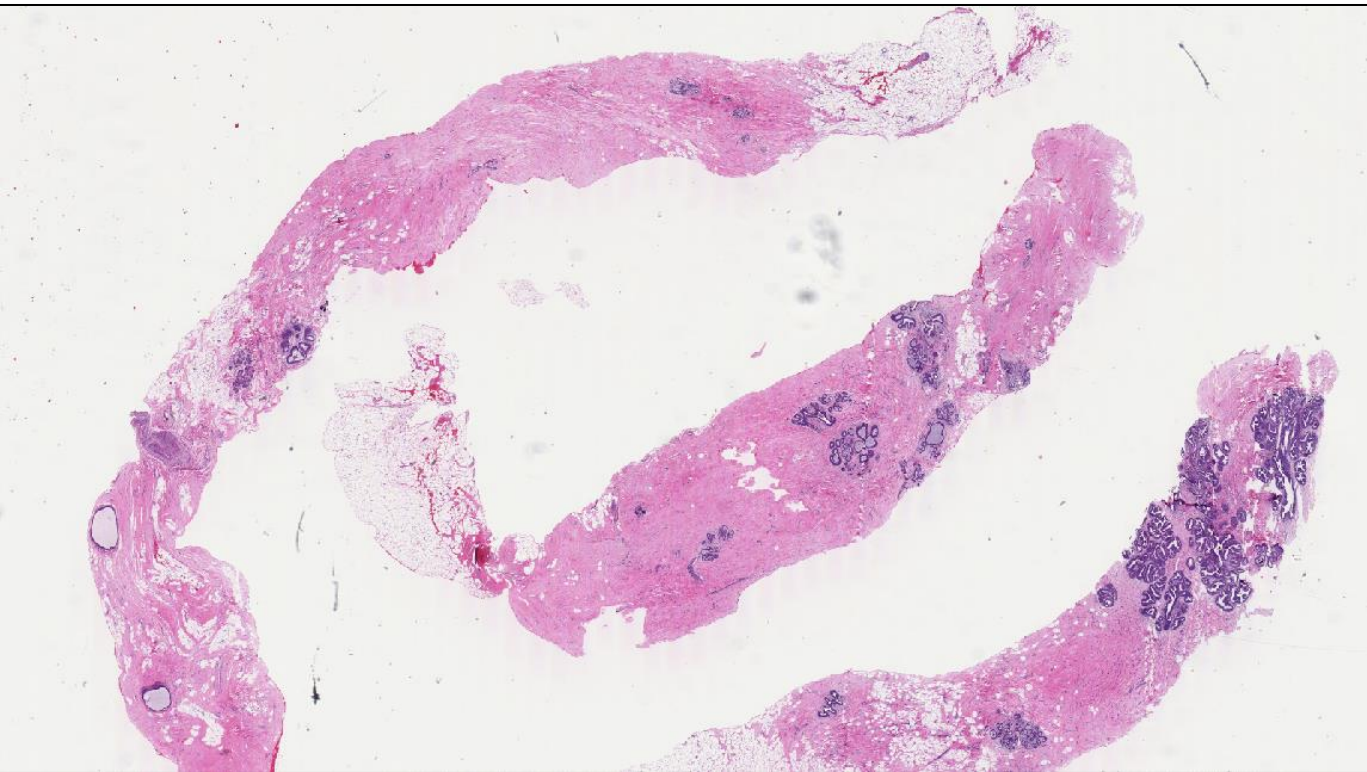
Digital Mammography

Tuba City

Tucson, AZ

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Fetal Ultrasound

Telepathology

Virtual Slide

Arizona Telemedicine Program 2013

Teletrauma

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TelePainClinic

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Telemedicine: bundling of services

❖ Helps reduce the anxiety of the "waiting game"

❖ Women's health:
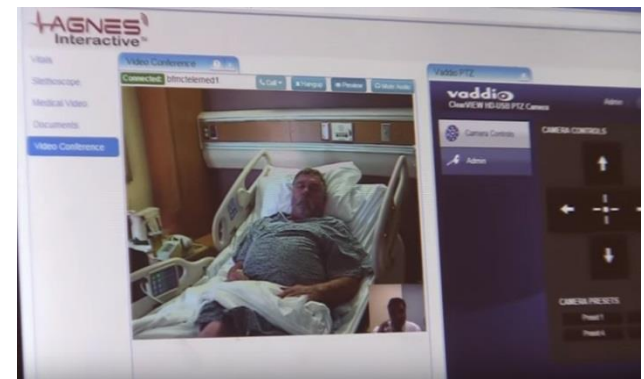
  ❖ Telemammography

  ❖ Telepathology

  ❖ Teleoncology

Telemedicine: tele-oncology case scenarios

❖ Cancer prevention education, genetic counseling

❖ Early detection, diagnostic imaging: teleradiology

❖ Clinical consultation: surgical oncology, medical oncology, radiation oncology (review of planning at a distance), survivorship care, palliative care, end of life care

❖ Clinical trial education, consent

❖ Multidisciplinary tumor board

❖ Chart review/ECHO as a model of care.

Considerations for Technology & Equipment

❖ Environment of equipment

❖ Medical specialties

❖ Interoperability of equipment

❖ Training required of users

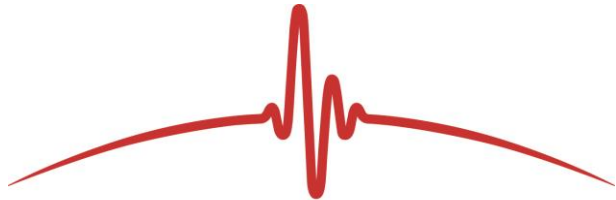❖ Integration w/ existing IT

Types of Clinical Telemedicine Solutions

❖ Encounter Management Software

❖ Medical Devices & Equipment

❖ Telemedicine Systems & Mobile Carts

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Thank You for Attending

❖ Archived presentation will be available in next few days.
❖ Follow up email will include link