TRANSITIONING TO TELEHEALTH

Simple tips for a successful transition from in-person based care to Telehealth Care

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WHAT IS TELHEALTH

► HRSA defines telehealth as *"The use of electronic information and telecommunications technologies to support long-distance clinical health care, patient and professional health-related education, public health and health administration."*

► *Simply put, telehealth is a way of having a patient encounter without the need of the patient and provider to be in the same room. Telehealth even offers a solution to the problem of the provider and patient not being available at the same time.*

TELEHEALTH DELIVERY MODELS

▶ The 4 most well used methods of telehealth are as follows:

  ▶ 1. Live Video – two-way live streaming video in which the provider and patient interact in real time.

  ▶ 2. Mobile Health – this is where a patient sends information through the use of a mobile device. This is like when you transmit dietary information through a phone app or when your smart watch monitors your exercise and shares it with your provider team.

  ▶ 3. Remote Monitoring – this is where a patient wears a medical device that reports medical information for a provider to monitor. This includes things as invasive as live video streaming of patients in hospital rooms to something as benign as when you open a pill bottle.

  ▶ 4. Store and Forward– This is where a medical team can transmit and review records, images and pre-recorded video at a later time through the means of secure transmission and communication.

FOUR BARRIERS TO TELEHEALTH

▶ The 4 most common barriers to telehealth are:

  ▶ 1. Availability of adequate high speed internet services (especially in rural America).

  ▶ 2. Protection of patient information(HIPAA Compliance)

  ▶ 3. Patient and Provider buy in.

  ▶ 4. Expensive initial costs to deploy telehealth.

AVAILABILITY OF ADEQUATE HIGH SPEED INTERNET SERVICES

▶ The going recommendation for adequate telehealth service delivery is a sustained connection of 1Mb upstream and downstream, also known as 1Mb duplexed. While this connection speed is easily acquired and maintained in urban areas, there can be challenges in the more rural areas of our country to maintain those speeds.

▶ Telehealth can be delivered over many different broad-band delivery models. DSL, T-1, Cable, Fiber, Satellite and Cellular services can all offer adequate broadband connections based on availability.

▶ Please remember live streaming video is very data driven and can use as much as 1GB worth of data for a 30 minute consultation.

Protection of Patient information (HIPAA Compliance)

▶ Ensuring the delivery of a private, encrypted, HIPAA compliant telehealth consultation is paramount. This gives both the provider team and the patient peace of mind to know the information is protected.

▶ When selecting a telehealth platform, ensure that the video and the audio are encrypted end-to-end. There are platforms out there that only encrypt audio and not video.

▶ There is currently a relaxation of HIPAA compliance enforcement regulations for the use of video platforms during COVID-19. This allows for the use of any non-public facing video platform to be used for the purpose of telehealth. This relaxation only applies to the use of video and all other HIPAA compliance regulations remain in place.

Patient and Provider buy in

- For the Patients, this seems to be the easiest barrier to overcome. Simply stated, most people are ok with the thought of not having to go to the doctors office with everything surrounding the COVID-19 crisis. When presented to a older client demographic as a way to keep them safe, the buy in is generally rapid. The younger patients seem to buy in much easier because of today's technology age and the virtual connection provided by cell phones already.

- The Providers, on the other hand, tend to be a little more difficult to convince. The best technique you can use today is the safety of not only themselves but the patients they are seeing. Doing practice examinations are the best way to reinforce that a provider can effectively practice medicine through a video medium. I always say when training a new provider, "if you have a great bedside manner in person, the video platform will only make it better. The patients will feel a true connection without the need for physical contact.

Expensive initial costs to deploy telehealth

▶ To deploy hardware based solutions, with peripherals, there is a substantial upfront cost, but most places are experiencing a ROI profitability model at 12-15 months when deployed with adequate scalability.

▶ Software based solutions, without peripherals have substantially less start up cost, but the operator losses the end to end management and end up relying on the cloud based provider to ensure encryption and quality of service.

▶ There is a great many organizations that find a blend of the two so that they have the flexibility of a software solution and the endpoint management capabilities of a hardware based solution.

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