Telemedicine Program Funding & Sustainability Webinar



Learn How to Cut Through All the "Noise"

April 8, 2014.









Featured Presenters

Overview of Grant Funding



Program Sustainability

The Value Proposition of Telehealth



Cathy Denison-Robert, PhD, MBA President, Denison and Associates, Inc. **Rob Sprang, MBA** Director of Kentucky TeleCare Co-Project Manager, Kentucky TeleHealth Network







Overview of Grant Funding

Grant Funds that are Available for Telemedicine Programs

Common Reasons Why Funding Proposals Fail



Cathy Denison-Robert

Key Components in the Grant Application Process













Grant Funds that are Available for Telemedicine Programs











- USDA RUS Distance Learning and Telemedicine (DLT)
- HRSA Office for the Advancement of Telehealth (OAT) Telehealth Resource Center
- HRSA OAT Telehealth Network











- USAC Telecommunications and Rural Health Care Program
- U.S. Department of Commerce
- CMS Health Care Innovation Awards
- Research Grants







Funding Sources



- Mental Health, Rural Health, Children's Health, School-Based
- State Associations, State Agencies, State Government
- Foundations and Private Donors
- Insurance Agencies and Healthcare Systems
- Technology and Software Vendors







Common Reasons Why Funding Proposals Fail









Reasons Proposals Fail



- Not appropriate funding agency
- Directions and deadlines not followed
- Outcomes not measurable
- Not demonstrate fiscal accountability
- Scattered or shotgun approach







Reasons Proposals Fail



- Methodology appears flawed
- Poor grammar, spelling errors
- Organizational readiness lacks
- Budget is problematic
- Applicant is not eligible
- Not pay attention to scoring criteria







Key Components in the Grant Application Process









Components in Application



- 1. Introduction
- 2. Executive/Project Summary
- 3. Identify the Problem/Statement of Need
- 4. Project Goals and Objectives
- 5. Benefits of the Project
- 6. Statement of Work and Project Timeline







Components in Application



- 7. Budget and Financial Plan
- 8. Management Team and Personnel
- 9. Partners, Collaborators, Supporters
- 10. Evaluation
- **11**. Supporting Documentation







Other Components in RUS DLT



- Telecommunications System Plan
- Financial Info and Sustainability
- Statement of Experience
- Objective Scoring Rurality, Economic
 Need illustrated by NSLP, and Leveraging
- Innovativeness and Cost Effectiveness
- Other Federal Forms and Certifications









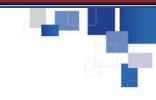
Resources

- The Foundation Center : <u>http://foundationcenter.org</u>
- Grants.gov: <u>www.grants.gov/web/grants/home.html</u>
- Catalog of Federal Domestic Assistance: <u>www.cfda.gov</u>
- Federal Register: <u>www.federalregister.gov</u>
- USDA RUS DLT: <u>www.rurdev.usda.gov/utp_dlt.html</u>
- HRSA Telehealth: <u>www.hrsa.gov/ruralhealth/about/telehealth</u>
- Universal Service: <u>www.usac.org/rhc</u>









Contact Information



Cathy Denison, PhD & Associates Professional Services, Inc.

Cathy Denison-Robert, PhD, MBA President Denison and Associates, Inc. 337-502-1911

cdenison@denisonassociates.com

www.denisonassociates.com

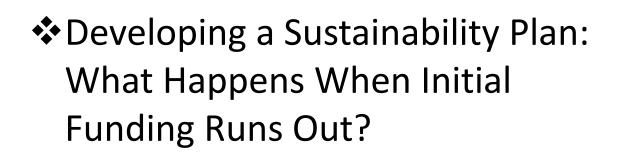






Telemedicine Program Sustainability: The Value Proposition of Telehealth

How to Position a Telemedicine Program that will Build a Value Proposition





Rob Sprang









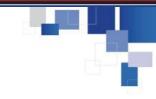
Objectives

- Project vs. Program
- What is the role of telehealth in a healthcare system?
- What is the Return on Investment (ROI) with telehealth?
- Volume vs. Value How does a reformed healthcare system help with sustainability?
- Will my model work for you?









Project vs. Program

- Grants are projects Project end
- Programs don't end
- Grants are launching pads











The Role of Telehealth in a Healthcare System – Assess Your Organization

Academic Medical Center – Support the missions of Clinical Service, Education, Research and Administration

Community Hospital – Reach referring clinics, "import" specialty care, connect with industry, recruitment/retention of providers and trainees, PR/marketing

Community Clinic – Deliver school health, import mental health and specialty services, offer education not locally available







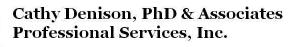
ROI?

- Revenues
 - Provider site
 - Patient site
- Expenses
 - Provider site
 - Patient site
- Other Considerations
- Incentives do not align with stated goals for value-based healthcare system













What Should You Do Now?

- High revenue opportunities
- Lose less \$
- Reduce the cost of telehealth
- Solutions that are valued by your organization
- Prepare for a reformed healthcare system
- Make telehealth necessary infrastructure by delivering value to your medical center









University of Kentucky Model

- \$20M+ annual contract that is heavily dependent upon what we do with telehealth
- Community-based education of students and residents is dependent upon telehealth
- Telehealth-based Industrial health project in 6 states
 Company owner is a key donor
- State contract requires Neurologists to travel across the state for regional clinics – "windshield time" is unproductive and dangerous





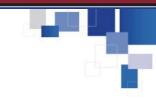


First budget meeting after the grant has expired...









Contact Information



Rob Sprang, MBA

Director of Kentucky TeleCare at the University of Kentucky;

Co-Project Manager, Kentucky TeleHealth Network

859-257-6404

rsprang@uky.edu

www.mc.uky.edu/kytelecare







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Contact Information



Keri Dostie Director of Marketing, AMD Global Telemedicine

kdostie@amdtelemdicine.com

Tel: 978-937-9021

www.amdtelemedicine.com







Thank You for Attending





