Remote Monitoring & Chronic Care Management: A Community Health Center Model of Care

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Ahoskie Comprehensive Care
Health Disparities
- Cardiovascular Disease
- Diabetes Mellitus
- Hypertension

Barriers to Care
- Transportation
- Economic Status
- Low health literacy

Population
- 21% uninsured
- Median income - $23,500
- 70% African American
Roanoke Chowan Community Health Center

Piedmont Health Services

Gateway Community Health Center

Solid Foundations

Ocracoke Medical Center

Wake Health Services

Kinston Community Health Center

Robeson Health Care Corporation

Greene County Health Services

Chowan Hospital

East Carolina Heart Institute

Rural Health Group
RCCHC Current Network Partners

Inscope

Self-Insured

Private

Roanoke Chowan Community Health Center

Western Tidewater

OCHIN

COHC

COTN
Central Oregon Telehealth Network

Funded thru HRSA Office for the Advancement of Telehealth

Grant Number: H2aRH26030-01-00

Awarded: August 14, 2013
3 year funding
Remote Patient Monitoring Framework

Proven to improve health and enhance care by interconnecting stakeholders to increase accountability and change patient behaviors

Provider and Patient Connection
The Methodology
What We Measure

**Patient**
- Satisfaction
- Patient Activation Measures Survey (PAM)
- Compliance
- Personal Cost

**Clinical Indicators**
- HgA1c
- LDL
- BP, Pulse
- Weight
- Blood glucose
- Oxygen saturation

**Health Services Use:**
- # PCP visits
- Hospital Bed Days
- Emergency Room visits
- Contact by monitoring Nurse

**Medical Costs**
- PCP visits costs
- Hospitalization costs
- ER visit costs
The Results
RPM cost containment validated by Wake Forest School of Medicine

<table>
<thead>
<tr>
<th>64 Participants</th>
<th>Pre RPM</th>
<th>During RPM</th>
<th>Post RPM</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>6 Months Prior to RPM</td>
<td>6 Months During RPM</td>
<td>Proven Long-term Results Over 3 Years</td>
</tr>
<tr>
<td>Hospital Bed Days</td>
<td>199</td>
<td>99</td>
<td>83% Reduction</td>
</tr>
<tr>
<td>ED Visits</td>
<td>27</td>
<td>5</td>
<td>79% Reduction</td>
</tr>
<tr>
<td>Hospital and ED Charges</td>
<td>$1.34M</td>
<td>$382K</td>
<td>87% Decrease</td>
</tr>
</tbody>
</table>

- Total Hospital and ED Charges for 24 months after RPM was $483,024. The cost of caring for these patients had significantly decreased.

The RCCHC study demonstrates that Remote Patient Monitoring influences patient behavior which leads to persistent health benefits and cost containment.
Hospitalizations, Hospital Days and Emergency Room Visits by Telehealth Status, All Participants (N=64)
Remote Patient Monitoring

Annual savings from remote monitoring could amount to as much as $10.1 Billion for U.S. Residents with congestive heart failure; $6.1 billion for patients with diabetes; and $4.9 billion for patients with COPD.

- Wall Street Journal Report
Critical to your success is gathering, managing and analyzing data to allow us to:

- Deploy assets effectively
- Better understand performance and compliance data to maximize care for the population being served
- Forecast resources and budgets to efficiently allocate resources to the needs of the populations receiving care
- Assist clinical providers through data trends to improve the quality of care

Data Analytics allows you to look at data in ways to address the goals of the CMS Triple Aims
How do we pay for it?

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-Wall Street Journal Report
States with Parity Laws for Private Insurance Coverage of Telemedicine (2014)

*Map courtesy of the American Telemedicine Association


**States with proposed/pending legislation:** In 2014, Connecticut, Florida, Illinois, Iowa, Massachusetts, Nebraska, New York, Ohio, Pennsylvania, Rhode Island, South Carolina, Tennessee (ENACTED), Washington, and West Virginia

*No state-wide coverage. Applies to certain health services and/or rural areas only.*
Emerging Trends

- Aging of Population
- Wireless
- Efficiencies
- Industry Alliances
- Cost-effectiveness
- Healthcare market emphasis on patient experience
- Increased costs
- Government pressure
- Dwindling economic resources
- Decreased healthcare staffing
- Emphasis on error reduction
Get Connected
http://video.unctv.org/video/2365018117
http://www.youtube.com/watch?v=j1K1MtQQGY

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How can RCCHC’s Mission be expanded?

Leveraging best practices of public-private partnerships (PPP)

- Linking credibility and capability to scale proven model – build upon our proven Community Health Programs
- HRSA 2013 grant awarded for the Central Oregon Telehealth Network (COTN)
  - Replicate RCCHC’s program enabling primary care medical home teams to rapidly enhance the efficacy of its Patient-Centered Medical Home (PCMH)
  - Use clinical protocols via short-term remote patient monitoring interventions initially working with Mosaic Medical CHC.
  - The partnership of RCCHC, OCHIN and InScope will collectively support COTN in achieving their goals.

Delivering care via a “neutral” business and technical platform

- Vendor independence ensures right fit and best-of-breed solutions

Developing broad partnerships to cover diverse delivery needs

- Successful rural, suburban, and urban deployments require reach across FQHCs, HINs, Payers, product vendors, and data stores
What is the Value Proposition?

**PATIENT / EMPLOYEE**
- Fewer ED/Offices visits
- Fewer hospital re-admissions
- Improves overall health and quality of life
- Improves provider relationship
- Reduces out-of-pocket expenses
- Increases accountability and healthcare IQ

**PROVIDER**
- Real time access to patient health data
- Better view into patient’s lifestyle
- Supports meaningful use
- Reduces cost for safety net population
- Improves treatment plans and outcomes
- Supports Patient Center Medical Home and NCQA accreditation

**EMPLOYER**
- Lowers healthcare cost
- Improves productivity and morale
- Expands wellness programs
- Keeps employees on the job
- Positions company as innovative and employee friendly
How we help you get started with RPM

- Define a program that works for your organization/community
- Assist with identifying funding opportunities (private and public grants)
- Developing and responding to Grants
- Program startup and delivery support
Q&A
Establishing Innovative Partnerships
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