



Edition #16
March 20th



REMOTE CARE
INTEL ©



Introductory
Note

Welcome to the 16th edition of RCI, and no this edition will not just be about COVID-19, which has been hogging all headlines. We have been preoccupied with on-boarding clients as there is more interest in telehealth than ever before. So much so that we had to postpone the release of this edition by 4 days. The link between natural and infectious calamities and telehealth goes a long way back. Whenever a crisis appears, telehealth and remote patient monitoring in more recent times, comes forward as potential solutions. It isn't anything that we haven't seen before. So the COVID-19 hysteria aside, there have been other things happening in remote care and we'll cover it in this edition. But given the situation, two out of the four items are about COVID-19. So do self-isolate and practice social distancing, (especially if you are reading this from a badly affected area) and enjoy this edition of Remote Care Intel. First-time readers, you are welcome to check out all [prior versions](#) of the RCI. Regular readers [skip](#) to this edition's overview. It is great to have you all on board!



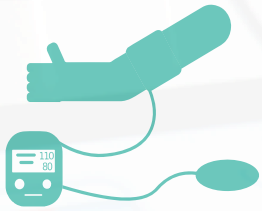
Purpose

After the word telehealth entered mainstream lexicon, most hospitals offer services remotely in some shape or form. But its implementation is taking many twists and turns, that is dependent not just on a hospital's internal situation, but a host of external factors as well from the legal and technological landscape. Remote Care Intel (RCI) is a bi-monthly news report on everything remote care that keeps you updated on what's happening in the industry on matters of digital care. It includes coverage of all components of remote care management such as patient engagement, care coordination, HIPPA compliant messaging, documentation and execution of clinical workflows, patient monitoring, chronic care management, and everything else that gets added to the mix.



WHO SHOULD READ THIS?

We think all stakeholders in healthcare who are eyeing remote care closely would stand to benefit from such aggregated knowledge. Particularly those inside a provider organization may find it especially helpful due to the time efficiency it offers. In an industry as dynamic as healthcare, it is crucial to be briefed on the latest intel. RCI brings it all together in one place. The following positions below will find RCI's content right up in their wheelhouse.



Responsible for implementing remote care on the ground. Have direct contact with patients, and thus are in the best position to evaluate what is working and what is not.

- RN, Telehealth
- RN, Chronic Care Management
- Advisor, Complex Chronic Care
- Telehealth Coordinator
- Outpatient Therapist
- Chronic Care Coordinator



Responsible for overseeing the deployment of remote care. Have to run the program, and thus are in the best position to understand the various factors that help or hinder the program's execution.

- Primary Care Transformation Manager
- RN, Care Manager
- Director Telehealth
- Director of Care Coordination
- Patient Care Manager
- RN, Case Manager



Accountable for remote care in their organizations. Have a bird's eye view of the successful piloting, monitoring and updating of remote care delivery, and thus are in the best position to formulate strategy.

- Chief Patient Engagement Officer
- Chief Executive Officer
- Chief Medical Officer
- Chief Innovation Officer
- Chief Medical Information Officer
- Chief Nursing Informatics Officer

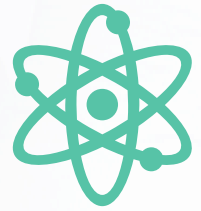
Overview

aTouchAway™
by Aetonix

March 1st to 15th

Innovation Centric

Telehealth reimbursement is greatly expanded under the under the 1135 waiver authority and Coronavirus Preparedness and Response Supplemental Appropriations Act.



Spartanburg Regional Hospital looks to bolster their exiting RPM program with audio-visual capabilities.

Provider Centric

Environment Centric

JAMA finds that patients with smartphones transmit data for a longer period of time compared to just using wearables.



Orion Health is adding AI capability to its remote screening for COVID-19 cases.

Vendor Centric

March 1st to 15th

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6th

Often in the innovation category, we talk about new products or features in the remote care space. But looking at it from a different perspective, it can apply to novel legislation as well which can completely change the landscape for remote care. Such was the case in this emergency, as the new [\\$8.3 billion](#) Corona Virus funding bill allows reimbursement to all Medicare beneficiaries, irrespective of where they are situated. We cover the changes [in more detail](#) on our website.



RCI Takeaway: *Such a move is unprecedented because normally there is a whole host of rules when it comes to payment parity for telehealth, and other requirements such as prior patient relationship and patient consent. With this decree, the floodgates for telecare should open, initially just to manage the potential and confirmed COVID-19 cases, but perhaps to manage other conditions as well once we are in the post COVID-19 era. The requirements for telehealth will be reinstated by then, but there would have been a great culture shift where a large group of people would have been habituated to receiving care remotely, from the privacy of their own homes.*

Spartanburg Regional Hospital had developed the [Discovery Health](#) remote patient monitoring program all the way back in 2007 with a grant from the Spartanburg Regional Foundation. As of today, all patients receive a scale, a blood pressure cuff and an oxygen monitor to track their vital signs daily. This information is transmitted via Bluetooth to the platform where a nurse can assess the case to see if an intervention is required. Glucose meters will soon be added to the system for diabetes management programs. Video conferencing capabilities will be added as well to enable wound care management.

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10th



RCI Takeaway: *Spartanburg Regional Hospital was ahead of its time in deploying such a remote patient monitoring program. It's quite a surprise that they did not have a video conferencing feature already in place. But it's also understandable, because you actually do not need video to remotely track vital signs of the patients. Video conferencing or virtual calling is more commonly associated with telehealth, but as most RPM companies have this as a basic feature, the two services of RPM and telehealth are used interchangeably. But to see incision sites or assess rashes or other things of that nature, video or store and forward image capability is a must. So in addition to starting a diabetes program, Spartanburg Regional Hospital must also be looking at conditions the symptoms of which require visuals.*

MAR
12th

The Journal of American Medical Association (JAMA) found in one of its studies that after hospital discharge, patients with smartphones transmitted data for [32%](#) longer than patients with wearables. 30 days after discharge, there was a 5%-point difference between the two groups of patients, which widened to 10%-point difference after 90 days, and finally a significant 14% difference after 180 days. The study analyzed remote patient monitoring activity for 500 patients enrolled in Medicaid from January 2017 to January 2019. It found that 69.4% of patients transmitted data among the smartphone group compared to 58.9 percent for patients in wearables.



RCI Takeaway: *This is a very interesting study because eventually one modality will win the majority of the market share, either smartphones or wearables. The way things are developing, people are either gravitating towards using their smartphones as it is so convenient and ubiquitous, or they prefer the wearables as you do not have the hassle of connecting measurement devices to your phone or tablet. But there is the strong likelihood, that both modalities will be retained. MHealth, or the use of mobile phones to conduct virtual care, is used by nearly three quarters of hospitals. On the other hand, wearables continue to get better in terms of simplicity and user experience. We must put ourselves in the patient's shoes. The mobile phone will allow us to communicate with healthcare professionals, so it isn't going away anytime soon. But either legacy device makers or innovative wearables will accompany smartphones to complete the total remote patient monitoring package.*

Orion Health like many other RPM vendors have introduced a COVID-19 monitoring platform whereby physicians can keep in touch with quarantined patients. It offers a regionally configurable online symptom checker and [uses AI](#) to understand the risk of each patient and the spread of COVID-19.

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RCI Takeaway: *This is very standard news at this time, many vendors are doing something similar including ourselves. To see an early list of all such vendors who have created a distinguishable product for the purpose of screening patients, see our post on the [healthcare industry response](#) to COVID-19. RPM solutions are doing what they can, to facilitate the virtual screening process for COVID-19. Both public and private insurers have also come forth to lift most restrictions regarding telehealth reimbursements in this state of emergency.*



COVID-19 has put a damp on all remote care excitement, as everyone is too busy with telehealth. But one must remind themselves, that all good RPM companies come with core telehealth features such as two way or even multiple way video calling. In a strange reversal of order, some organizations like Spartanburg already had RPM, but are getting introduced to telehealth at the moment. But for the majority of the hospital cases, it's the other way around where they never even considered RPM, but are just dipping their toes into the world of virtual care via telehealth because of COVID-19. Everyone is helping, whether it be Medicare or private insurances with their telehealth reimbursement or companies like Orion Health, one of many RPM solutions to offer a remote screening solution. The technology surrounding RPM is becoming more commonplace day by day, whether it be the smartphones or wearable devices, though people tend to transmit more data using smartphones as JAMA found in a study.

What's Next?

The next RCI will be released on April 1st, Wednesday. It will recap the latter half of March. More COVID-19 news will follow, but we will try to find other news items as well, just as we did with this one. If you are a subscriber, rest assured, it will be delivered to your inbox. But to be doubly sure, please make sure you [opt in](#).

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