# Telemedicine: A key to integrated care

APRIL, 22, 2020





### Leadership:

- George Ambrosio, MD
- Jennifer Crawford, MPA-C
- Ceil Brutosky, CIO

### **Practice Description:**

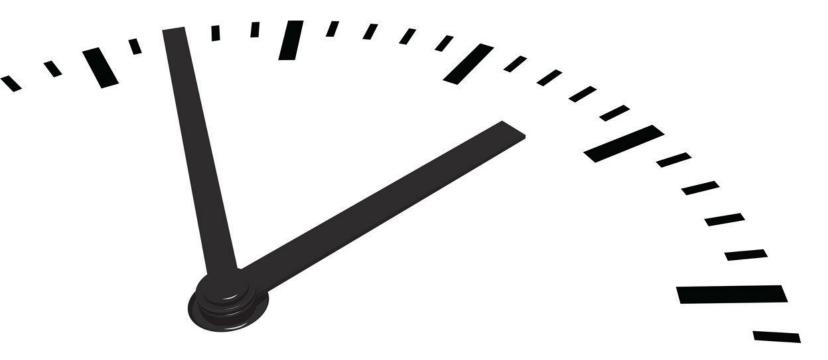
- Established 1983
- 5 docs, 9 PA/NP
- PCMH since 2009
- Advanced IT solutions
- Leadership Team 2007-present

### CHR (Comprehensive):

- EHR: Greenway PrimeSuite
- Portal: MyHealthRecord
- Chiron Health (Telemedicine)

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# 5000 Hours



### TELEMEDICINE CAN BE KEY TO RELATIONSHIP BUILDING

### FRAGMENTED CARE

### Transactional

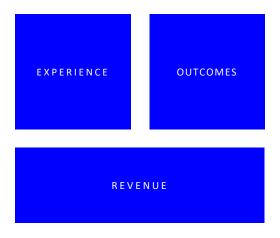


### INTEGRATED CARE

### Relationship





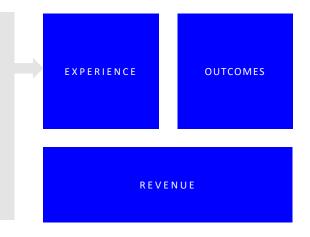


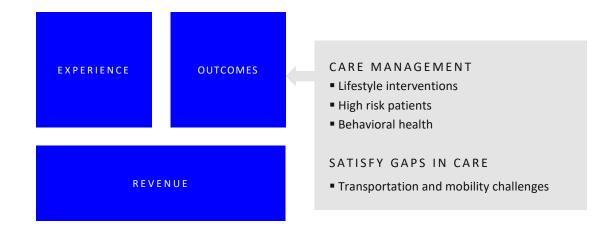
### MEET PEOPLE WHERE THEY ARE

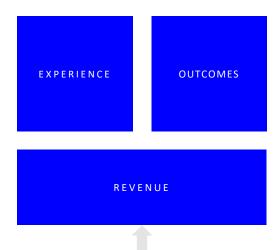
- On the Internet: wi-fi or cellular
- Out of town (Vacations, Work trips)
- College students at school
- Snowbirds

### **EXPAND STAFF OPPORTUNITIES**

- Telecommute
- (VERY) Flexible hours

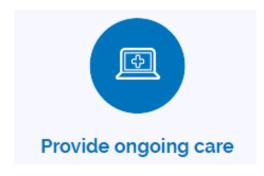


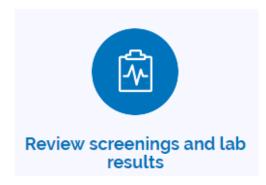




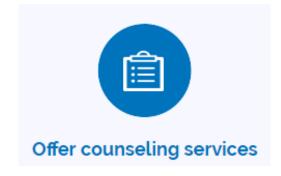
HORIZON REIMBURSEMENT PARITY
IMPROVED QUALITY MEASURES
PREVENT PATIENT LEAKAGE
ATTRACT NEW PATIENTS

### Telemedicine in Primary Care:









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## **Case Studies**

### Case Study 1: Chad

35 years, Male

How active goals and check ins create accountability and progress

	Status
(PMHx)	Active
	(PMHx) (PMHx) (PMHx) (PMHx)



### Care Plan

#### ACTIVE GOALS

- . Dietary Goal: Pt needs to get back on track with food tracking. I reviewed new food tracking Apps a
- Exercise Goals: Minimum daily step goal set to 9,000 with average daily step goal of 10,000

### Case Study 2: Susan

52 years, Female

How the comforts of home transform the relationship

Problem List		
Problem Name		Status
🕕 Diabetes Mellitus, Type II	(PMHx)	Active
Morbid obesity	(PMHx)	Active
1 Congestive Heart Failure	(PMHx)	Active
1 Stasis dermatitis	(PMHx)	Active
1 Myalgia	(PMHx)	Active
1 Hypothyroidism, Acquired	(PMHx)	Active
1 Hypertension, Benign Essential	(PMHx)	Active
1 Asthma	(PMHx)	Active



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# COVID-19 ACTION PLAN 3/18

GOAL #1 – PROTECT THE STAFF (35% June 2020)

GOAL #2 – MAINTAIN ACCESS TO CARE FOR PATIENTS

Telemed

1 PM rule

**NEW PRACTICE POLICIES EFFECTIVE THURSDAY** 

PRACTICE LIMITED TO PCMH PATIENTS ONLY

**TELEMED ARE PREFERRED VISITS** 

IN OFFICE VISITS BY APPOINTMENT (EXCEPTIONS)

**WELL VS SICK APPOINTMENT TIMES** 

# COVID-19 ACTION PLAN 3/18

PCMH ELIGIBILITY & TELEMED VISITS = THE NEW NORMAL

**NEW OFFICE HOURS & NEW RULES** 

**PPE (Personal Protective Equipment)** 

INFECTION CONTROL

**COVID-19 testing** 

**Next steps** 

# Experiential staff learning Telemed experience

- Chrome laptops
  - fcltelemed@gmail.com password to be distributed verbally
  - fcvtelemed@gmail.com
- Every staff member INCLUDING MD, PA, NP
  - Create an account in PrimeSuite
  - Schedule a "test" telemed visit
  - Complete a <u>telemed</u> visit this this week
- Every MD, PA, NP
  - Complete a Telemed visit as the clinician this week

# Weekly 30 min ZOOM staff meet-up

# **Chrome books instead of people**

Front Desk

Clinical staff

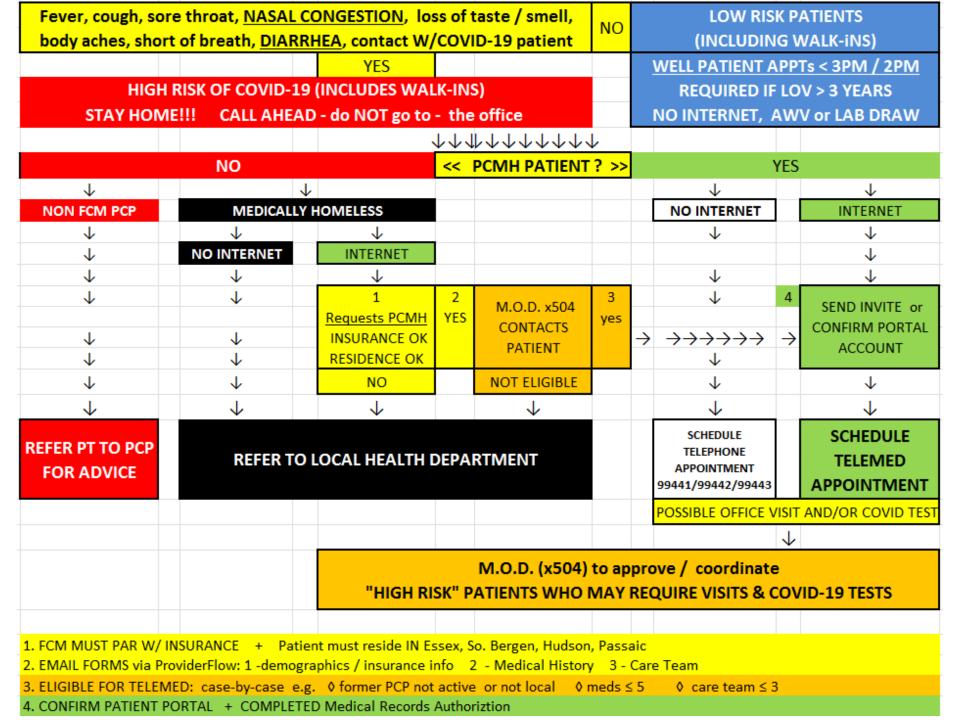




# Front desk triage for "well" visit hours Sick Visits & Covid Testing require pre-approval

### SICK PATIENT TRIAGE EFFECTIVE MONDAY 3/24

		NO SICK PAT	IENTS ARE	SEEN IN O	FFICE		
CALLY	STAY HOME!!! YOUR PCP FOR ADV	/ICE		FEVER, COUG	I, AND/OR BODY ACH	IES, COVID CONTACT	
	O THE OFFICE OR E			PATIE	NT CANNOT BE SEE	N IN OFFICE	
NON FCM PCP	MEDICALLY HOMELESS		<b>++++</b>	NO	РСМІ	H PATIENT	
<u> </u>	↓ ↓	↓ ↓ ↓			YES		
<b>+ + + - - - - - - - - - -</b>	NO INTERNET	INTERNET			INTERNET	NO INTERNET	
<b>↓</b>	<b>↓</b>	AGREES TO REGISTER W/FCM	SEND PORTAL INVITE	CONFIRM PORTAL ACCOUNT	<b>↓</b>	<b>↓</b>	
<b>V</b>	<b>V</b>	<b>V</b>		↓ ↓	<b>V</b>	<b>V</b>	
<b>V</b>	↓ ↓	NO ↓		↓ ↓	↓ ↓	↓ ↓	
REFER PT TO PCP FOR ADVICE	REFER TO LOCAL HEALTH DEPARTMENT			SCHEDULE APPOIN		SCHEDULE PHONE VISIT	



# thebmj Visual summary

## Covid-19: remote consultations

A quick guide to assessing patients by video or voice call

This graphic, intended for use in a primary care setting, is based on data available in March 2020, much of which is from hospital settings in China. It will be revised as more relevant data emerges.



### Get started

Quickly assess whether sick or less sick

### Rapid assessment

If they sound or look very sick, such as too breathless to talk. go direct to key clinical questions Establish what the patient wants out of the consultation, such as:

Clinical assessment Referral Certificate

Reassurance | Advice on self isolation

### History

Adapt questions to patient's own medical history

Examination

Assess physical and

mental function as

best as you can

### Contacts

Close contact with known covid-19 case

Immediate family member unwell

Occupational risk group

History of current illness

Date of first symptoms

### Most common presentation

Cough is

usually dry but

sputum is not

uncommon

Cough Fatigue

Fever

Up to 50% of

have fever at

presentation

patients do not

Short of breath

Becoming difficult

**Red flags** 

Severe shortness

of breath at rest Difficulty breathing Pain or pressure

in the chest

or pale and

mottled skin

Cold, clammy.

Covid-19:

Blue lips or face

Little or no

### Coughing up blood

Other conditions. such as:

Non-blanching rash

Over phone, ask carer or patient to describe:

State of breathing

Colour of face and lips

Over video. look for:

> General demeanour

Skin colour

Check respiratory function - inability to talk in full sentences is common in severe illness

How is your breathing?

Is it worse today than vesterday?

What does your breathlessness prevent you doing?

Patient may be able to take their own measurements if they have instruments at home

Temperature

Pulse

Peak flow | Blood pressure

Oxygen saturation

Interpret self monitoring results with caution and in the context of your wider assessment

	IN-OFFICE			TELEHEALTH	
	WELL-PATIENT APPOINTMENT	SICK-PATIENT APPOINTMENT		CHIRON TELEMED	TELEPHONE APPOINTMENT
ROUTINE OFFICE VISIT					
LOW-RISK	SECOND OPTION**	NO		FIRST OPTION	LAST OPTION
HIGH-RISK	NO	M.O.D.		FIRST OPTION	YES
ANNUAL WELLNESS VISIT					
MEDICARE (Novitas)	YES	NO		FIRST OPTION	NO
WIEDICARE (NOVICAS)	TES	NO		BMI/BP required	NO
COMMERCIAL INSURANCE	DECLUBED.				NO.
(incl. Medicare Advantage)	REQUIRED	NO		NO	NO
(			1		
TRANSITION OF CARE					
LOW-RISK	SECOND OPTION**	NO	1	FIRST OPTION	NO
			1		
HIGH-RISK	NO	M.O.D.	1	FIRST OPTION	NO

<sup>\*\*</sup>FIRST OPTION IF BLOOD DRAW OR PHYSICAL EVALUATION REQUIRED
e.g. POTENTIALLY SERIOUS PROBLEM, UNCONTROLLED DM/HTN/ETC, OVERDUE FOR FOLLOW UP

# Sick appointments with full PPE then parking lot flu /Covid-19 testing



## PATIENT COMMUNICATION

Phone auto-attendant (24/7)

www.FirstCareNJ.com (24/7)

**Blast emails** 

**Blast Texts** 

**Blast Phone calls** 

### **Patient Communication**



# **Patient Communication**

### LYNDHURST

Phone: 201.896.0900 Fax: 201.933.7600

#### MONDAY - FRIDAY

8am - 4pm well visits by appointment 4pm - 5pm sick visits by appointment

### CLOSED SATURDAY

### SUNDAY

9am – 2pm well visits by appointment 2pm – 3pm sick visits by appointment

### VERONA

Phone: 973,857,3400 Fax: 201,933,7600

### MONDAY - FRIDAY

8am - 4pm well visits by appointment 4pm - 5pm sick visits by appointment

### SATURDAY

9am - 2pm well visits by appointment 2pm - 3pm sick visits by appointment

### CLOSED SUNDAY

Same day Visits:By appointment
Call-ahead:Phone Check-in
Well visits early:Sick visits late day

### TELEMEDICINE

Mon-Fri: 8am - 9pm Telemed online visits

Sat-Sun: 9am – 5pm Telemed online visits

Same Day appointments \$0 Co-Pay for Telemed George Ambrosio, MD

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