NCTRC Telehealth Hack Series

FQHC Program Models Post-COVID

February 10th, 2021

NCTRC Telehealth Hack Data

- The National Consortium of Telehealth Resource Centers collects registration, participation, questions/answers, chat comments, and poll responses for this program and shares this data with the HHS – Health Resources and Services Administration (HRSA). **Your individual data will be kept confidential.** These data may be used for reports, maps, communications, surveys, quality assurance, evaluation, research, and to inform new initiatives

NATIONAL CONSORTIUM OF TELEHEALTH RESOURCE CENTERS

Regionals

CTRC	CALIFORNIA TELEHEALTH RESOURCE CENTER	**gpTRAC**	gpTRAC Great Plains Telehealth Resource & Assistance Center
HTRC	HTRC Heartland Telehealth Resource Center	**MATRC**	Mid-Atlantic Telehealth Resource Center
NETRC	NORTHEAST TELEHEALTH RESOURCE CENTER	**NRTRC**	NRTRC Northwest Regional Telehealth Resource Center
PBTRC	PACIFIC BASIN TELEHEALTH RESOURCE CENTER THE UNIVERSITY OF HAWAI'I AT MĀNOA	**SCTRC**	University of Arkansas for Medical Sciences SOUTH CENTRAL TELEHEALTH RESOURCE CENTER LearnTelehealth.org
SETRC	SOUTHEASTERN telehealth RESOURCE CENTER	**SWTRC**	SOUTHWEST TRC TELEHEALTH RESOURCE CENTER
TexLa	TexLa Telehealth Resource Center	**UMTRC**	UPPER MIDWEST Telehealth RESOURCE CENTER UMTRC.org

Nationals

CCHP	Center for Connected Health Policy The National Telehealth Policy Resource Center	**TTAC**	TTAC TelehealthTechnology.org

The National Consortium of Telehealth Resource Centers (NCTRC) consists of 14 Telehealth Resource Centers (TRCs). As a consortium, the TRCs have an unparalleled amount of resources available to help virtual programs across the nation, especially within rural communities. Each TRC is staffed with telehealth experts to who are available to provide guidance and answer questions. As telehealth continues to gain more visibility and recognition in healthcare, the TRCs will remain positioned to provide assistance for all.
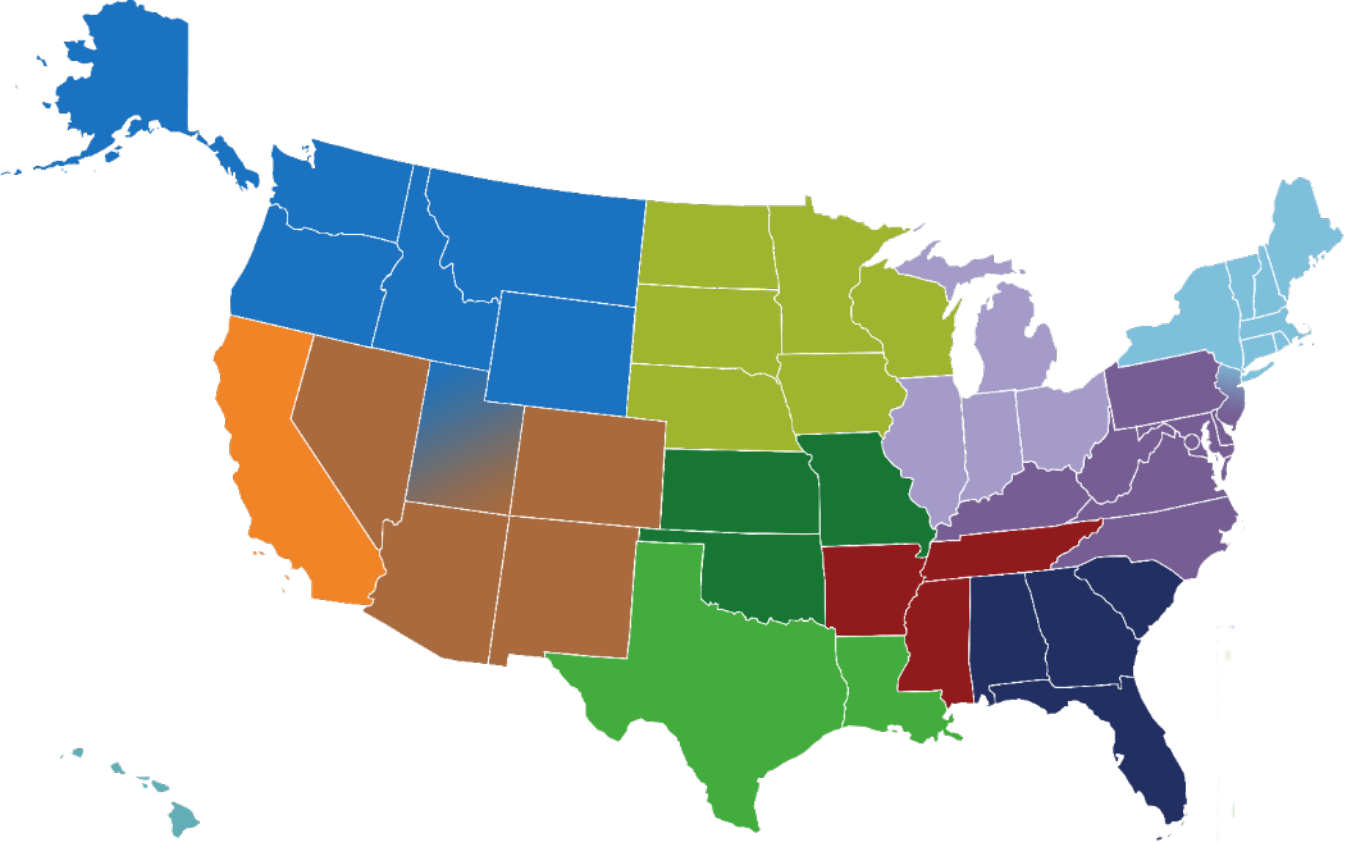
Transitioning from HHS - ASPR

The National Consortium of Telehealth Resource Centers (NCTRC) have played an active role throughout the legacy HHS – ASPR Telemedicine Hack series. With the program becoming widely popular, HHS – ASPR has agreed to transition the program to the NCTRC.

With the Telehealth Hack program now fully transitioned, the NCTRC will provide peer-to-peer learning sessions through March 2021, covering core topics and specialties where telehealth is utilized.

Webinar Tips and Notes

- Your phone &/or computer microphone has been muted.

- Please place your questions into **the Q&A function**.

- For technical assistance with Zoom, please use **the Chat function**.

- Attendees are able to adjust video sizing via Zoom's sliding feature.

- Attendees can toggle Closed Captioning in the toolbar.

- The webinar is being **recorded**.

- Recordings will be posted to our website and YouTube Channel:

    www.telehealthresourcecenter.org

    https://www.youtube.com/c/nctrc

UAMS Disclosure Policy

It is the policy of the University of Arkansas for Medical Sciences (UAMS) to ensure balance, independence, objectivity, and scientific rigor in all directly or jointly provided educational activities.

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Disclosures

The following planners and speakers of this CE telehealth series and activities have no relevant financial relationships with commercial interests to disclose:

Aria Javidan

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Clarette Yen, JD

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The accreditation compliance reviewer, Courtney Bryant, has no financial relationships with commercial interests to disclose.

Joint Accreditation and Credit Designation Statements

Joint Accreditation Statement
In support of improving patient care, this activity has been planned and implemented by the University of Arkansas for Medical Sciences and National Consortium on Telehealth Research Centers. University of Arkansas for Medical Sciences is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC) to provide continuing education for the healthcare team.

AMA Credit Designation Statement
The University of Arkansas for Medical Sciences designates this live activity for a maximum of 1.0 *AMA PRA Category 1 Credits*^{TM}. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

ACPE Credit Designation Statement
These knowledge based activities will provide pharmacists up to 1.0 contact hours or 0.1 CEU. CE credit information, based on verification of live attendance and completion of the program evaluation, will be provided to NABP within 60 days after the activity completion.

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ANCC Credit Designation Statement
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NATIONAL CONSORTIUM OF TELEHEALTH RESOURCE CENTERS

LOD learnondemand.org

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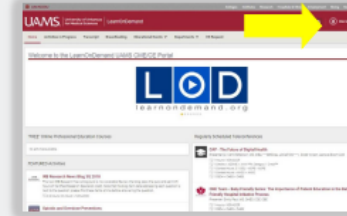
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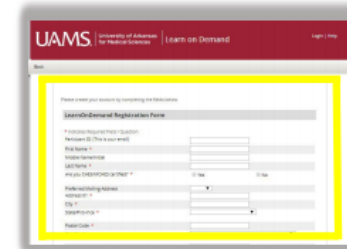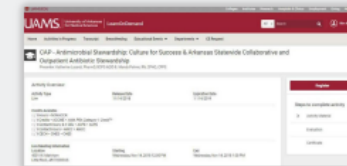
Certificates in LOD
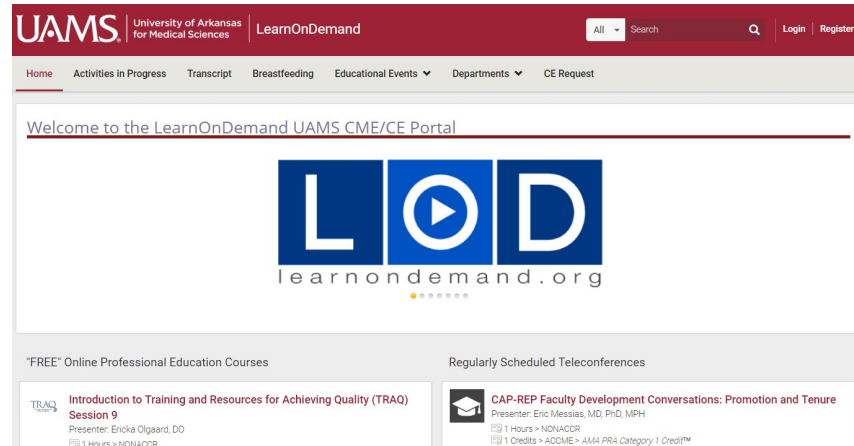
In order to receive your CE credit:

- Login to https://learnondemand.org/lms/activity_overview?@curriculum.id=-1&@activity.id=7286280 with your new or existing login.
- Search for the Topic
- Launch, Evaluate, click continue to print your certificate.

Deadline!!!

All evaluations must be completed by

Wednesday, February 24, 2021

If you do not complete an evaluation by this deadline, you will not receive continuing education hours for this conference.

Course Evaluation & CE Certificate

❖**Deadline !!!**

February 24, 2021;   11:59 PM

No credit will be awarded after this date!!!

❖**www.learnondemand.org**

Questions about evaluations and/or certificates should be

directed to **IDHI@uams.edu**

or 1-855-234-3348

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TRC NATIONAL CONSORTIUM OF **TELEHEALTH RESOURCE CENTERS**

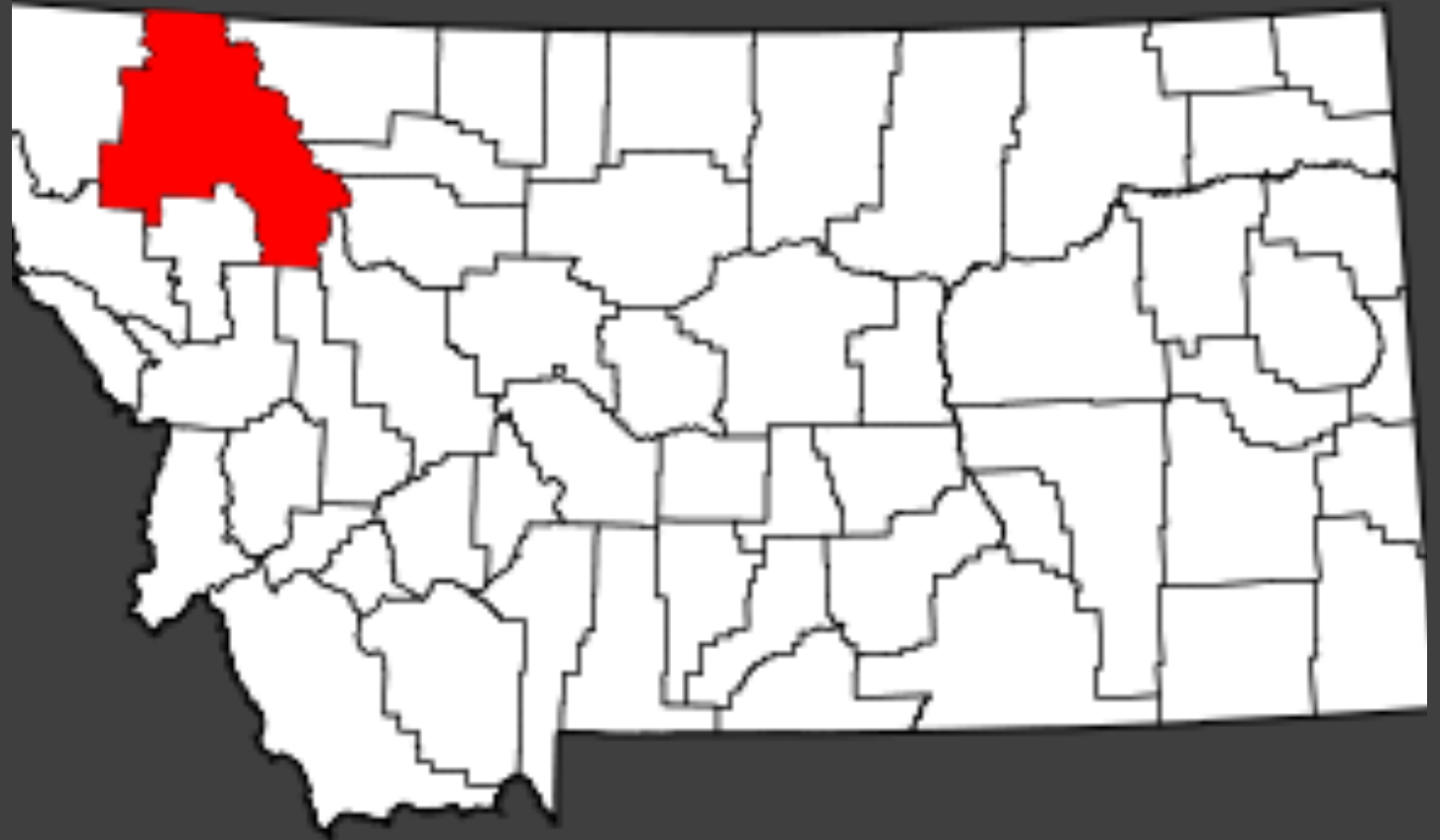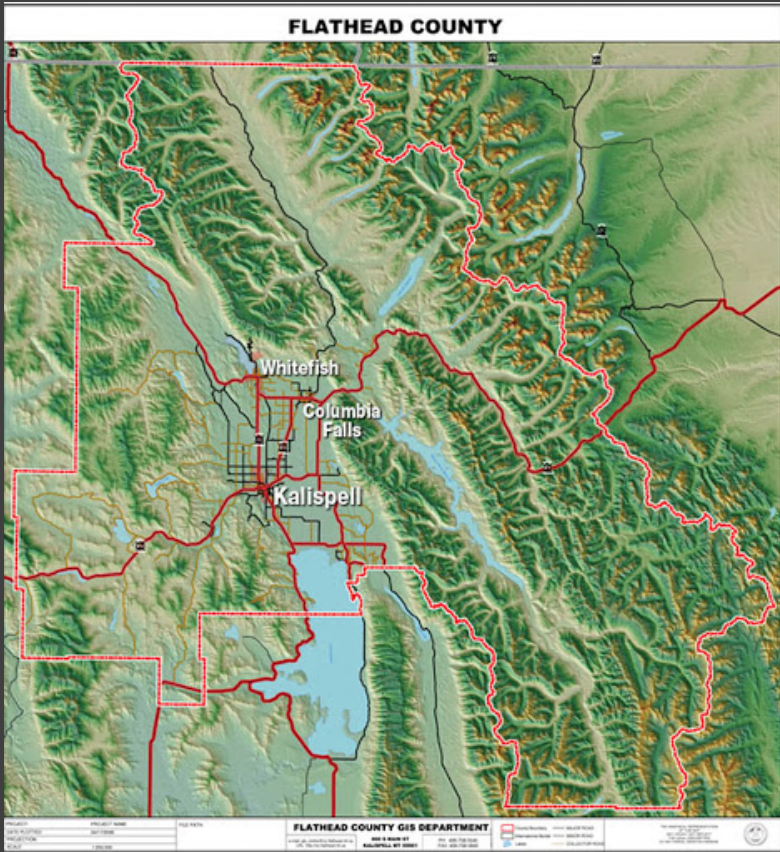**L▶OD** learnondemand.org

Today's Agenda

- **Introduction (5 min)**- Becky Bounds, MSN

- **Flathead Community Health Center (12 min)** – Leslie Diede, MPA, CHES

- **Finger Lakes Community Health Center (12 min)** – Casey Castner

- **Community Health Centers of South Central Texas (12 min)** – Rafael De La Paz

- **Panel Q&A (10 min) –** Moderated by Mei Kwong, JD

- **Closing Remarks** – Mei Kwong, JD (4 min)

Flathead County, Montana

- Population: 103,000
- Square Miles: 5,256 (slightly smaller than the state of Connecticut)
- Population Density: 17.9 people/square mile

Flathead Community Health Center

Flathead County, Montana

Flathead Community Health Center

Sites and Services

- Unique Patient: 8,000+
- Kalispell, MT site: Medical, Behavioral Health, and Dental Services
- Hungry Horse, MT site: Medical, Behavioral Health, and Dental Services
- Addiction Services site: Substance Use Disorder and Medical Services
- School Based sites (6): Behavioral Health and Medical Services

Flathead Community Health Center

Telehealth Implementation Prior to March 2020

- Providers like to see their patients
- Patients like to see their providers
- Reimbursement was a HUGE challenge
- Broadband challenges
- Patient access challenges
- New --- Unknown --- Scary

Flathead Community Health Center

Preparation

- Address Reimbursement Challenges
  - Acceptance of risk
  - Support from PCA and other FQHC's in a rapidly changing environment
- Electronic Health Record Changes
  - Implementation of telehealth module
  - Creation of "TV" Visit Types

Flathead Community Health Center

Preparation

- Electronic Health Record Changes
  - Creation of templates for televisits
    - Ensure necessary documentation
    - Future reporting needs (financial, UDS, etc.)

HPI: ▽
Telehealth
    Telehealth Visit
        Telehealth total visit time (minutes) *50*
        Consent to telehealth visit *Yes*
        Verbal consent obtained from patient for telehealth visit. The patient is aware that there are charges associated with this visit and voiced understanding and agreement. *Yes*
        Provider location: *Clinic*
        Patient location *Home*
        Methodology of visit: *Either Audio/Visual (with patient on camera)*

Assessment:

Assessment: ▽
- Telehealth Visit - Z99.99 (Primary)

Flathead Community Health Center

Preparation

- Reasons for televisits
- Training for staff
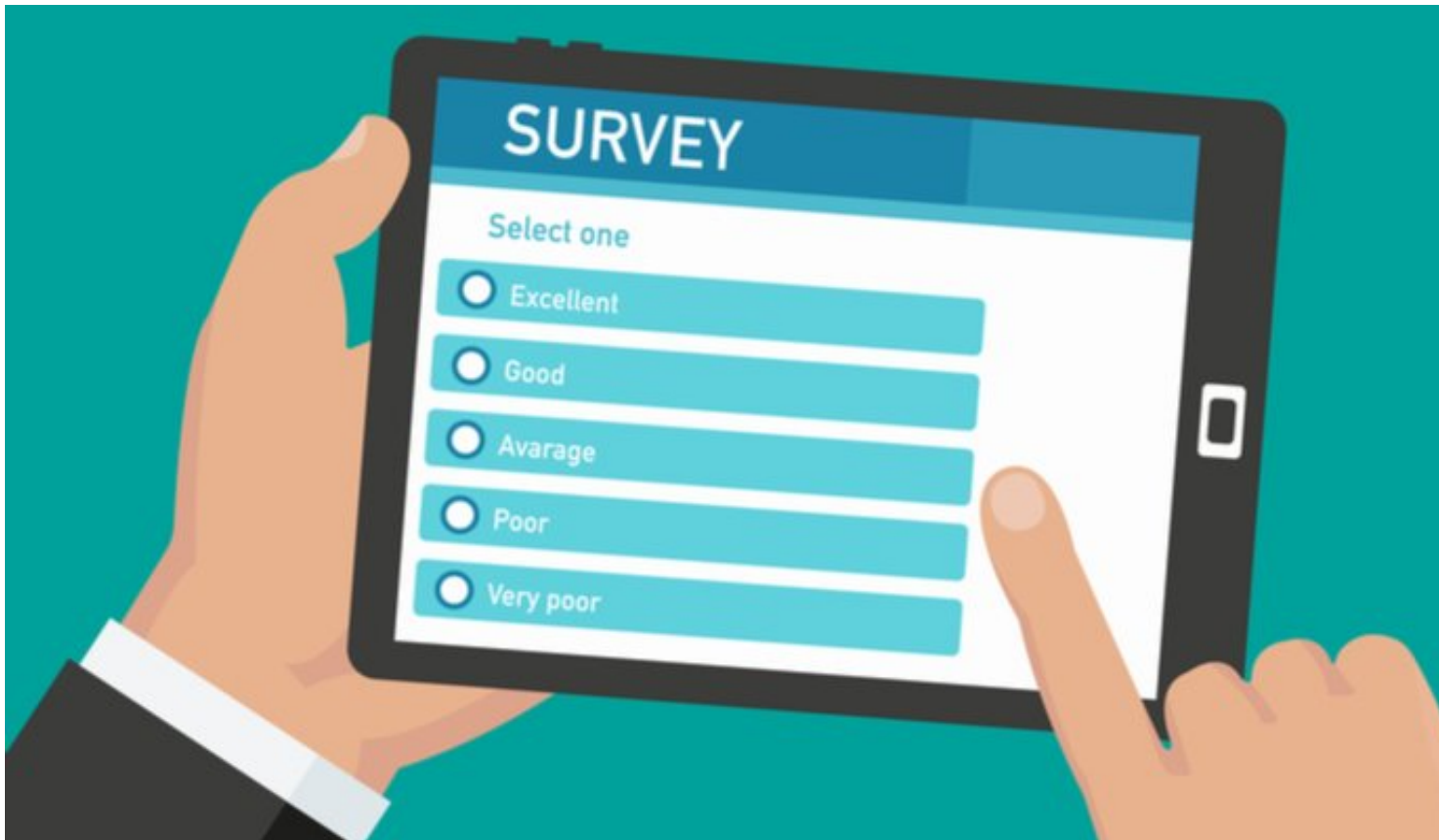

- Aaaannnnndddddd GO!

Early Implementation Feedback

- Patient appreciation of availability of televisit services
- Frustration with technology
- Appointments were dropped if the provider was running behind
- Remaining uncertainty with reimbursement
- The "Saving Grace"

Flathead Community Health Center

Quality Improvement

- Patient Satisfaction Surveys
  - Increased access
  - Overall satisfaction with technology
  - Prefer face-to-face care
- Quality Council Workgroup
  - Representation from medical, dental, and behavioral health
  - Reception, nursing, provider, billing, and administration
  - Monthly meetings

Flathead Community Health Center

Quality Improvement

- Key Improvement Strategies:
  - Technology improvements in exam rooms
  - Addition of Zoom platform
  - Dedicated telehealth gurus
  - Changes in schedule with televisits at beginning of shifts
  - Protocol for telephone contacts that meet criteria for visit to transition into televisit

Flathead Community Health Center

Quality Improvement

- Key Improvement Strategies (cont.):
  - 100% Behavioral Health and Psych Appointments
  - Active transition of behavioral health reasons for medical appointments (anxiety, depression, etc) to televisits
  - Allowance for "In Office Televisits" to address technology limitations

Flathead Community Health Center

Moving Forward

Leslie Diede, MPA, CHES

Quality & Operations Manager

Flathead Community Health Center

1035 First Ave W

Kalispell, MT 59901

ldiede@flathead.mt.gov

Who We Are:

Rural FQHC in Finger Lakes Region of NYS

Providing comprehensive medical, dental, mental health, SUD, nutrition, care management, and advocacy services to the communities we serve.

- 8 Health Center Sites
- Community Portable Dental (Schools, Head Starts, Jails)
- Mobile Medical Program for Farmworkers
- Extensive Care Management Services

2019 UDS Data:

- 28,927 Total Users
- 7,096 Ag Workers
- 64% of patients want to be seen in a language other than English

Telehealth Terminology

Originating Site: This refers to where the patient is physically located while receiving services via telehealth technology

Distant Site: This refers to where the consulting specialist or provider is physically located to provide services via telehealth technology

Telehealth Terminology

Internal Program: When both the patient and provider are physically located in one of your health centers

External Program: When the patient is physically located in one of your health centers, and the provider is from a separate entity outside of your organization

Direct-to-Consumer Program: When the patient is physically located in their home. The provider can be in the health center or in their home

Telehealth Services Offered at FLCH

- TelePediatric Dentistry
- Teledental Exams
- TelePsychiatry
- TeleMental Health (LCSW)
- Digital Retinopathy Screenings
- TeleRD (Nutrition)
- TelePediatric Neurology
- TeleHIV/AIDS Care

- TeleHCV (Hep C)
- TeleTAC (Treatment Adherence Counseling)
- TeleLGBTQ+
- TeleHormone Therapy
- Interpretation Services
- Provider Precepting
- Virtual Reality
- Primary Care Visits
- Direct-to-Consumer Visits

Covid Effect on Our Telehealth Program

Due to changing regulatory and reimbursement guidelines surrounding the Covid-19 pandemic, FLCH has decided to follow the stricter guidelines put in place before the pandemic. This way, if any of these new allowances are repealed, we won't have to work quickly to change our program to fit the new guidance.

Challenges

- Finding a platform to fit the needs of all our telehealth programs and our administrative video conferencing needs

- Staff buy-in

- Internet connectivity for our patients

Platform Selection

We developed a platform selection matrix to help us identify what our organization needed from a platform to be successful. We used the matrix to objectively compare platforms and see which would best fit our needs moving forward.

Staff Buy-In

Telehealth workflow should be as close to your program's in-person visit workflow. This helps to:

- Minimize staff confusion and room for error
- Make telehealth training easier and smoother
- Reduce staff concerns and pushback

Internet Connectivity for Patients

- Bandwidth Questionnaire
- Community Internet Hubs
- Advocacy for Community Bandwidth

Plans for 2021

- Implementing an RPM program

- Platform conversion

- Interpretation software and video platform integration

Questions?

Casey Castner

Caseyc@flchealth.org

315-870-6631

TELEHEALTH IMPLEMENTATION

Rafael De La Paz, Chief Executive Officer

Community Health Centers of South Central Texas (CHCSCT)

SERVICE AREA

- CHCSCT is an FQHC that operates eight clinic sites in five different counties; Recent growth has allowed CHCSCT to expand its geographical coverage, thus reaching more underserved and uninsured individuals.

- In 2019 CHCSCT rendered services to 19,694 unduplicated clients and provided 64,262 visits.

- Although geographically different these communities face similar challenges.
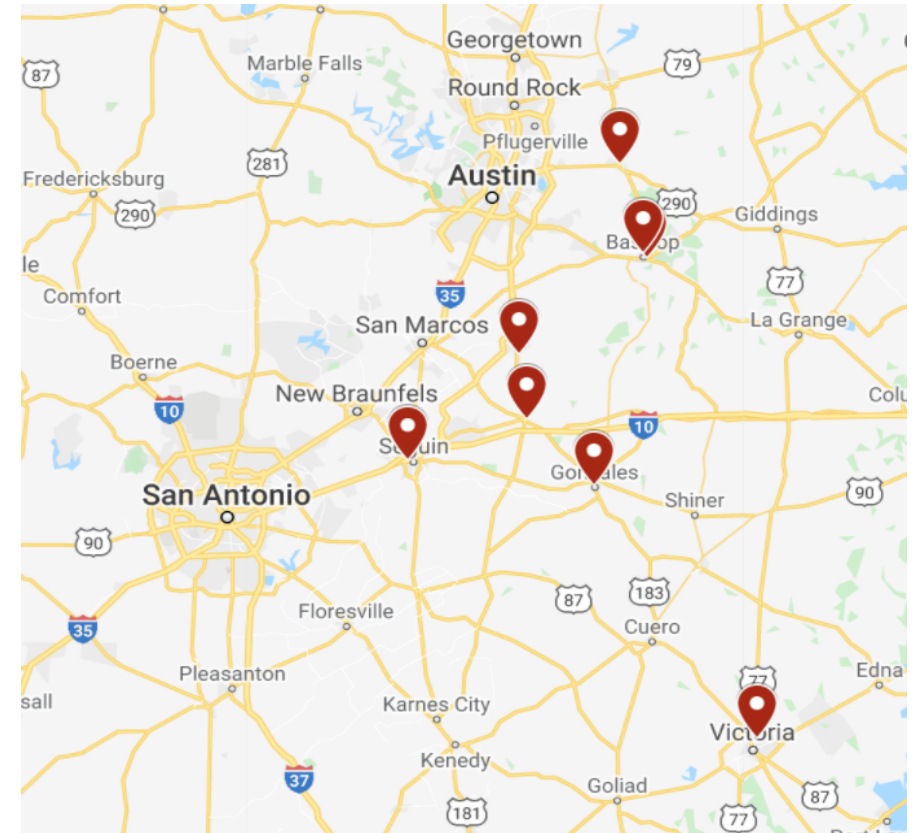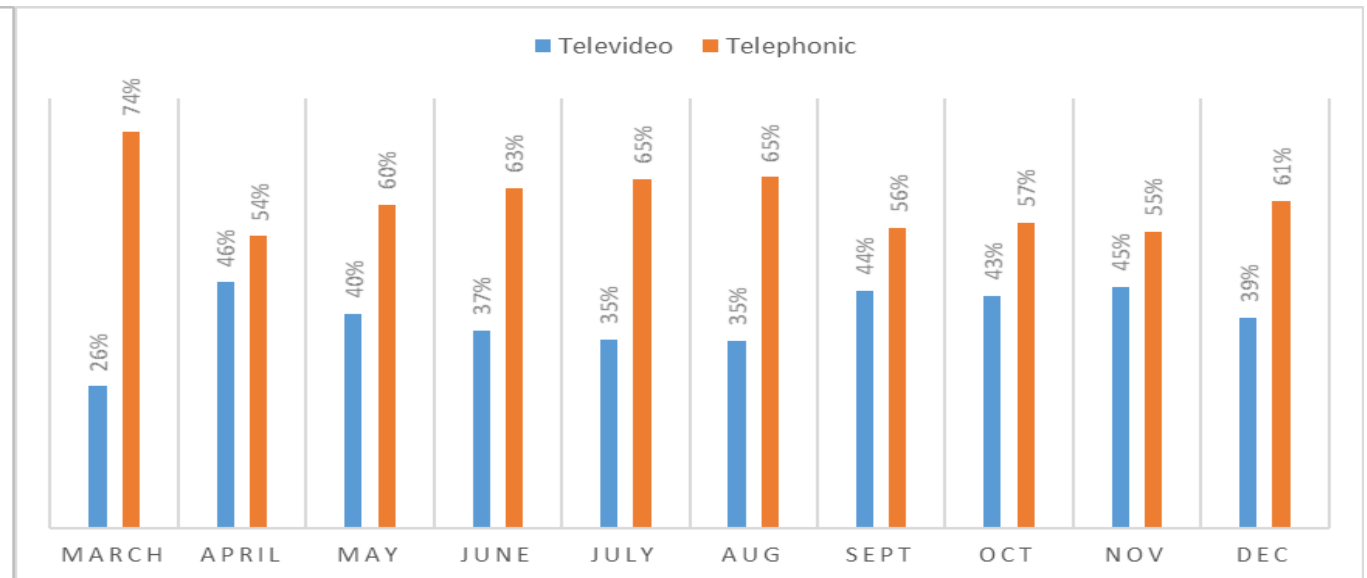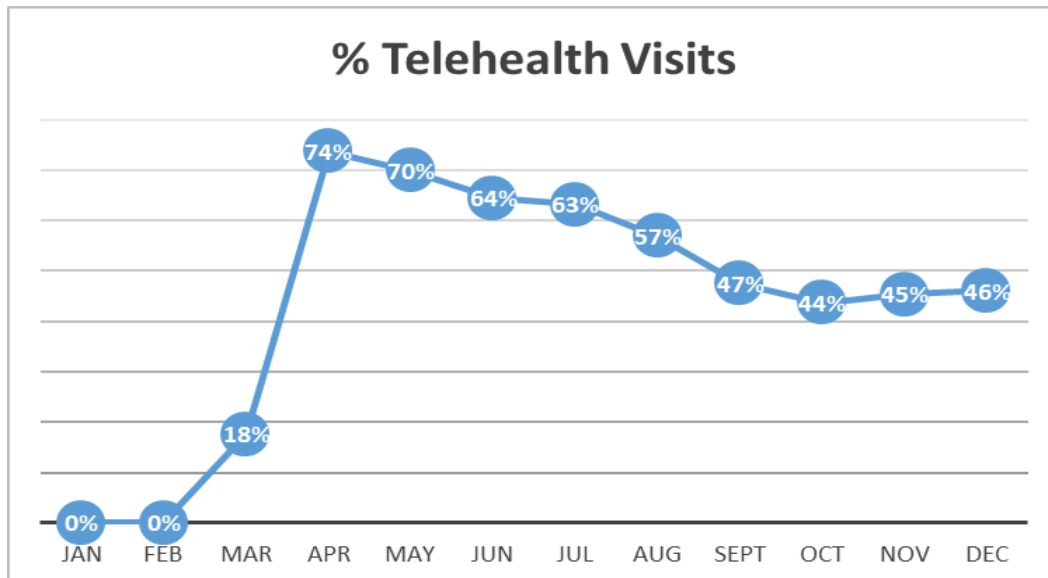
CHANGES DUE TO COVID-19

- **In early March cases of COVID-19 began to be reported in the San Antonio and Austin area. Our leadership team began planning and coordinating our next steps to ensure our readiness.**

- **On March 16th as an attempt to minimize the risk of exposure for both patients and staff the Center implemented the following:**

  - Changes to Hours of Operation

  - COVID-19 Telephonic Screening

  - Scrubbing of schedules to remove non-emergent visits.

  - Patients who were stable and in need of refills were offered a 30-day supply to ensure continued care.

  - Patients were instructed to call the front desk when arriving at the clinic and asked to wait in their vehicles.

  - Curbside visits/testing were offered.

  - OB ONLY visits were scheduled in (4) hour blocks.

  - Dental services were postponed. Only emergency dental visits were provided on a case by case basis.

  - Dental support staff redirected to answering phones.

COMMUNITY
HEALTH CENTERS
OF SOUTH CENTRAL TEXAS, INC.

TELEHEALTH IMPLEMENTATION

- Our Center decided to utilized Updox for its televideo solution.

- On March 19th, the first televideo visit was piloted at Gonzales site, by March 23rd, all medical and mental health providers were set-up and utilizing Updox.

- In 2020 we generated a total of 17,613 telehealth visits.

- Currently 48% of all medical and mental health encounters are provided via telehealth.

% Telehealth Visits

JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEPT	OCT	NOV	DEC
0%	0%	18%	74%	70%	64%	63%	57%	47%	44%	45%	46%

Televideo / Telephonic

|	MARCH	APRIL	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC
Televideo	26%	46%	40%	37%	35%	35%	44%	43%	45%	39%
Telephonic	74%	54%	60%	63%	65%	65%	56%	57%	55%	61%

CHALLENGES ENCOUNTERED

- Urgency due to COVID-19
- Lack of experience
- Lack of broadband/connectivity
- Technology
- Telehealth equipment
- Workflow development (scheduling, consents, screening, etc.)
- Patient Education
- Billing concerns
- Staff training
- Provider comfort level
- EMR integration

BEST PRACTICES

- Developing specific workflows

- Staff designated to working out technical issues with patients before telehealth visit

- Electronic signature software such as Docusign for consents and forms

- Patient education via website, social media and text messaging platforms (CareMesssage)

- Developing a list of type of visits appropriate for Telehealth

- Dual monitors and headsets for providers

- Improving internet connection speed
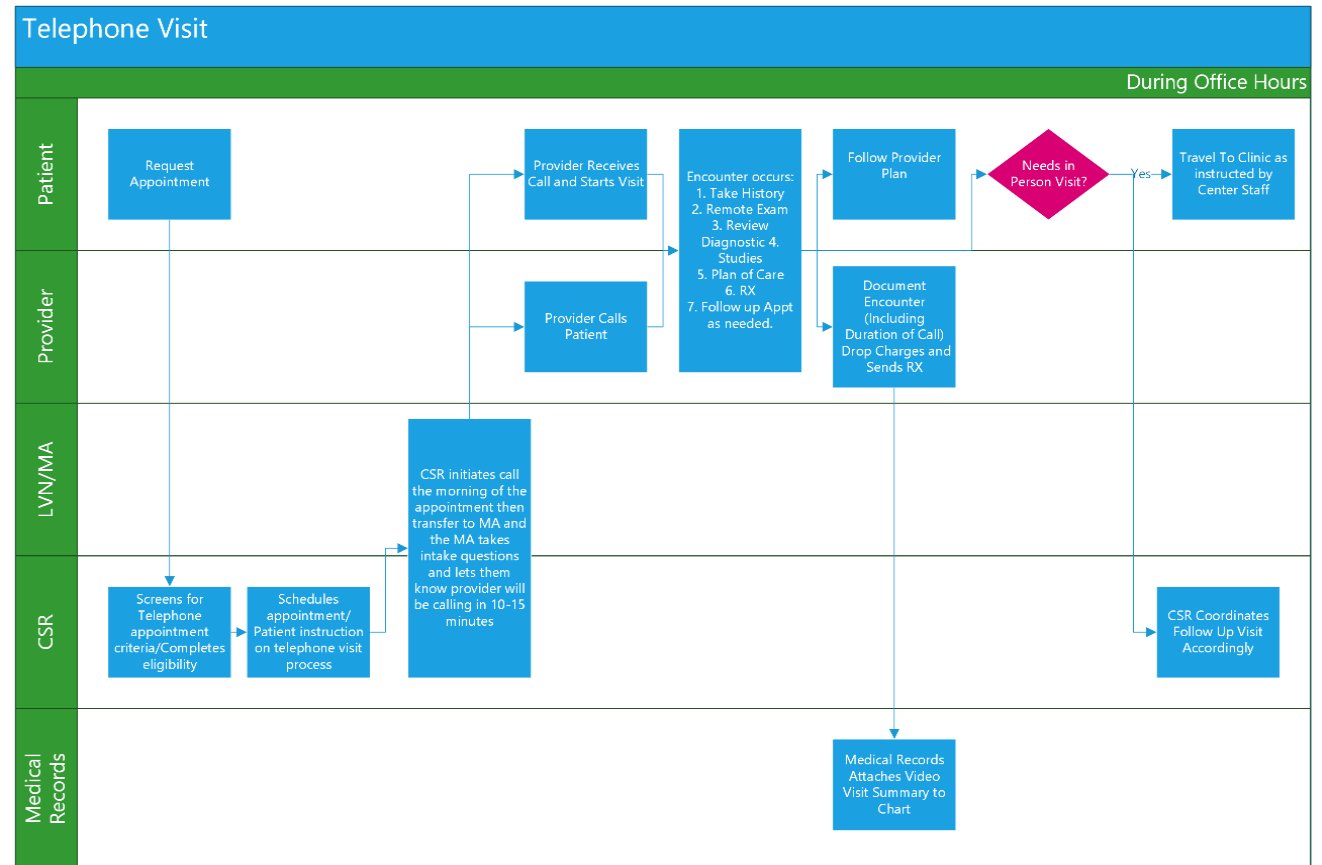
BENEFITS OF TELEHEALTH

Patients

- Eliminates chance of COVID-19 exposure
- Convenient for patient
- No need to take off work
- Helps with transportation barriers
- Eliminates wait times
- Increased willingness to share openly
- Decreased anxiety in pediatric patients (Fear of vaccines)

Providers

- Safe option for patients and staff
- Patients keeping appointments
- Quick and to the point
- Patient satisfaction
- Increase capacity
- Helps with provider coverage
- Providers in quarantine can still care for patients

COMMUNITY HEALTH CENTERS OF SOUTH CENTRAL TEXAS, INC.

THANK YOU

Next and Upcoming Sessions

February Session – Part 2

Program Models Post-COVID

February 17th, 2021: 11 AM – 12 PM PT

- *Topic: Health Professions Training Models Post-COVD*

March Sessions

Early Interventions in Telehealth

- March 10th, 2021: 11 AM – 12 PM PT
- March 24th, 2021: 11 AM – 12 PM PT

Thank you!

Finger Lakes Community Health Bandwidth Questionnaire – Provided by Casey Castner

1) Do you have a smartphone, tablet, or computer with a microphone and camera?

2) Do you have wifi/internet connection at home?

3) Do you have a data plan?
>   If yes: Is your data plan unlimited?

4) Are you able to stream Netflix/Youtube/Videos and browse the internet with no issue?