



REMOTE CARE INTEL

Edition #1



Introduction

After the word telehealth entered mainstream lexicon, most hospitals offer services remotely in some shape or form. But its implementation is taking many twists and turns, that is dependent not just on a hospital's internal situation, but a host of external factors as well from the legal and technological landscape. Remote Care Intel (RCI) is a bi-weekly news report on everything remote care delivery that keeps you updated on what's happening in the industry on matters of digital care. It includes coverage of all components of remote care management such as patient engagement, care coordination, HIPPA compliant messaging, documentation and execution of clinical workflows, patient monitoring, chronic care management etc.



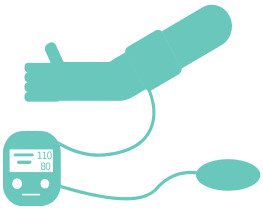
Purpose

The information presented on RCI is best suited for those who want to stay up to date with the latest insight on remote care. Unlike our other content, it is not published on our website but distributed to individuals who are in a position to affect patient care management using telehealth. The distribution channels are email and relevant social media. We hope that readers find the content useful in discerning the ins and outs of remote care, figure out to make it work for them, and stay one step ahead in cognizing its future development.

WHO SHOULD READ THIS?



We think all stakeholders in healthcare who are eyeing remote care closely would stand to benefit from such aggregated knowledge. Particularly those inside a provider organization may find it especially helpful due to the time efficiency it offers. In an industry as dynamic as healthcare, it is crucial to be briefed on the latest intel, RCI brings it all together in one place. The following positions below will find RCI's content right up in their wheelhouse.



Responsible for implementing remote care on the ground. Have direct contact with patients, and thus are in the best position to evaluate what is working and what is not.

Responsible for overseeing the deployment of remote care. Have to run the program, and thus are in the best position to understand the various factors that help or hinder the program's execution.

Accountable for remote care in their organizations. Have a bird's eye view of the successful piloting, monitoring and updating of remote care delivery, and thus are in the best position to formulate strategy.

RN, Telehealth

Primary Care Transformation Manager

Chief Patient Engagement Officer

RN, Chronic Care Management

RN, Care Manager

Chief Executive Officer

Advisor, Complex Chronic Care

Director Telehealth

Chief Medical Officer

Telehealth Coordinator

Director of Care Coordination

Chief Innovation Officer

Outpatient Therapist

Patient Care Manager

Chief Medical Information Officer

Chronic Care Coordinator

RN, Case Manager

Chief Nursing Informatics Officer

July 22nd to August 2nd

July 22nd

FAIR Health, a non-profit organization focusing on healthcare transparency, released a white paper on telehealth. It had some very interesting findings. While telehealth grew by [624%](#) from 2014 to 2018, the majority of it was accounted for by non-hospital based provider to patient telehealth, at 84%. Acute upper respiratory infections was the most common reason cited for seeing a non-hospital based provider. In the same period from 2014 to 2018, the 31 to 40 age bracket were the largest users of telehealth, at 21% of all telehealth claim lines. However, for post discharge provider to patient cases, 82% of the claim lines consisted of those 51 and older.



RCI Takeaway: We can infer that Telehealth's popularity is mostly due to providers directly providing care to patients, creating a virtual market outside the hospital. But as patients grow older, they have a higher likelihood of coming into contact with hospitals, and remote care delivery post discharge might be an essential component of their care plan.

The Bipartisan Policy Center is a think tank based out of Washington DC that promotes bipartisan policies, generating consensus by pooling the best ideas from both sides of the aisle. It has been actively fighting for those with chronic care ailments. In its latest health policy recommendations to congress, it [proposes](#) specific policies that would enable greater integration between Medicare and Medicaid, so those dually eligible beneficiaries suffering from chronic ailments can get the care they need. They want individual states to be able to retain a greater share of Medicare savings that is attributable to the integration of services, which would incentivize greater collaboration between the two CMS programs. In addition, congress had approved the Medicare Advantage insurance plan to offer special supplemental benefits for the chronically ill (SSBCIs), starting in January 2020. The Bipartisan Policy Center recommends that necessary materials are made to educate providers on SSBCIs.

July 25th



RCI Takeaway: While healthcare policy has been slow to take effect, the noose around telehealth services, especially as it pertains to treating chronic ailments, is loosening day by day. All arrows point towards a more integrated healthcare system, where governmental agencies work together to provide care to whomever is in most dire need of it, and provide it in adequate amounts where the patient can live their lives in a healthy manner.

July 26th

The MD Magazine interviewed Tabassum Salam, MD, American College of Physicians (ACP) vice president for medical education. She lauded the use of telehealth practices. Arguing for telehealth's ability to reach the most at risk patients, she said "It's a physical or emotional strain to leave the home and go to a doctor's visit and the likelihood of those patients adhering to those appointments is low." [20%](#) of ACP physicians used video visit technology weekly, compared to 50% of them who reported using remote patient monitoring weekly. Adoption is not any faster due to fears associated with the technology. Manish Shah, MD, Vice Chair of Emergency Medicine Research at the University of Wisconsin-Madison School of Medicine and Public Health, spoke of high intensity telemedicine. In such scenarios, to mitigate the fear, technology would be coupled with technicians who would record the necessary information from patients by going to their house and using the monitoring devices.



RCI Takeaway: Remote care management via telehealth is a potential hotbed of innovation currently. The main barriers that exist are related to mistrust of technology due to errors or uneven access. But as technology improves, the basis of such fears seems to be dissipating. Especially, in remote patient monitoring which has become an integral component of healthcare, both in inpatient and outpatient settings.

There is much noise on coordinated care these days, especially from the more complicated diseases that require such type of care management. [Cancer Treatment Centers of America](#) joined in on the chorus by putting a comprehensive care plan for cancer on its website. It introduces the various aspects of the treatment journey a patient may experience via the care manager. It is interesting to observe the patient's journey through the point of view of the care manager, who is the designated go to person.

July 29th



RCI Takeaway: Care coordination has a major role to play in delivering the healthcare of the future. Different departments may have different approaches to it. With the advent of technology, it is easier to assign one person to be a patient's point of contact where that patient may be transferred to other care givers seamlessly.

July 31st

J.D. Power, the market research company conducted a survey on telehealth consumers as a preparation for a much larger benchmark study on telehealth satisfaction later this year. They found that young female patients aged 18 to 24 used telehealth services more than any other group, at 13.1%. [40%](#) of consumers wrongly said that their providers do not offer telehealth, and 34.6% of them said that they weren't sure. Only 17% of consumers were aware that their providers offered such a service.



RCI Takeaway: Fears of errors, access, privacy breaches, state licensing are all supply side issues that are limiting the access of remote care currently. But from the demand side of things, it is the lack of awareness that is holding telehealth back.

IN SUMMARY



This edition's news timeline shows that there are a multitude of survey studies coming out on telehealth which report increasing signs of adoption, albeit at a slow pace. The two areas where the intake is a bit faster than others is in remote patient monitoring (RPM) and chronic care management (CCM). The thought leaders seem optimistic enough by the sector's growth potential, and this is further corroborated by the state and federal legislatures who are continuously pushing for more remote care integration into mainstream healthcare. However, for the aforementioned bodies, it is more about reaching the underserved populations and less about innovating digital care. Healthcare marketing has a huge role to play as well about educating the masses about availing and maintaining care from afar.

What's Next?

The next RCI will be released on Tuesday, August 20th. It will build a report using articles from August 3rd to August 16th. If you are a subscriber, rest assured, it will be delivered to your inbox. But to be doubly sure, please make sure you opt in [here](#).

We will also be circulating this report on our social media channels. If you are receiving this on Twitter, LinkedIn or Facebook, please make sure you subscribe to our list by clicking [here](#). It will allow us to maintain a more direct relationship with you.

If you know someone who will benefit from this report, please do share. For any questions regarding RCI, please email the editor at rahat.haque@aetonixsystems.com

