

# **Telehealth**

## *Task Force Recommendations*

### *&*

## *Grant Projects*

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# Telehealth Diffusion

- **Nationally**
  - **About 200 telemedicine networks**
  - **Roughly 3,500 service sites**
  - **Nearly 1M patients with remote cardiac monitoring**
  - **About 42 percent of hospitals use some form of telemedicine**
- **Locally**
  - **Almost 61 percent of acute care hospitals and 9 percent of physicians report adoption**
  - **Government and commercial payors report slow growth based on volume of claims for telehealth services**

# Task Force Background

- **Senate Bill 776, Telemedicine Task Force – Maryland Health Care Commission (2013 legislative session) required MHCC, in conjunction with the Maryland Health Quality and Cost Council, to reconvene the 2010 Telemedicine Task Force (task force) to assess methods to use telemedicine for improving access to health care and transforming care delivery**
- **Three advisory groups**
  - **Clinical**
  - **Finance and Business Model**
  - **Technology Solutions and Standards**

# Recommended Use Cases

1. **Improve transitions of care between acute and post-acute settings through telehealth**
2. **Use telehealth to manage hospital Prevention Quality Indicators**
3. **Incorporate telehealth in hospital innovative care delivery models through ambulatory practice shared savings programs**
4. **Require value-based reimbursement models to factor in reimbursement for telehealth**
5. **Use telemedicine in hospital emergency departments and during transport of critically ill patients to aid in preparation for receipt of patient**

# **Recommended Use Cases *(Continued)***

- 6. Incorporate telehealth in public health screening and monitoring with the exchange of electronic health information**
- 7. Deploy telehealth in schools for applications including asthma management, diabetes, childhood obesity, behavioral health, and smoking cessation**
- 8. Use telehealth for routine and high-risk pregnancies**
- 9. Deploy telehealth services widely at community sites, connected to health care professionals and/or the statewide HIE**
- 10. Use telehealth for remote mentoring, monitoring and proctoring of health care practitioners through telehealth for the expansion, dispersion and maintenance of skills, supervision, and education**

# Other Recommendations

- Organizations adopting telehealth should develop solutions to mitigate implementation challenges unique to their organization specific to:
  - Reimbursement structure
  - Remote facility and delivery site billing
  - Provider availability, monitoring, care coordination, and practice redesign
- Develop a publicly available online telehealth provider directory that includes information about telehealth services offered, and technologies used made available through the State-Designated HIE, CRISP

# **Task Force Funding Recommendations**

- **The task force proposed the General Assembly consider providing approximately \$2.5 million in funding for the implementation of select telehealth use cases**
  - **Use cases would be competitively awarded through grants between the State and the recipient**
- **Task force members noted that, absent funding from the General Assembly, the use of telehealth will remain stifled under existing models of care delivery where the incentives do not encourage innovation**

# **MHCC Awards Telehealth Grants**

- **In September 2014, MHCC awarded three nine month telehealth grants (\$30K per grant with a 1:1 funding requirement) to study the impact of telehealth on improving the coordination of care between general acute care hospitals and comprehensive care facilities**
  - **Atlantic General Hospital (prime) and Berlin Nursing and Rehabilitation Center**
  - **Dimensions Healthcare System (prime) and the Sanctuary of Holy Cross**
  - **University of Maryland Upper Chesapeake Health (prime) and Bel Air facility of Lorien Health Systems**



# Telehealth Symposium

- **An MHCC convened event:**
  - **Overview of the telehealth task force activities**
  - **A telehealth demonstration by the three grant recipients**
  - **Grant recipients will discuss implementation challenges and preliminary lessons learned from the demonstration**
  - **A facilitated discussion with telehealth users**
  - **Opportunities for providers to engage in a dialogue with telehealth users**
- **Logistics: February 25<sup>th</sup>, House Office Building, Room 180, 4:00-7:00pm**

# Closing Remarks

- **Telehealth provides the opportunity to enhance the patient experience by increasing access to care**
- **The task force recommendations, if implemented, are expected to improve quality of care, contain health care costs, and increase patient and provider satisfaction**
- **Lessons learned from the three telehealth grantee projects will be released in the fall of 2015**

*Thank You!*



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