Strategic Investments in Telehealth and Digital Tools for Health Centers:
Maintaining Your Competitive Advantage Beyond the Pandemic

Telehealth, Telemedicine, Digital Health, Connected Care and Virtual Health

Telehealth, telemedicine, digital health, connected care and virtual health all refer to providing health related services at a distance facilitated through the use of technology. While these different terms are sometimes used interchangeably, there is not always agreement on what each one means or how specifically they might differ.

MOST WOULD SAY

Telemedicine refers to the delivery of medical services between a health care professional and a patient through the use of tele-communications technologies.

SOME WOULD SAY

Connected care is more expansive and includes all the uses of technology that support provider and patient interactions, including secure messaging, patient portal communications and remote patient monitoring.
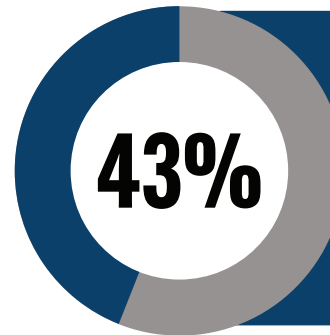
MOST WOULD SAY

Telehealth is even broader than telemedicine or connected care because it not only includes clinical interactions between providers and patients, but also includes the use of telecommunications technologies to support or enhance provider and patient education, health administration and more. Applications of telehealth go across all health service disciplines, including but not limited to medicine, dentistry, behavioral health, physical therapy, rehabilitation and public health.
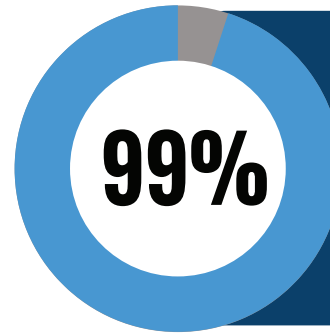
SOME WOULD SAY

Virtual Care is even broader than telehealth, adding patient and provider interactions with intelligent machines to the mix. Digital health tools include all the technologies used to support virtual care

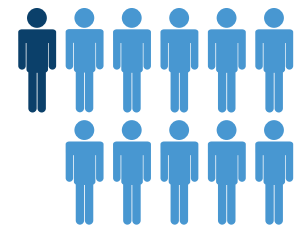**43%** Health Centers that used telehealth **PRIOR** to the pandemic

2019 Health Center Program Data: (https://data.hrsa.gov/tools/data-reporting/program-data/national/table?tableName=ODE&year=2019)

99% Health Centers that used telehealth **DURING** the pandemic

(https://data.hrsa.gov/tools/data-reporting/program-data/national/table?tableName=ODE&year=2020)
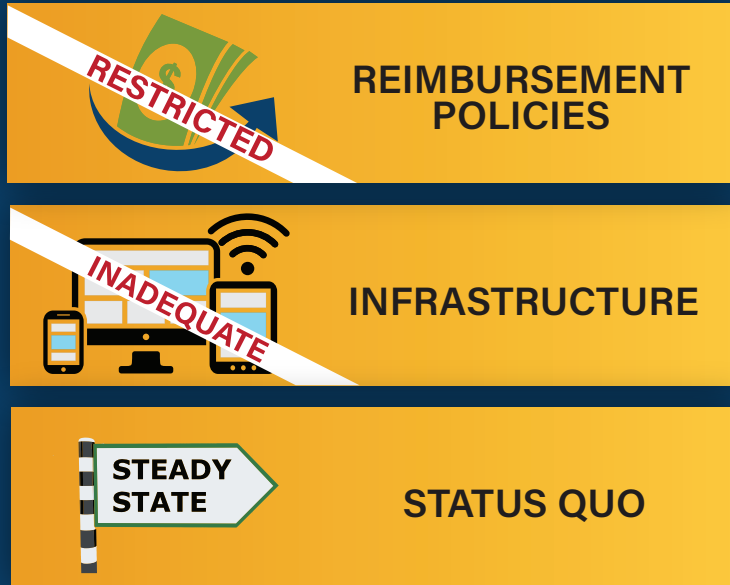
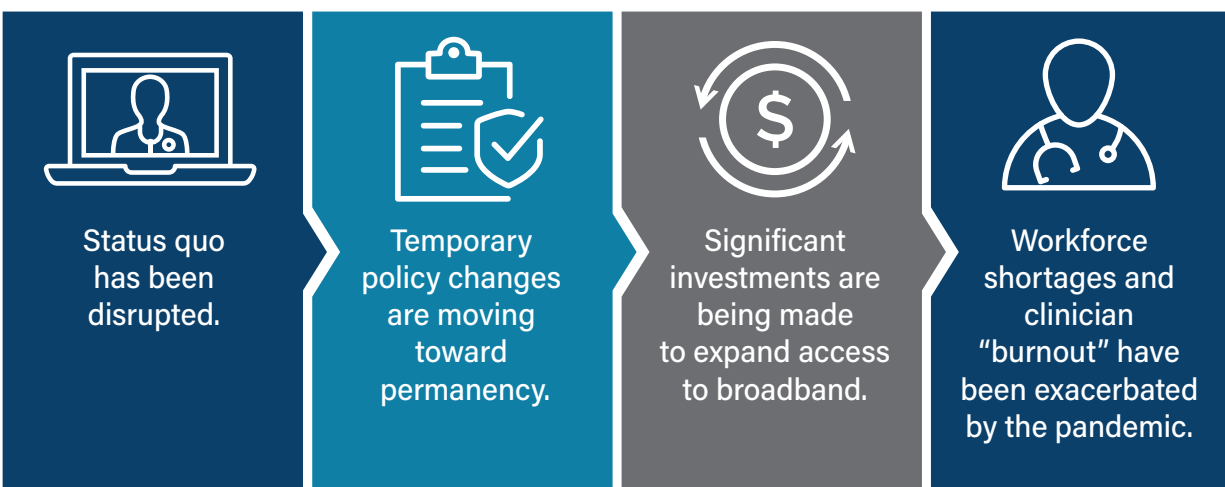**1 out of 11** people in the U.S. were served by Health Centers in 2020

https://data.hrsa.gov/tools/data-reporting/data-snapshot

More providers and patients have now experienced telehealth than any other time in history.

Why Did it Take a Pandemic?

RESTRICTED

REIMBURSEMENT POLICIES

INADEQUATE

INFRASTRUCTURE

STEADY STATE

STATUS QUO

AFTER THE PUBLIC HEALTH EMERGENCY:
Back to Business as Usual?

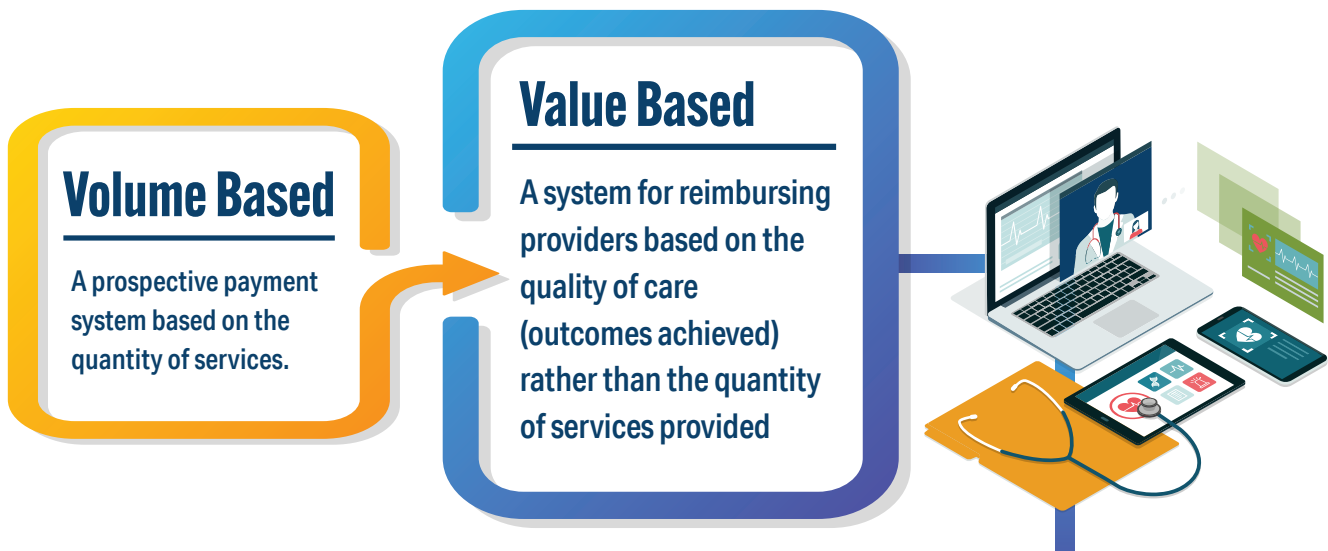| Status quo has been disrupted. | Temporary policy changes are moving toward permanency. | Significant investments are being made to expand access to broadband. | Workforce shortages and clinician "burnout" have been exacerbated by the pandemic. |

Landscape Change Has Taken Place!

Investing in the Future – *Why?*

There is an emergence of non-traditional competitors using technology innovation to deliver efficient low cost, but fragmented care.

1 The future is moving from volume based to value based models of care.

2 A High Tech/High Touch model of care is what will be needed to establish a competitive advantage.

3 Health centers have a real opportunity right now!

> "The more technology around us, the more the need for human touch..."
>
> – John Naisbitt (author and futurist)

Volume Based

A prospective payment system based on the quantity of services.

Value Based

A system for reimbursing providers based on the quality of care (outcomes achieved) rather than the quantity of services provided

Common Value Based Payment Models

Pay for Performance: Payment when quality and efficiency metrics are met.

Value Based Purchasing: Incentive payments when improvements/achievements meet a certain scoring criterion.

Bundled Payment: Overall sum payment for treating a particular condition, with rewards for coordination of care, preventing complications and errors and reducing unnecessary or duplicative tests and treatments.

Shared Savings: Providers who reduce their health care spending are given the incentive of receiving a percentage of any net savings realized as a result of their efforts.

Global Payment/Capitation: Systems/organizations are paid monthly based on the population they serve. Instead of covering the cost of an episode of care, the payments are intended to cover all services delivered to a certain group of people.

How Value Based Payment Models May Help Health Centers

- Give health centers flexibility to provide care in the ways patients need and want

- Allow health centers to make critical infrastructure improvements

- Help improve patient outcomes

- Help deliver holistic, patient-centered care

- Improve accountability by rewarding health centers that improve quality of care

https://www.chcf.org/publication/how-health-centers-improve-patient-care-value-based-payment/

Opportunities for Telehealth

- Improve access to timely evidence-based care (the right care, at the right time, in the right place.) Decrease no-shows and missed appointments.

- Improve quality metrics and health outcomes/better manage chronic conditions

- Support efficiency of care/improve the use of limited staff resources

- Enhance care coordination/facilitate team-based care

- Collect and monitor real-time patient data

- Improve patient satisfaction and engagement

- Support recruitment and retention/improve staff satisfaction and work/life balance

What to Consider Before Making an Investment in Digital Health Tools

1 **Conduct an environmental scan.** Assess current and emerging risks to your Health Center's sustainability. How might an investment mitigate some/all of those risks?

2 **Look at your vision and mission statement.** In what ways could an investment enable you to achieve your overall Health Center vision and mission?

3 **Identify your pain points.** What problem(s) do you most need to solve (see above section on Opportunities for Telehealth)? How would you prioritize those problem areas? How might an investment help you solve one or more of these problem areas?

4 **Learn what motivates** your staff and gives them a sense of meaning and pride in their work. How might an investment lead to better motivation?

5 **Think about what kind of care** would you want for yourself and your own family. How might an investment move you closer to that ideal?

Sustaining an Ongoing Innovation Strategy

✓ **Consider your budget.**
What sources (gifts, grants) might be available for one-time start-up costs? What can you afford on an ongoing basis?

✓ **Consider your goals.**
How would you define success? What is the lowest level of investment (see table on next page) you would need?

✓ **Play in the sandbox.**
Considering a new digital health technology or service? Ask for a "30-day free trial" or consider a small investment for testing purposes first! Test everything out internally with your own providers and staff. Get their green light before moving to testing with patients.

✓ **Conduct a Proof-of-Concept.**
Pick a small group of patients and quickly assess whether they like your new technology or service and whether it helps you to accomplish your intended purpose. Do a quick PDSA to see if you can improve the process or experience, but "know when to fold 'em." This is the beauty of investing small and testing. If it doesn't go well, move on to the next thing you might want to try, either in combination with what you just tried or as an alternative. Repeat!

✓ **Scale Up.**
Once you find something that shows promise, it's time to figure out the business model and potential Return on Investment (ROI) before you decide to scale up.

WHAT IF
I've Already Made an Investment and
Have Regrets?

In the real world, we often invest big without testing first. Work with what you have, but figure out where you want to go.

Put together your plans and requirements so the next time a funding opportunity comes around, you are prepared.

DIGITAL HEALTH TOOLS/SERVICES - Level of Investment Continuum

LEVEL OF INVESTMENT*
Ballpark annual costs based on CY21 environmental scan. Includes initial start up and ongoing maintenance. Actual costs will vary based on model (in-house, contracted, hybrid) implemented.

$ = LOW (Between $0 - $99 per patient per year)

$$ = MEDIUM (Between $100 - $1,000 per patient per year)

$$$ = HIGH (Greater than $1,000 per patient per year)

Level of Investment*	Digital Health Tools/Services	What It Could Accomplish
$	**Project ECHO** to support providers and build capacity	• Improve quality metrics and health outcomes/better manage chronic conditions • Enhance care coordination/facilitate team based care • Support recruitment and retention/Improve provider satisfaction and work-life balance
$	**Mobile Health Apps** to educate, monitor and/or incentivize behavior change	• Improve quality metrics and health outcomes/better manage chronic conditions • Support efficiency of care/improve the use of limited staff resources • Collect and monitor real-time patient data • Improve patient satisfaction and engagement
$	**Secure Text Messaging** to remind about appointments, taking medications, providing health information, collecting data	• Improve quality metrics and health outcomes/better manage chronic conditions • Support efficiency of care/improve the use of limited staff resources • Collect and monitor real-time patient data • Improve patient satisfaction and engagement
$	**Individual Telehealth Platform License** to support Direct to Consumer Telehealth Visits, Support Groups and/or Health Education for a Subset of Patients	• Improve access to timely evidence-based care (the right care, at the right time, in the right place) / decrease no-shows and missed appointments • Improve quality metrics and health outcomes/better manage chronic conditions • Support efficiency of care/improve the use of limited staff resources • Improve patient satisfaction and engagement • Support recruitment and retention/Improve provider satisfaction and work-life balance
$	**Patient Portal Secure Messaging/Virtual Visits** to support timely communication, monitoring and triage	• Improve access to timely evidence-based care (the right care, at the right time, in the right place) / decrease no-shows and missed appointments • Support efficiency of care/improve the use of limited staff resources • Collect and monitor real-time patient data • Improve patient satisfaction and engagement

Level of Investment*	Digital Health Tools/Services	What It Could Accomplish
$$	**eConsults/Specialty Care Consults** to support providers and build capacity and provide access to specialists	• Improve access to timely evidence-based care (the right care, at the right time, in the right place) / decrease no-shows and missed appointments • Support efficiency of care/improve the use of limited staff resources • Enhance care coordination/facilitate team based care • Support recruitment and retention/Improve provider satisfaction and work-life balance
$$	**Wearables and Peripheral Devices** to support virtual visits and aid in monitoring a particular condition	• Improve quality metrics and health outcomes/better manage chronic conditions • Collect and monitor real-time patient data • Improve patient satisfaction and engagement
$$	**Enterprise Wide Videoconferencing Platform Licenses** to support scheduled and on/demand acute care visits for all patients	• Improve access to timely evidence-based care (the right care, at the right time, in the right place) / decrease no-shows and missed appointments • Improve quality metrics and health outcomes/better manage chronic conditions • Support efficiency of care/improve the use of limited staff resources • Improve patient satisfaction and engagement • Support recruitment and retention/Improve provider satisfaction and work-life balance
$$$	**Remote Patient Monitoring** to support chronic care management and prevent hospital readmissions for all patients who meet pre-defined eligibility criterion	• Improve quality metrics and health outcomes/better manage chronic conditions • Support efficiency of care/improve the use of limited staff resources • Collect and monitor real-time patient data • Improve patient satisfaction and engagement
$$$	**Digital Preventive Screening Services** (e.g., Diabetic Retinopathy Screening, Mobile Mammography)	• Improve access to timely evidence-based care (the right care, at the right time, in the right place) / decrease no-shows and missed appointments • Improve quality metrics and health outcomes/better manage chronic conditions • Support efficiency of care/improve the use of limited staff resources

Mid-Atlantic **Tele**health Resource Center

NATIONAL ASSOCIATION OF Community Health Centers®