



Our best care. Your best health.SM

Building Telehealth Solutions at CHI Franciscan Health

February 26, 2015

Presented by:

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Director, Virtual Health Services

CHI Franciscan Health

Today...



3

24

481

6,720

Agenda

- Changes in healthcare
- Response from CHI and other industry leaders
- CHI Franciscan Health's Virtual Health Services
- Lessons learned
- What's ahead



Fundamental and Irreversible Changes are Occurring in Healthcare



Payment Model Shifts



Technology and Data



New Consumer-Centric Entrants



Consumerism

Radical Changes Demand New Skills

Health Progress, August 2012

“

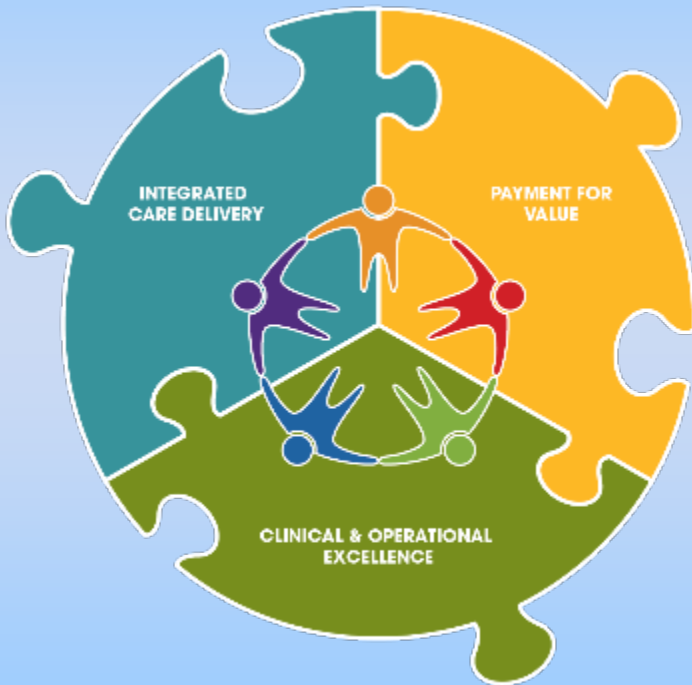
Leaders of the future need to be able to adapt to a revolution in health care that will continue to emphasize “systemness” — that is, ever-increasing standardization, specialization and centralization... entirely new care systems must be developed to eliminate hundreds of millions of dollars of cost — which means that it is essential to hire and retain executives with the skills needed to lead and oversee such monumental changes.”

— Michael Rowan

CHI Strategic Plan

Next Era of Healthy Communities

STRATEGIC FOCUS



MANAGING THE TRANSITION

Maximize Clinical Operations



Assume Performance Risk



Manage Population Health

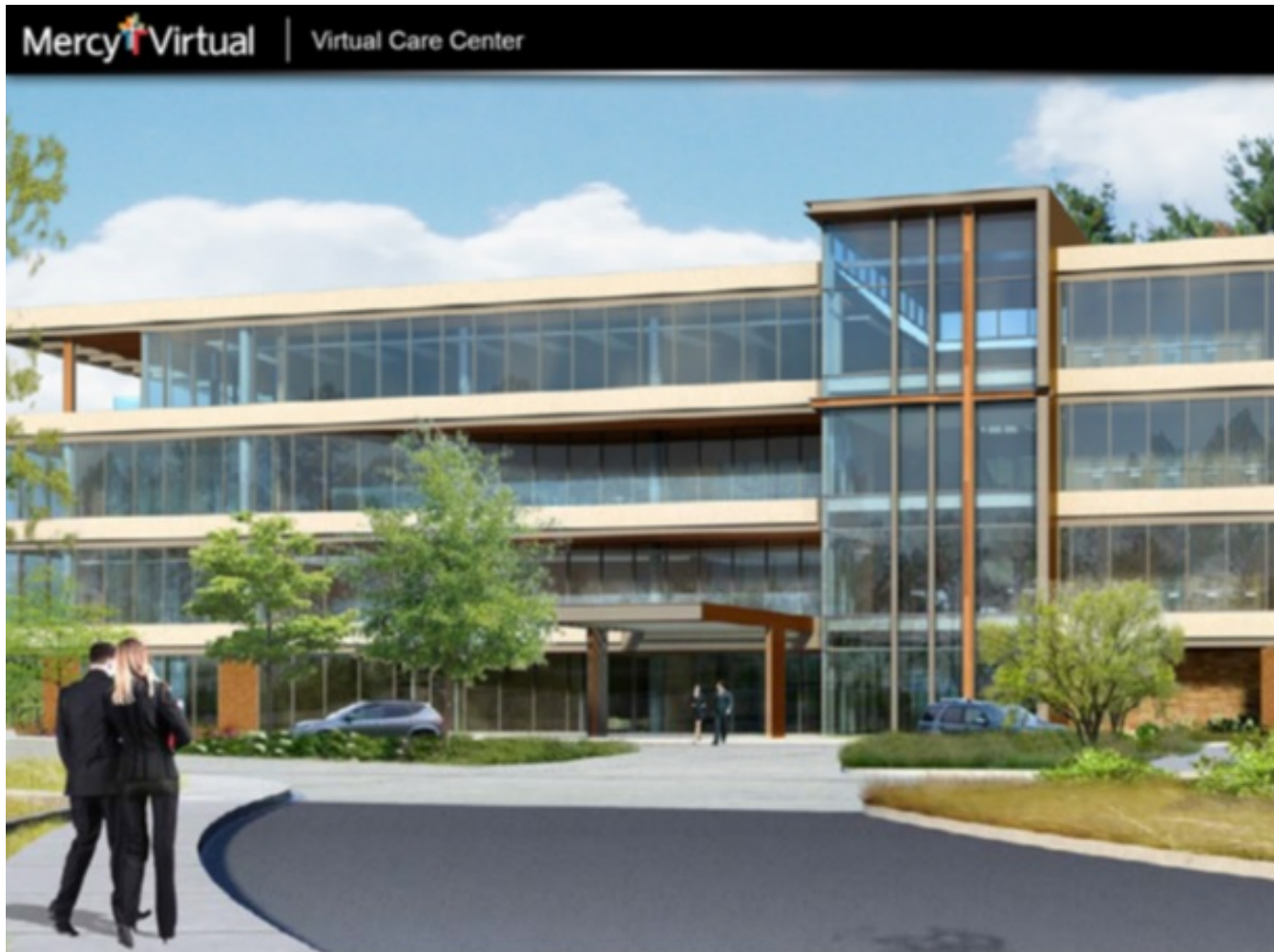
Industry Leader Emerging Solution

KAISER PERMANENTE



- Many of [Kaiser Permanente's](#) regional systems are already performing greater than 50% of visits virtually—through mobile, or secure messaging, or video
- Delivered by mix of dedicated and non-dedicated care providers

Industry Leader Emerging Solution



Industry Leader Emerging Solution

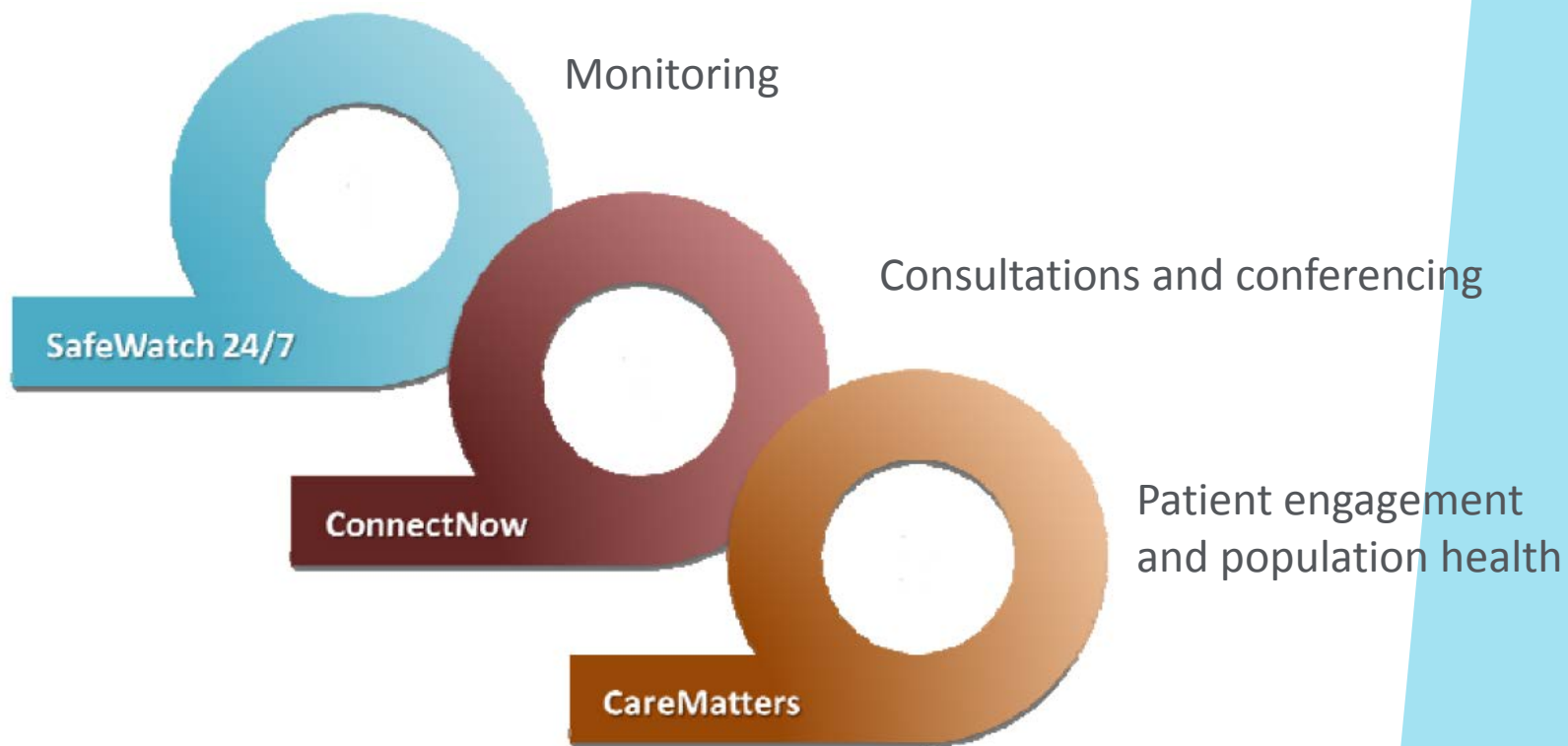


Industry Leader Emerging Solution

Centura Health At Home



Industry Leader Emerging Solution



Mercy's Circles of Care

10 Best Practices for Implementing Telemedicine in Hospitals

1. Conduct a market assessment
2. Conduct a self-assessment
3. Align goals with the organization's mission
4. Develop a timeline for implementation
5. Gain administrative support
6. Identify clinician champions
7. Train providers
8. Start simple
9. Analyze outcomes
10. Integrate services with other systems

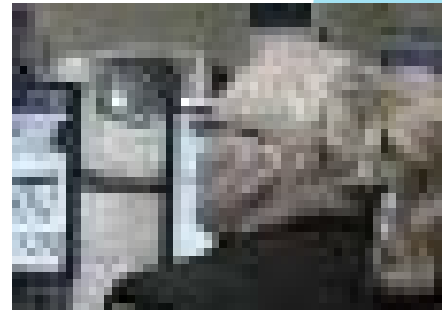
– Sabrina Rodak, Becker's Hospital Review, 2012

Virtual Health Service Development with Sequencing

	2012			2015+
MONITORING		Regional Telemetry	Virtual Companion Tele-ICU	Virtual Care Nursing Home Monitoring
CONSULTATIONS & CONFERENCING	Neurology EEG	Mental Health Psychiatry Post-Surgery Rounding	Diabetic Education Transfusion-Free Med Neonatology Cardiovascular Oncology	Outpatient specialties Pulmonology Internal Medicine Other specialties
PATIENT ENGAGEMENT & POPULATION HEALTH	Franciscan Anytime	Virtual Urgent Care CipherVoice	Chronic Disease Mgmt	Hospital at Home
ENCOUNTERS/ YEAR	300	3,000	30,000	300,000+
ROI MODELS	↓ Employee ED Visits ↓ Patient Transfers	↑ Patient Acquisition ↓ Provider Travel ↓ Readmissions	↓ Cost of Care ↑ Staffing Efficiency ↓ Morbidity & Mortality	↓ Admissions ↑ Outpatient & Ambulatory Revenue

Monitoring

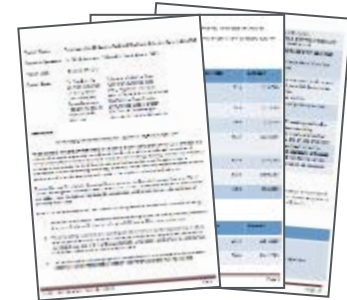
- Regional Telemetry
- Virtual Companion
- Tele-ICU
- Virtual Care Nursing (Med/Surg)
- Home Monitoring



Regional Telemetry

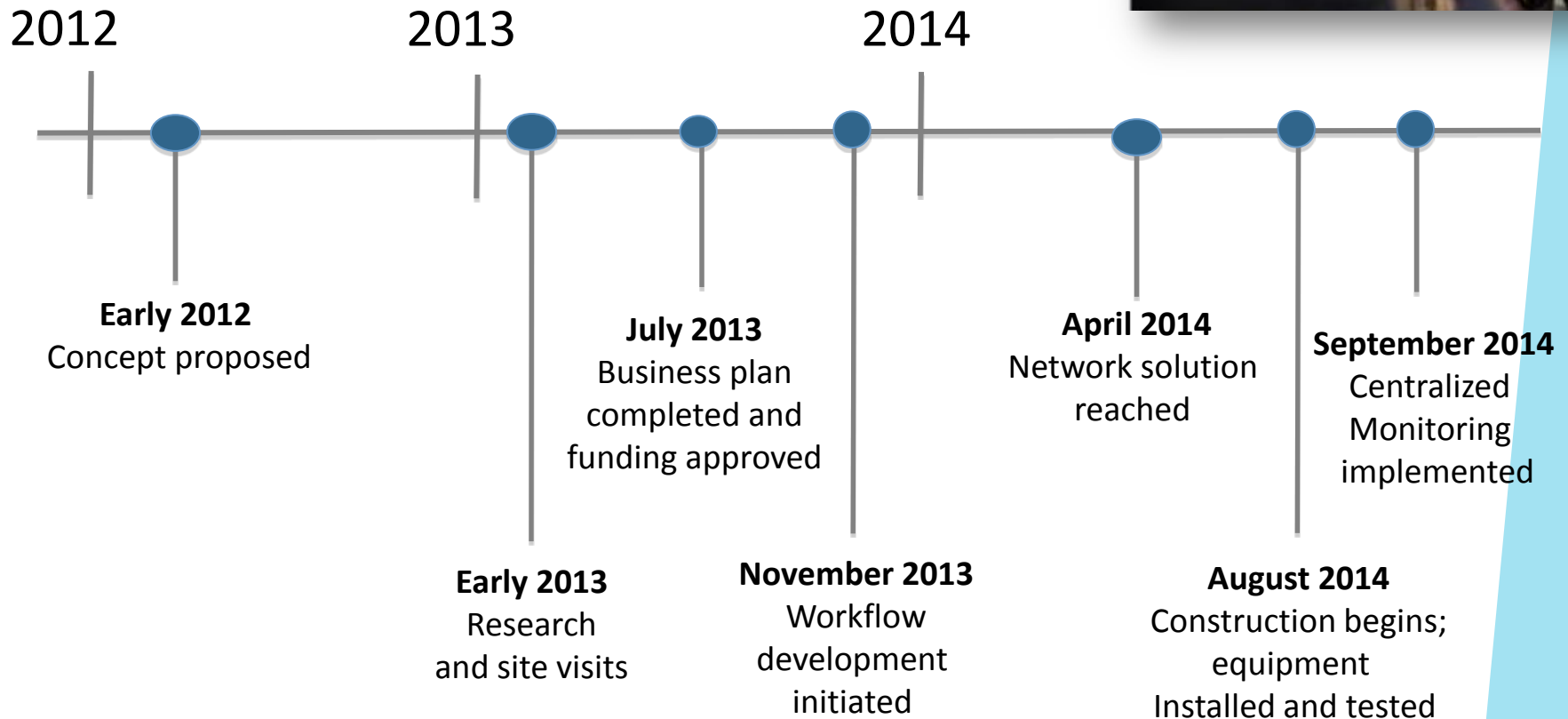
Background and opportunity

- Opportunity to consolidate and standardize telemetry practices across the system to achieve cost effectiveness and reduce variation
- With the foundational infrastructure in place, Franciscan will be able to build tele-ICU & other remote care services
- Originally projected to reduce 9.45 FTEs



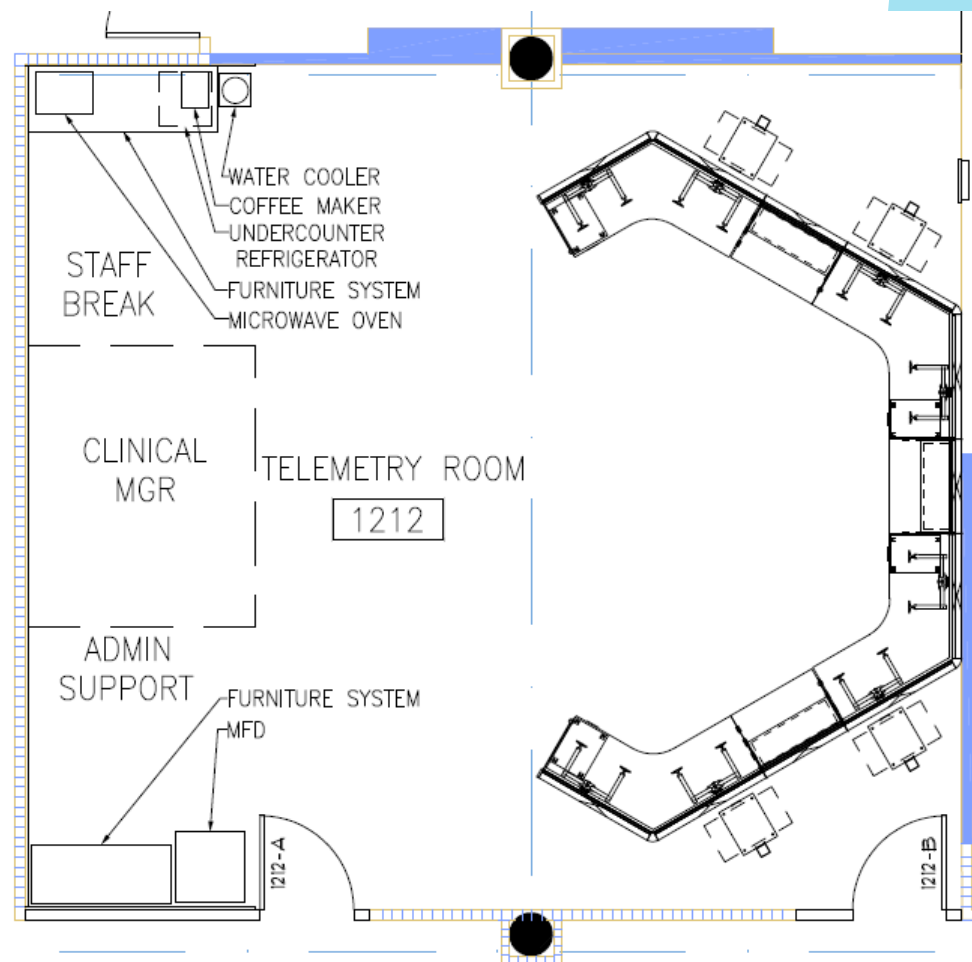
Regional Telemetry

Development Timeline



Space Considerations

Configuration Uniquely Suited to Workflow and Technology



Regional Telemetry

Results

- Reduced from **65 positions to 34**
- **Largest** Philips Telemetry Monitoring Center in the nation
- Already over **600,000 patient hours** of safe, consistent monitoring (250-290 patients per day)
- Clinical response times
- Limited downtime
- Staff feedback



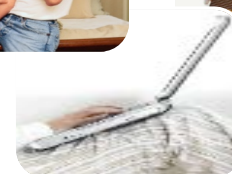
Consultations & Conferencing

- Psychiatry (inpatient & ambulatory)
 - Mental Health Assessments
 - Transfusion Free Medicine
 - Neonatology
 - Neurology (on hold)
 - Post Surgery Rounding (on hold)
 - Critical Care (in process)
-
- Clinical and Case Review Conferences (Tumor boards, CV review boards, IDTs, etc)



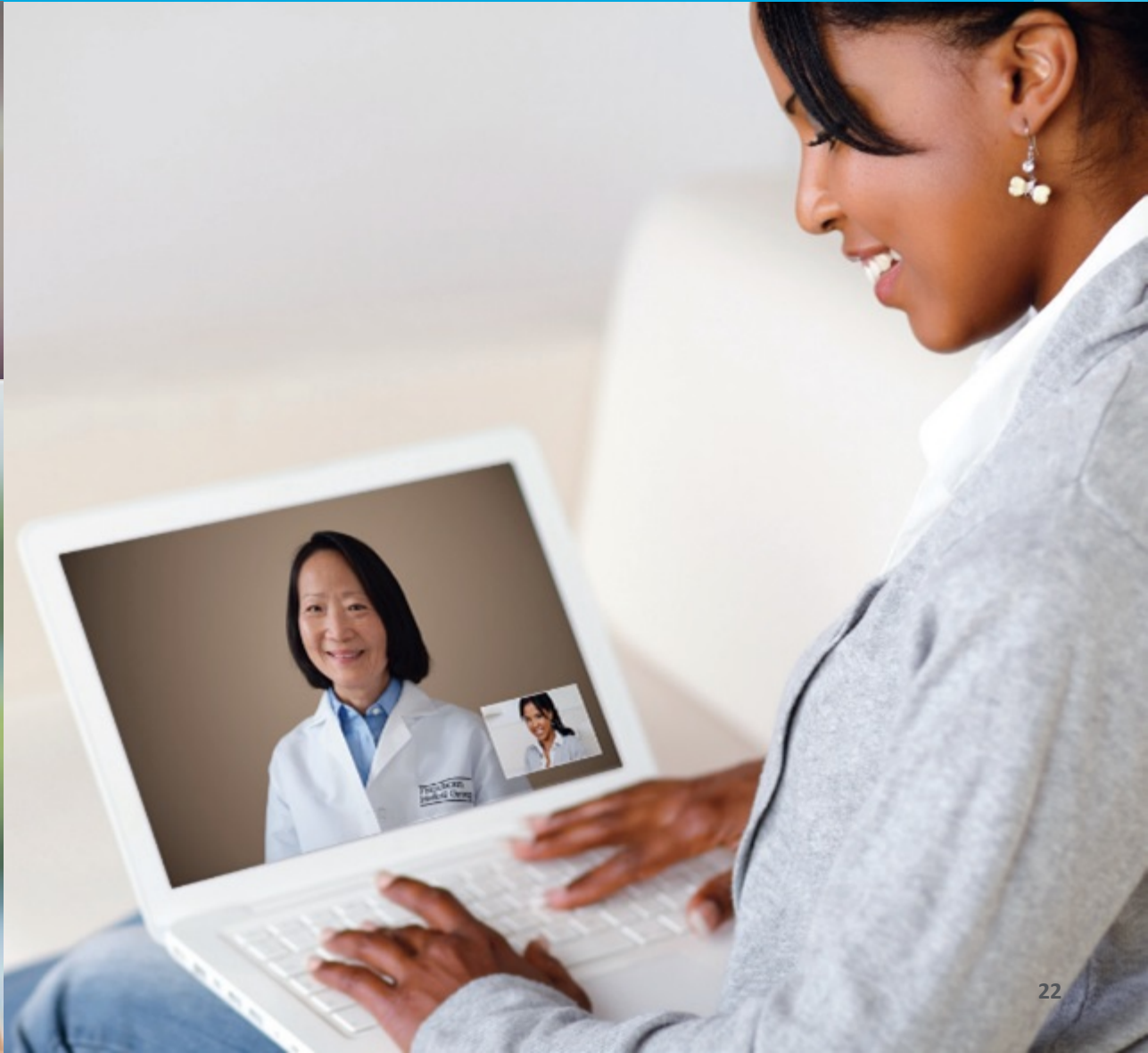
Patient Engagement & Population Health

- Franciscan Virtual Urgent Care
- CipherHealth
- Virtual Diabetes Management
- Intensive Chronic Disease Management

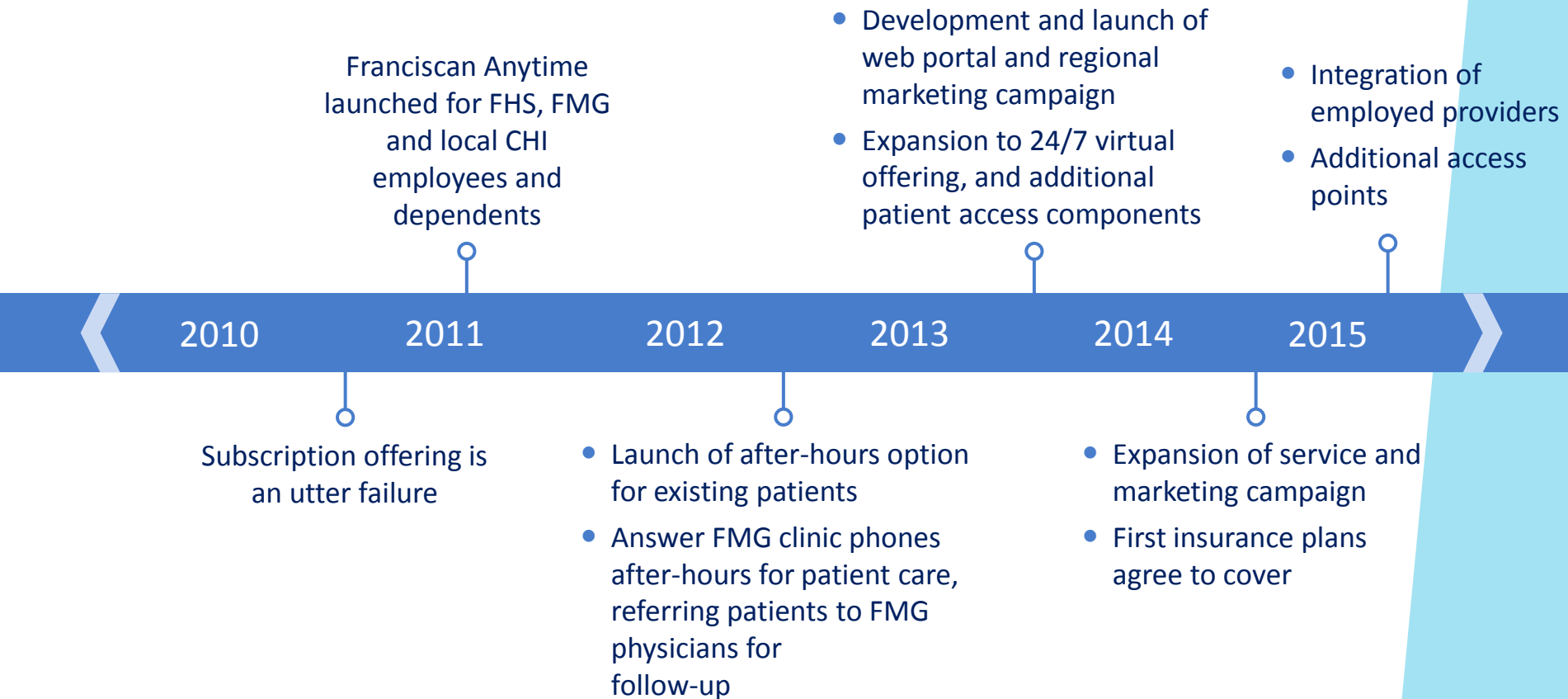


Franciscan Virtual Urgent Care

Background, overview, and how it works



Disruptive/Transformational Innovation has Unfolded Sequentially





Talk to a doc 24/7.

Put your mind at ease with Franciscan Virtual Urgent Care, right now, by phone or secure video chat from the comfort of your home.

[GET STARTED >](#)

Resources


[Find a Doctor](#)[Search by specialty](#)[Find a Clinic](#)[Search by city](#)[MyChart](#)[Log-in](#)[Classes & Events](#)[Free Health Talks](#)

Franciscan News

- > Harrison Medical Center Board Approves Single Hospital Campus
- > CHI Franciscan Health Designated as the First Northwest Accredited Heart Failure System by The Healthcare Colloquium
- > St. Joseph Medical Center Rated Tops in Nation for Cardiac Surgery
- > Lakewood Rotary Club gives \$10,000 to St. Clare Hospital

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Virtual Care!**[GET CARE NOW >](#)**Ebola precautions
at CHI Franciscan
Health**[LEARN MORE >](#)

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New Patients, New Revenue

Virtual urgent care web portal activity in first year

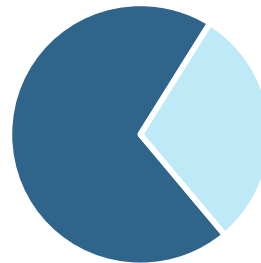
Virtual urgent care web portal activity in first year of operation

120,000

Landing Page
Visitors

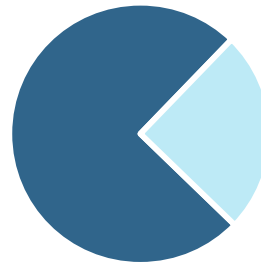
~ 5,800

Engaged
Patients



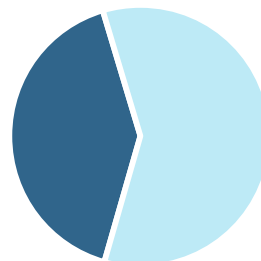
50–70%

Commercially Insured
Patients



76%

Patients Previously
Without a PCP



45%

New Patients Who
Schedule a Follow-Up
Appointment After
Virtual Urgent Care

Improving Patient Convenience & Satisfaction

Virtual urgent care patient experience

- 12 minute average provider response time
- 93% positive response for the service offering
- If not for this service...



21%

of patients
would have gone
to the ED.

52%

would have gone
to an urgent care
center

23%

would have
visited their PCP

4%

would have
done nothing

Lessons Learned

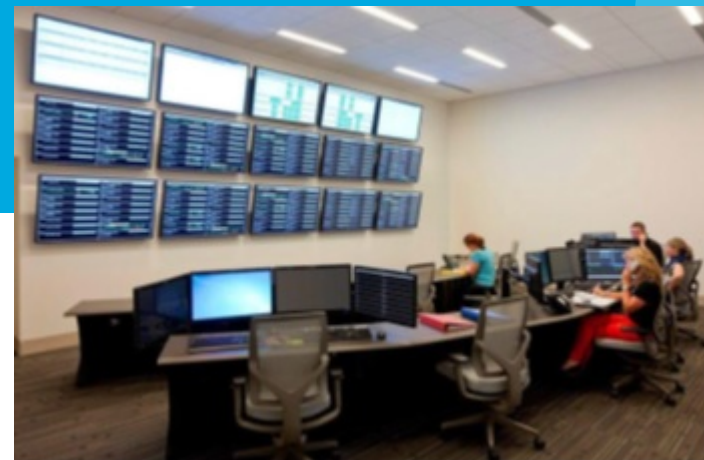
CHI Franciscan Health's Virtual Health Services

- Culture, relationships, and shared vision
- Regional delivery of care
- Evidence based practice
- Team and infrastructure development
- Incremental and multipronged approach
- Tenacity



What's Ahead

- Strengthening partnerships
 - Clinical teams
 - Support services
- Strengthening infrastructure
 - People and processes
 - Clinical Operations Center
 - Clinical tools and IT network
- Opportunities
 - Home Health
 - Patient Access
 - Care Coordination
 - Other organizations



CHI Franciscan Clinical Operations Center



CHI Franciscan Clinical Operations Center

Geographic Proximity



Radical Changes Demand New Skills

Health Progress, August 2012

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Most importantly, board members and health care executives, working together, will need to be able to tackle one of the most important and pressing generative questions of all: “What do we need to know more about as we look to the uncertainties of the future?” That’s the revolutionary question we all need to ponder.”

— Michael Rowan

Thank you