Program Goals

Expand access to specialty telehealth services

Develop sustainable telehealth programs in the safety net

Understand how to expand and sustain telehealth programs

Share lessons with other safety net organizations
“Telehealth Trifecta” Team

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CCI
CENTER FOR CARE INNOVATIONS

California Health Care Foundation

CALIFORNIA TELEHEALTH RESOURCE CENTER
Today’s Agenda

1. Welcome & Icebreaker
2. Meet the Evaluators
3. Specialty Partners Table Discussions
4. Payer Panel
5. Lunch with Health Plan Partners
6. Setting Ourselves Up for Success Workshop
7. Wrap Up & Evaluation Survey
Housekeeping, Breaks, and Timing

- Restroom location
- Lunch from 12:30-1:30
- 15 minute afternoon break
- Finish by 5pm
Icebreaker Activity

Think of a challenging telehealth experience that you were able to turn into a positive experience. What did you learn from that experience?
Sustainable Models of Telehealth in the Safety Net
Overview of the Third-Party Program Evaluation

Lori Uscher-Pines and Allison Ober
CHFC has hired RAND to conduct a third-party evaluation of SMTSN. RAND is a nonprofit research organization based in Santa Monica. The evaluation team has expertise in telehealth and program evaluation.
Why conduct a third-party evaluation?

★ ★ ★ Provides independent, unbiased assessment

★ ★ ★ Increases confidence in findings and likelihood that the results will be published

★ ★ ★ ★ Ensures that lessons are disseminated so others can benefit

★ ★ ★ ★ ★ Brings in extra resources to increase likelihood of project success

★ ★ ★ ★ ★ Describes path to sustainable models, setting the stage for delivery transformation
Our logic model shows how program inputs, activities and outputs lead to program IMPACT

<table>
<thead>
<tr>
<th>Inputs</th>
<th>Activities Pursued</th>
<th>Outputs</th>
<th>SHORT-TERM IMPACT: Did the Program Make a Difference?</th>
</tr>
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| Enabling design and implementation of initiative | • Agreements with payers regarding reimbursement  
• Coordinator activities  
• Participation in learning community  
• Participation in TA and Training  
• Troubleshooting  
• Assessment of barriers and facilitators | • Consistent, predictable reimbursement  
• Trained, experienced coordinators  
• Incorporation into workflow | • Greater use of telemedicine |

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<tr>
<th>LONG-TERM IMPACT: Did the Program Make a Difference?</th>
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| • Improved health and mental health outcomes  
• Greater provider and patient satisfaction |
Our evaluation aims to answer several research questions

Q1: ACTIVITIES
- To what extent were the SMTSN elements implemented?
- Which features of the initiative contributed to impact?

Q2: CHALLENGES AND FACILITATORS
- What are the barriers/facilitators to telehealth? To SMTSN?

Q3: OUTCOME
- What was the impact of the initiative on telehealth utilization? Patient and provider experience?

Q4: ADDITIONAL COSTS
- What additional costs were incurred by the health centers to implement and maintain increased volume of telehealth?

Q5: SUSTAINABILITY
- How can the initiative be sustained in health centers?

Q6: LESSONS LEARNED
- What lessons were learned from the initiative?
- What are the implications for replication and scale-up?
Our evaluation design consists of qualitative and quantitative data collection.

**Qualitative**

Examines **INPUTS, ACTIVITIES** and some **OUTPUTS**
- Site visits to talk with staff about and observe workflow
- Face-to-face and/or phone interviews to discuss barriers and facilitators

**Quantitative**

Measures **OUTPUTS** and **IMPACT**
- Administrative data to assess impact on utilization
- Provider surveys to assess attitudes, satisfaction, and practices
- Cost and revenue data to assess costs of expanding telehealth use
- Patient experience data (e.g., wait times)

**RICH DATA OBTAINED THROUGH DISCUSSION AND OBSERVATION**

**NUMERIC DATA OBTAINED FROM EMR AND OTHER SOURCES**
Data will be collected from several sources:

- Monthly telehealth use data (pre and post)
- Health center provider survey data
- Site visit and telephone interview data
- Evaluation-specific requests for info in annual reporting
- Cost and revenue data
How can partners contribute to the evaluation?

Help us obtain quantitative data
• Data on telehealth use pre-2018
• Wait times, no show rates, patient characteristics
• Cost and revenue data

Help us obtain names and contact information for surveys

Participate in surveys

Participate in site visits and interviews
EVALUATION TIMELINE

May 2018
Final research and implementation plans

Jun–Sept 2018
Interviews (Round 1)

July 2018
Provider survey 1

Ongoing 2019
Reporting to TA team

Sept 2019
Quantitative analysis

Sept–Dec 2019
Site visits/interviews (Round 2)

Mar 2020
Final report and issue briefs
EVALUATION TIMELINE: COORDINATORS

May
Final research and implementation plans

July
Provider survey 1

Ongoing
Reporting to TA team

Sept
Quantitative analysis

Mar
Final report and issue briefs

2018

Jun–Sept
Interviews (Round 1)

2019

July
Provider survey 2

Sept–Dec
Site visits/interviews (Round 2)

2020
EVALUATION TIMELINE: HEALTH PLANS

May
- Final research and implementation plans

June–September
- Interviews (Round 1)

July
- Provider survey 1

Ongoing
- Reporting to TA team

September
- Quantitative analysis

September–December
- Site visits/interviews (Round 2)

March
- Final report and issue briefs
There are some additional data that would enhance the evaluation

Is it feasible for us to collect this information?

Patient satisfaction data

• Do you have existing surveys we might be able to leverage?

• Is it feasible to initiate a new survey for patients?

• Can we work with you to conduct patient focus groups during site visits?

Health plan claims data

• Additional outcomes to consider (e.g., medication adherence, ED utilization, hospitalizations)?

• Wait times to see a specialist in-person

• Data to create a control group so we can compare program sites with sites that did not participate in the program?
How will RAND reduce burden on the sites?

Interviews
• Offer site visits OR phone interviews
• Leverage staff meetings; host walk-in breakfast meetings
• Offer interview times outside of business hours
• Conduct interviews at in-person grantee meetings

Surveys
• Short, web-based surveys administered by RAND
  – We will only ask for your help obtaining email addresses and phone numbers

Data collection
• Leverage reporting data already collected by CCI and CTRC to avoid duplication

In what other ways can we reduce burden?
We want to hear from you!

- Are there additional questions we should be asking to help you in your work?
- Have we missed any critical data sources?
- What are your thoughts about the design?
- Ideas to reduce burden?
Next Steps

In the next 2-4 weeks we will be in touch to:

• Obtain names and contact information for potential referring providers
• Schedule phone interviews with telehealth coordinators and health plans
Questions about the evaluation?

Lori Uscher-Pines
lusherp@rand.org
413-1100 x5167
Monthly telehealth use data

Quantitative analysis of the monthly telehealth use data submitted to the TA team

- Request for pre-initiative data (6 months prior to initiative implementation)
- Use of same template if possible
Costs and Revenue Data

Reporting by health centers and health plans
• Distribution of a costs worksheet with instructions several weeks prior to July 2019 site visits
• Cost-specific interviews at site visits to clarify worksheet and facilitate interpretation
• Analysis of health plan data (if available)
• Additional details coming soon (planned by health economist)
Health Center Provider Surveys

- 2 web-based surveys in July 2018 and July 2019 will enable us to track changes over time
- All providers that could refer to telehealth (both currently referring and not currently referring providers) will be invited
- Incentives provided
- Request for name and contact info in June 2018 and June 2019. No further action required of coordinators
Site Visit and Telephone Interview Data

Semi-structured interviews via phone in summer 2018 and in-person interviews at site visits in summer 2019

• One-on-one interviews scheduled in advance
• Cover implementation of initiative, perceptions of initiative, barriers, lessons learned
• Site visits will involve additional staff (e.g., providers, leadership, staff knowledgeable about costs)
Evaluation-Specific Requests for Info in Annual Reporting

Two annual reports required by TA team
  • Inclusion of evaluation module (same module for both reports) covering the prior six months
  • Report template sent in advance
    • EMR data pulls: wait times, no show rates, % of eligible providers referring, % of patients with telehealth visits, representativeness of patients with telehealth visit, patient refusals
  • Implementation log: activities pursued as coordinator and % of time spent
Specialty Partners Table Discussions
Specialty Partner Table Discussions

Who’s here and Where will they be?

UC Berkeley
Clinicians Telemed
Iris Telehealth
DirectDerm
TeleMed2U
Specialty Partner Table Discussions

What’s the game plan?

Chose and Rotate!

• Choose three service provider partners you currently use the most
• Rotate from one to the other in 15 minute intervals
• Maximum attendance: 10 people per partner group per session (split up)
  • Move fast! Last in, First out!

Provide & Receive Feedback

Goal: Strengthen Existing Partnerships

• From clinic partner perspective, share what’s working and what’s not. Provide examples and suggestions for improvement
• From specialty partner perspective, share what’s working and what’s not and provide suggestions for improvement, including refresher training
Specialty Partner Table Discussions

Let’s do this!

Facilitators will be in each room to keep time and document best practices which will be shared with the group at a later date.
Payer Panel

California Health & Wellness

Inland Empire Health Plan

Partnership HealthPlan of California
Setting Ourselves Up for Success: Using an Improvement Mindset in Telehealth

Hunter Gatewood, LCSW, Improvement Advisor, Signal Key Consulting
What’s Next?

- Telehealth Coordinator Training
- Workflow Mapping
- Telehealth Success Videos
- Progress Report
- August Webinar
- Fall In-Person Workshop
Sustainable Models of Telehealth in the Safety Net
Training Request Form

As a participant in the Sustainable Models of Telehealth in the Safety Net program, you have free access to training and assistance provided by the California Telehealth Resource Center (CTRC) and its partner affiliates, Telemedicine.com and OCHIN. Our goal is to help you to increase the utilization of telehealth services at your sites.

Training can be provided via telephone, webinar, video connection or on-site, whichever is most appropriate for the situation. Training can be provided for clinical, technical, and administrative staff as well as telehealth coordinators seeking assistance, refresher training, or training for new coordinator staff.

When requesting assistance please provide the following information about your organization and its needs:

Organization Name: ____________________________________________

Site Location (If more than one, please list all): ____________________________________________

Contact Person Information: Name: __________________________ Title: __________________________

Email: __________________________ Phone: __________________________

Training assistance needed (please check all that apply)

_____ Equipment and Peripheral Utilization

_____ Network, Equipment and Peripheral Troubleshooting

_____ Patient Presentation Techniques

_____ Process Flow

_____ Staff Roles

_____ Data Reporting

_____ Best Practices for Patient and Provider Buy-in

_____ Billing

_____ Program Marketing

_____ Policy and Procedure Development

_____ Other (please provide details below)


Who will be attending the training? Please list all anticipated staff members and their titles within the organization:

Name: __________________________ Title: __________________________

Name: __________________________ Title: __________________________

Name: __________________________ Title: __________________________

Please return this form with the requested information to Jeanne Russell russell@ochin.org

For any questions regarding this form or to request additional information on telehealth training please contact Jeanne Russell at russell@ochin.org or by phone at 530 774-7570
Webinar Topic Option 1: Policies and Procedures for Telehealth

Every clinic has some sort of a Policies and Procedures (P&P) manual to standardize daily operations and assist with new employee orientation. Some clinics have developed policies and procedures for telehealth while others are struggling to determine the critical elements necessary for inclusion.

For this webinar, we would like the programs that have established P&Ps to share with the group so that we can begin the process of developing a template for other sites to follow when developing new or enhancing existing telehealth P&Ps.
Webinar Topic Option 2: Sharing Changes and Progress Toward Program Goals

Today, each team set goals and started identifying activities to reach their goals.

For this webinar, sites will share what methods they have deployed to increase utilization volume, the impact of those changes, and lessons learned.
Webinar Topic Option 3: Contracting with Specialists

Contracts for specialty services vary with each specialist and with each clinic site. In this Wild West of telehealth service contracting, the best contracts are the ones that are negotiated to fit the needs of the referring clinic.

For this webinar, we will invite members of the learning community to share best practice in contracting with specialists – what to look out for, what to include in your negotiation, and how to get the most out of your relationship with the service provider. We will ask the sites to share the types of contracts they currently have, and the pros and cons of each.
August Webinar Topic Vote

Use your green and yellow dots to indicate your first and second choice webinar topics.
WELCOME, TELEHEALTH TEAMS!

This website is a support center for the use of Sustainable Models of Telehealth in the Safety Net participants. Program updates, report due dates, resources, newsletters and more will be posted to this website. This website is managed by Center for Care Innovations.

For more information about Sustainable Models of Telehealth in the Safety Net, please visit the program page.

www.careinnovations.org/telehealth-portal/
Thank you!

*Please fill out the evaluation form*