

Telemedicine: Expanding Opportunities to Deliver Emergency Care

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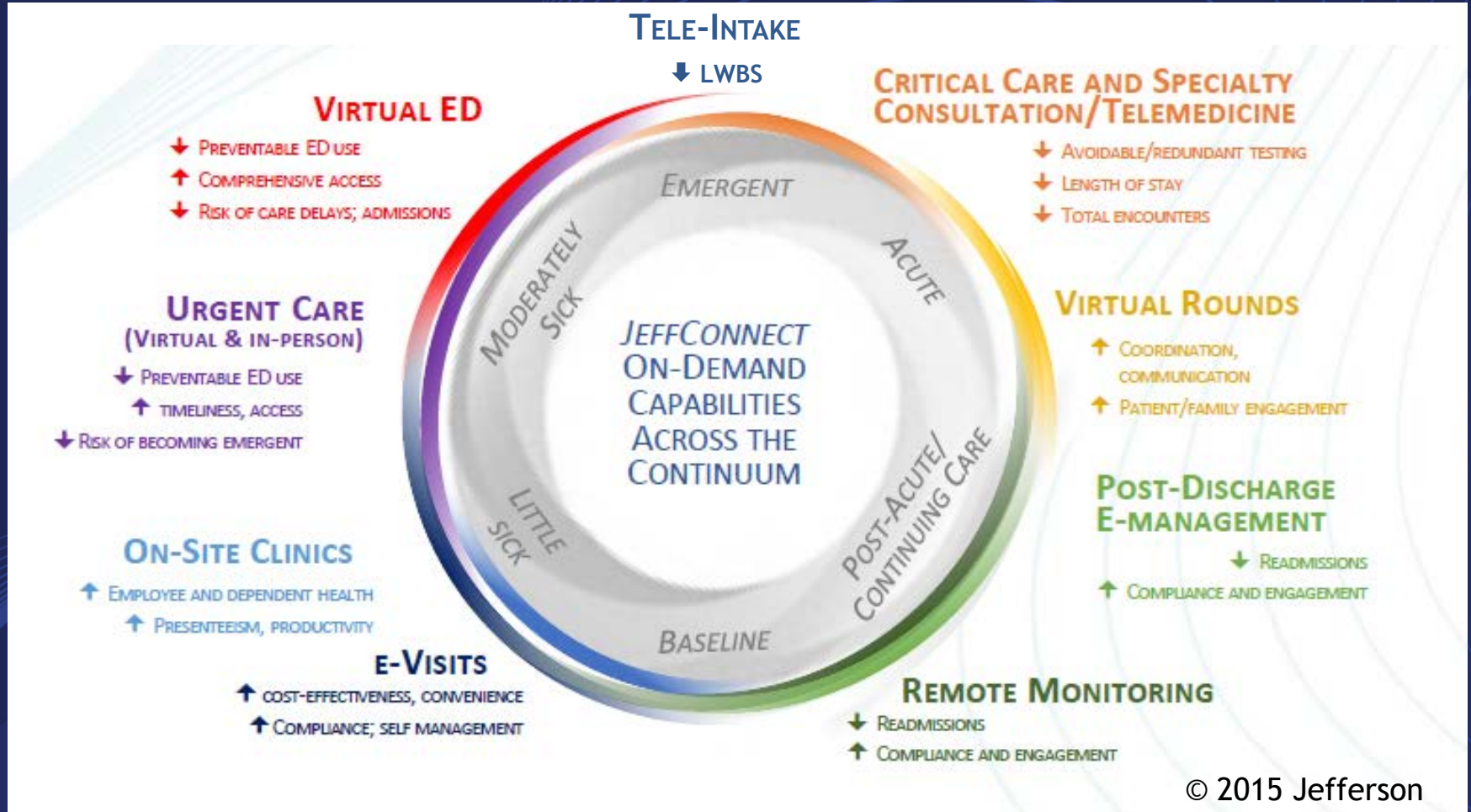
So pause and ask, what's our real value

- It is NOT just
 - We do critical care
 - We do trauma
 - We do ultrasound
- We the “availabilists”
 - 24/7/365
 - With and without insurance
 - We work when people want us
 - We work with people who want us

Telemedicine is just a care delivery model

- The medicine is the same
- Telehealth is not about the technology, but rather about the work flows and operations
- The appropriate comparator is the alternative
 - Not an in-person visit
- You *are* doing a physical exam
- You might actually get more information than in an office visit
- Actionable information is more important than diagnostic accuracy

JeffConnect



Along Came COVID



The NEW ENGLAND JOURNAL *of* MEDICINE

Perspective

Virtually Perfect? Telemedicine for Covid-19

Judd E. Hollander, M.D., and Brendan G. Carr, M.D.

Response to COVID

Forward
Triage
ED/Tents

Screening &
Testing

Interprofessional
Collaboration

On Demand
(COVID >
Non-COVID)

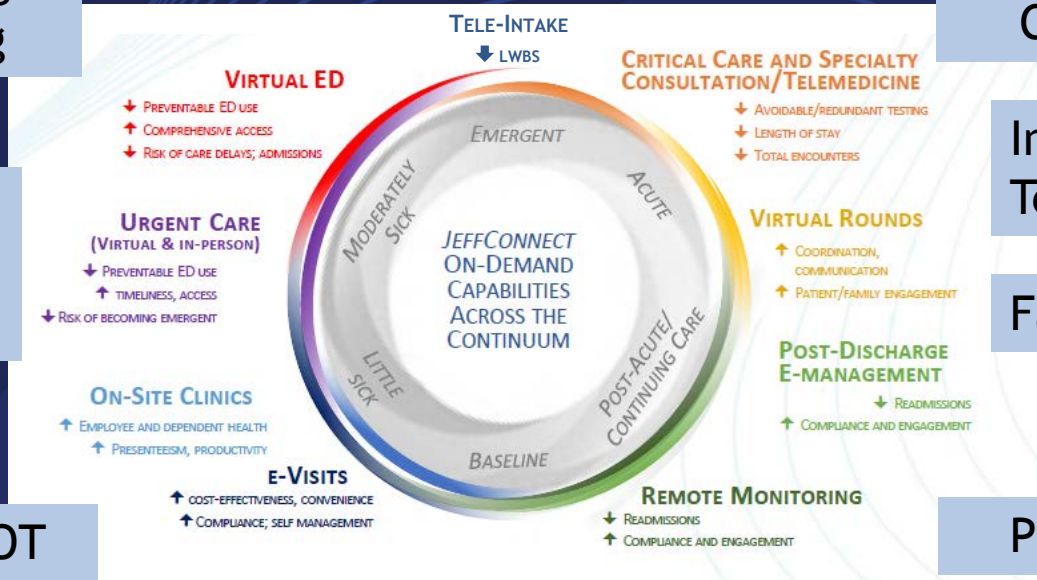
Inpatient
Telemedicine

Family Visits

CHATBOT

Pulse Ox

Scheduled Visits
(Non-COVID &
COVID)



Metrics Now Aligned with NQF Measure Framework

Creating a Framework to Support Measure Development for Telehealth

FINAL REPORT
AUGUST 31, 2017



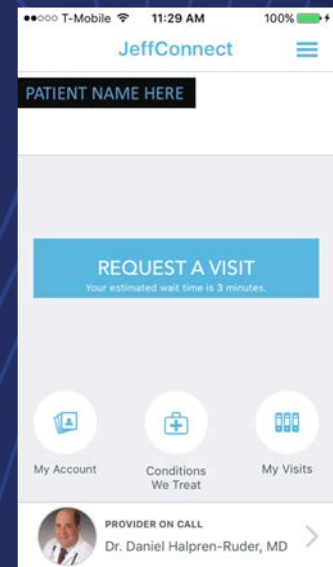
NATIONAL
QUALITY FORUM

TABLE 2. DOMAINS AND SUBDOMAINS OF THE TELEHEALTH MEASUREMENT FRAMEWORK

Domain	Subdomain(s)
Access to Care	<ul style="list-style-type: none"> • Access for patient, family, and/or caregiver • Access for care team • Access to information
Financial Impact/Cost	<ul style="list-style-type: none"> • Financial impact to patient, family, and/or caregiver • Financial impact to care team • Financial impact to health system or payer • Financial impact to society
Experience	<ul style="list-style-type: none"> • Patient, family, and/or caregiver experience • Care team member experience • Community experience
Effectiveness	<ul style="list-style-type: none"> • System effectiveness • Clinical effectiveness • Operational effectiveness • Technical effectiveness

On-Demand (Direct to Consumer) Care

- Access To Care (24/7/365 Jefferson providers)
 - 40% of visits new patients
 - 83% would have sought care elsewhere
- Financial Impact/Cost
 - Savings of approx \$100 per encounter
- Experience
 - Net Promoter Score > 70
 - Time saved over one hour = 87%
 - *Already* recommended JeffConnect = 80%
- Effectiveness
 - Antibiotic stewardship for sinusitis equal or better than ED/UC
 - Health complaint addressed as hoped > 90%
 - 74% received no further care (2/3rd sent to ED admit or procedure)



Tele-triage (ED Intake)



Tele-triage (ED Intake)

- Access To Care
 - Immediately after triage, note and orders written by physician
- Financial Impact/Cost
 - Reduced LWBS generates increased revenue
 - Providers can cover more than one hospital
- Experience
 - Patients
 - Providers
 - Executive leadership
- Effectiveness
 - Reduced LWBS
 - Improved door to provider times
 - Improved door to discharge
 - Improved door to admit times



Scheduled Appointments

- Access To Care
 - Over 1400 providers trained
 - > 400 providers regularly engaged
 - Decreased cancellation rate
- Financial impact
 - Increased visit turn over
 - Staffing efficiencies
- Experience
 - Net promoter score = 59
 - 85% reported time savings > 1 hour
 - 86% said they were better able to receive care when/where needed
 - *Already* recommended JeffConnect = 43%
- Effectiveness
 - Same level of care as inperson visit = 83%

Avatar Provider



NEJM
Catalyst | Innovations in Care Delivery

ARTICLE

The Transition from Reimagining to Recreating Health Care Is Now

Judd E. Hollander, MD, Frank D. Sites, MHA, BSN, RN

Vol. No. | April 8, 2020



Imagine this...when you feel ill

- Care initiated
 - text message
 - e-visit
 - chatbot

E-Visit

Reason Personal Info Insurance Health Issues Medications Allergies

* Indicates a required field

Please complete the following page and click **Next**. You may be asked to verify that we have accurate medical information on file for you. You will also be asked a series of questions about your health.

*What brings you in today?

Please cancel this E-Visit and contact your clinic if none of these reasons match your symptoms.

Back Pain	Cough	Diarrhea
Red Eye	Sinus Problems	Urinary Problems
Vaginal Discharge/Irritation	Headache	Fatigue
POST-OP WOUND	Hypertension	COVID-19 Concerns

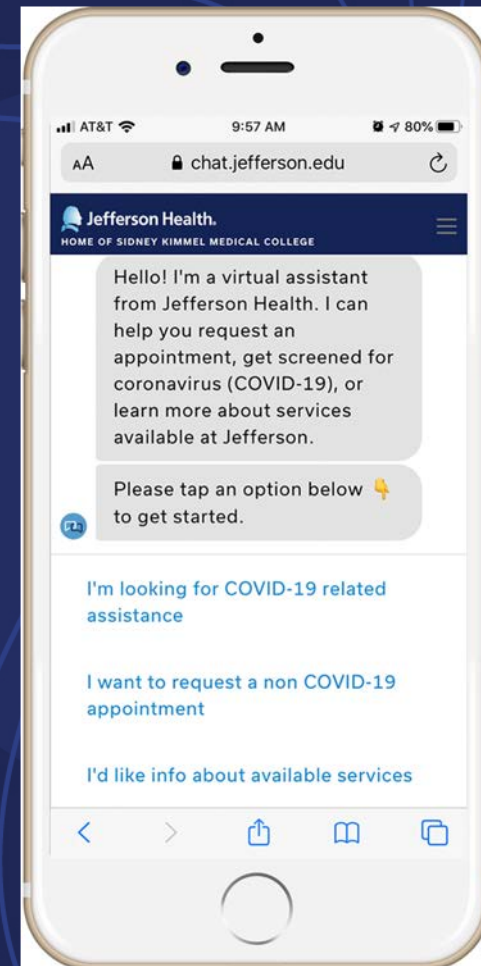
Who would you like to send this E-Visit to?

* Next Available Provider

Where would you like any prescriptions to be sent?

* Choose a pharmacy

NEXT CANCEL E-VISIT

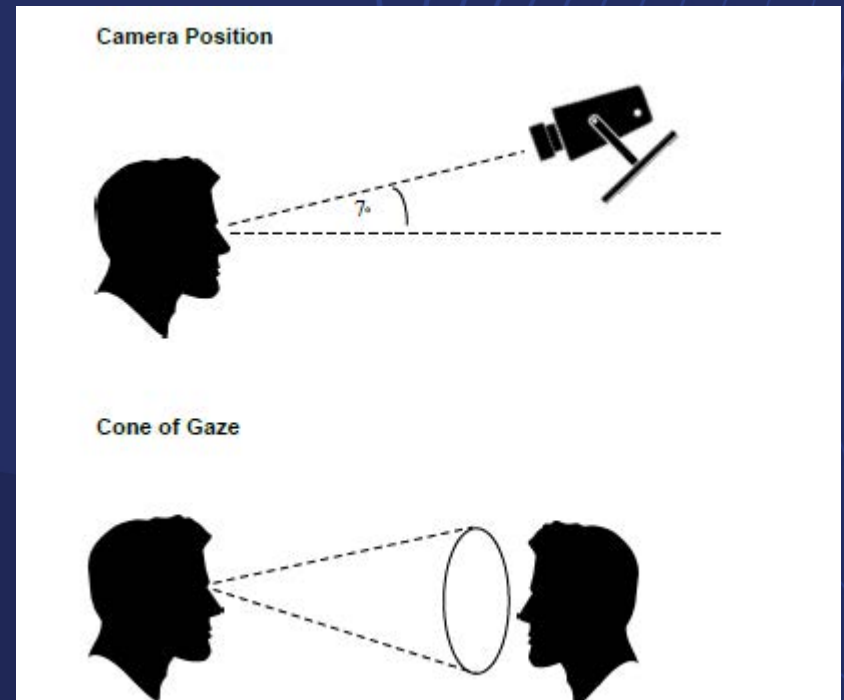


Imagine this...when you feel ill

- Resolved or maybe escalated to audio or video visit
 - The medicine is the same
 - It has always been more about the history
 - The way you see the patient is different
 - The way you get information may be slightly different

Location, location, location

- Webside manner
 - Eye contact
 - Webcam positioning
 - EHR positioning
 - Your line of site
 - Lighting
 - Illuminate your face
 - Background
 - Overall environment



Location, location, location



The Glare



Angel of Death



LED Frontal lighting



Ceiling fan

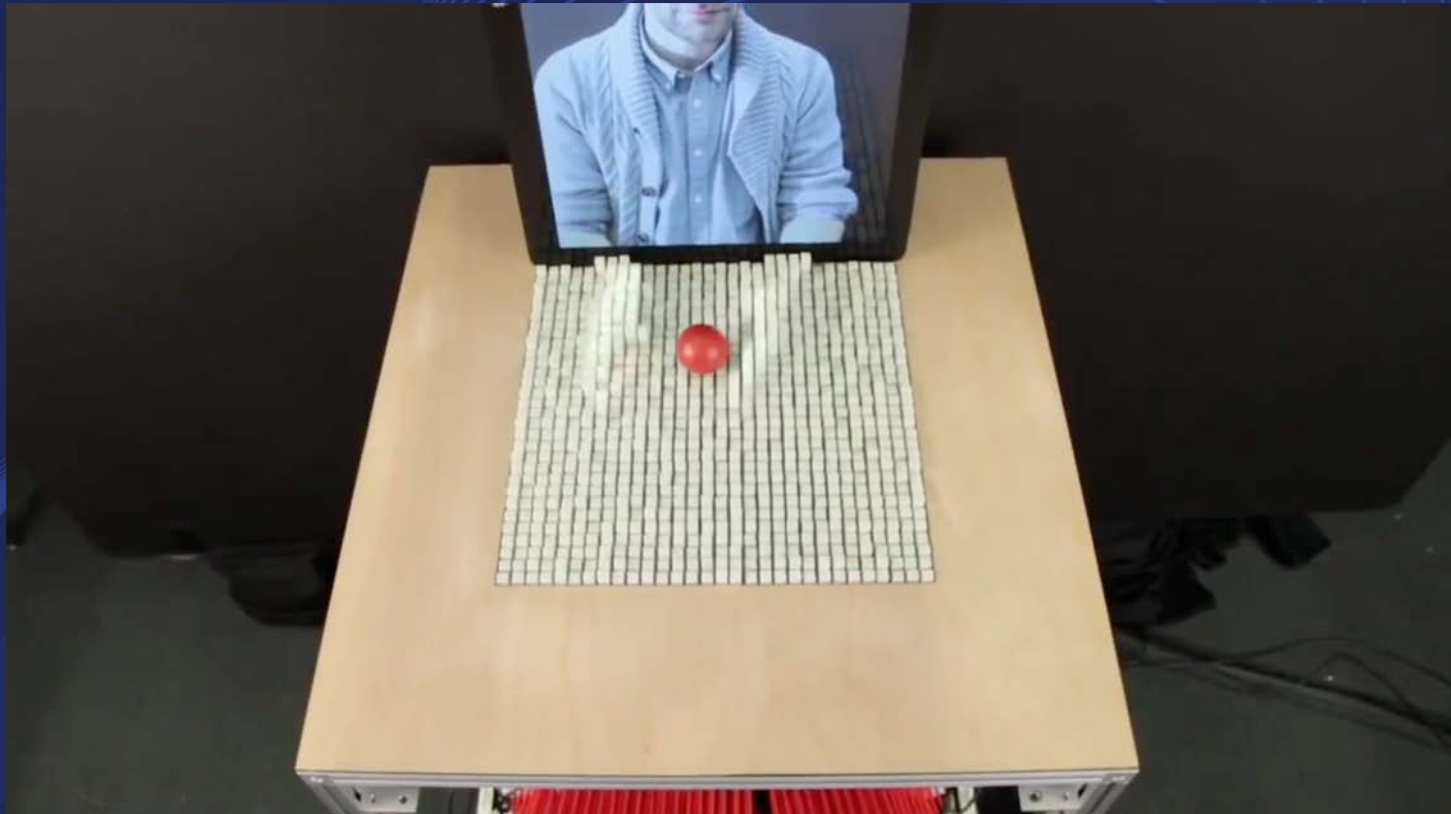


Pretty good

Re-learning the physical examination

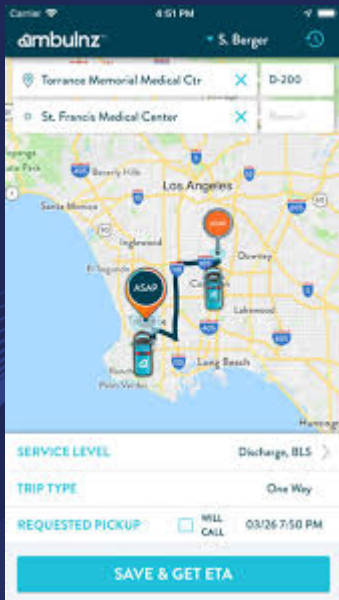


Imagine examining the patient...



Imagine this...when you feel ill

- Resolved or escalated to home care
 - Visit by paramedic
 - Visit by specialist
 - Labs/radiographs obtained out of hospital



Imagine this...when you feel ill

- Drone delivery of meds or devices



Imagine this...when you feel ill

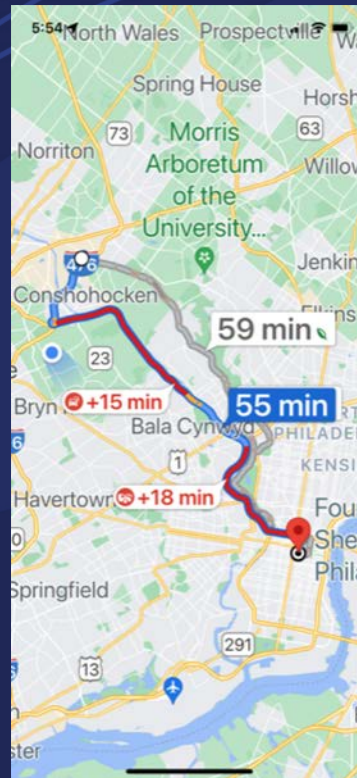
- 3-D printing of splints

3D Printed Splints & Braces: Just As Effective & Comfortable, Cheaper & Faster to Make



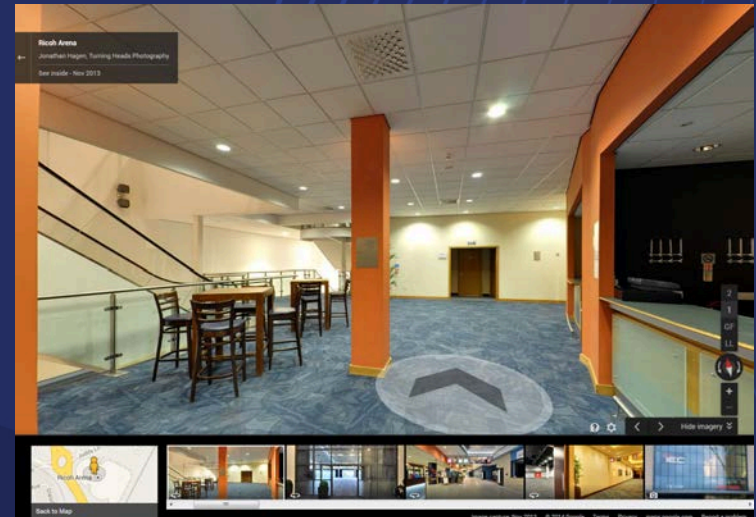
Imagine this...when you need to come to us

- Apps automatically give you directions
 - Parking lot
 - Building



Imagine this...when you need to come to us

- Facial recognition registers you on arrival
 - Contactless screening and check in
 - Office upon arrival



Imagine this...when you need to come to us

- EMR knows what digital devices you need at home
 - Blood pressure, pulse oximetry



Imagine this...when you need to come to us

- When you need to stay
 - Sometimes you do
 - Sometimes it is hospital level care at home





The Most Important Innovation is Cooperation

Telemedicine & Level Setting

- The medicine is the same
- Telehealth is not about the technology, but rather about the work flows and operations
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Why not us?

- We the “availabilists”
 - 24/7/365
 - With and without insurance
 - We work when people want us
 - We work with people who want us
- It is NOT
 - We do critical care
 - We do trauma
 - We do ultrasound
- Either we own it or someone else will

JeffConnect Training Programs

- Provider training
 - Mandatory and optional modules
- Telehealth facilitator program
- Pre-health professional fellowship programs
 - PACU Ambassador & Virtual Rounds
- Medical student elective
- Resident elective
- Fellowship programs for providers and telehealth facilitators
- CME including Physical Exam Modules
- Center for Digital Health & Data Science
- Telehealth Boot Camp
 - “Personalized” or institutionally tailored programs
- Consulting Services
- National Center for Telehealth Education and Research (NCTER)

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