

Introductory Note Welcome to the 9th edition of Remote Care Intel (RCI). We continue with our theme of dividing up news stories into the four categories of Environment, Innovation, Project and Vendor/Provider. After some prior experimentation, we have found these four categories to best reflect of the type of updates one hears in the remote care space. We intend to stick to this format indefinitely. First-time readers, you are welcome to check out all prior versions of the RCI. Regular readers skip to this edition's overview.

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-weekly 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. The information presented on RCI is best suited for those who want to stay up to date with the latest insight on remote care. Unlike our other content, it is not published on our website but distributed to individuals who are in a position to affect patient care management using telehealth. The distribution channels are exclusively email and relevant social media. We hope that readers find the content useful in discerning the ins and outs of remote care, figure out to make it work for them, and stay one step ahead in cognizing its future development.





WHO SHOULD READ THIS?

We think all stakeholders in healthcare who are eying 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.



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.



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.

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

Primary Care Transformation Manager

RN, Care Manager

Director Telehealth

Director of Care Coordination

Patient Care Manager

RN, Case Manager

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

Overview



November 9th to November 22nd

Environment Centric

The market for wearables has seen massive growth, which opens doors for multiple care opportunities.





Ascension Health System has plans of expanding Ascension Connect, which operates around 2000 remote patient kits currently.

Vendor/Provider Centric

Innovation Centric

More Al solutions pop up, with no clear differentiation from one another.





Walmart lowers price for its employee telehealth offering, but increases services, in its partnership with UnitedHealth.

Project Centric

TIMELINE FOR THIS EDITION TOUCH AWAY

November 9th to November 22nd

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Joshua Claman, CEO of Rimidi, writes on the reasons for RPM's success on Inside Digital Health. The highlights of the article are that 178 million adults own a wearable device in USA, a 350% jump from just 3 years ago, thus making the market riper for RPM adoption. It also says how studies have shown reduced mortality for those on wireless home monitoring than those without it, thus adding to RPM's clinical credibility. He finishes the article stating what health systems should consider when making a decision. Namely: Support for Multiple Diseases, Continuous Feedback Loop, EHR Integration and Embedded clinical decisionmaking support.



RCI Takeaway: Rimidi manages several chronic diseases like Aetonix does, so it makes sense to hammer home the point about having clinical expertise in creating specific workflows for specific chronic conditions. It is the one differentiator that stands out the most, the rest are user experience related and have become commonplace offerings amongst vendors. From the consumer's point of view, we are reminded once again how greater cultural acceptance of wearables have pushed the door wide open for managing patient data remotely.

Ascension Health System operates a centralized call center and virtualized care, which it calls Ascension Connect. It is very similar to how some other health systems have set up centralized virtual centers, where all patients are monitored from one command base, and appropriate actions are taken depending on real time information coming in from the patient. To enable this collection of patient vital signs, Ascension works with Vivify Health, who were recently purchased by UnitedHealth. Mark Steiger, Director of Operations Ascension Connect, gave an interview where he described how the operations worked. Main takeaways are that they make the tablets cellular enabled, to which patient data is uploaded from devices and then transmitted over to the clinicians. 8 nurses have deployed 2000 kits in total, each kit consisting of the tablet fitted with the software and vital signs measuring devices.



RCI Takeaway: Ascension Health System is USA's largest non-profit health system, and so it is important to know how they operate, as they look forward to scaling up the current program. Shipping or handing over the kits to patients is a very common business model used by most RPM companies. What's interesting is Ascension Connect has full time staff dedicated to managing this project, who educate the patients on the procedures of using the tablet, and also set up virtual appointments for them with nutritionists, social workers, pharmacists etc. So it's a case of doing everything necessary to prevent readmission and equipping the patient with healthier lifestyle choices.

We cannot talk about innovation without talking about Al. As with all other sectors, it has creeped into remote patient monitoring as well. Companies use machine learning algorithms to analyze ECG readings, vital signs and even facial expressions. It helps them to detect anomalies in real time but also track subtle changes over time. The hope is that such intelligent algorithms will be automatically able to detect symptoms and provide diagnoses for diseases, without human error.

RCL Takeaway: This is a vastly unexplored space, uncovered hitherto in RCI. It can be argued that the best is yet to come, as most of AI is still concerned with data analysis and detection of any patterns. As it stands, just this much is quite useful to clinicians, if they are able to orchestrate a self-running care plan, that makes updates based on its own findings. Risks are aplenty of course, and as with all disruptive technologies, the organizational change of roles is a significant barrier to rapid adoption. With many startups now offering such Al solutions, it would be interesting to read an academic systematic review on its efficiency as the space

Walmart announced a telehealth program in collaboration with Doctor on Demand, with just \$4 co-pay. Not only does it offer diagnosis via video chat, but it offers management of chronic diseases such as diabetes, urgent care and behavioral care as well. The \$4 co-pay is much lower than the previous \$49 co pay for the program. The program is more than just video conferencing to diagnose seasonal flus, colds or infections, but it can handle more complex situations as well. It can manage chronic conditions like diabetes, urgent care and also behavioral health.

RCI Takeaway: We have seen big telehealth companies form partnerships with insurance companies before to serve employees. This is a new gold standard it seems, to have just \$4 copay, and even cover services as complicated as chronic conditions. This is possible because of all the consolidation that is taking place. UnitedHealth had acquired Healthscope Benefits, who are the plan administrators of Walmart. They have also acquired Vivify Health, the remote patient monitoring start-up. So they are able to provide chronic care services via RPM to its newly acquired members directly.

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IN SUMMARY





The web has been saturated with opinion pieces on RPM, either describing its pros or its cons. This is why we had created the ultimate balance scale, showing all the pros and cons of RRM in one diagram. But speaking of vendors and providers, new developments continue to happen. Big health systems and insurance companies are starting to deploy RPM programs, for many reasons, but to mainly curb costs one would think. They are able to pass some of the savings down to consumers as well. With even newer innovations like Al on the horizon, it will provide more opportunity to slash expenditures. For the time being, we are not there yet.

What's Next?

The next RCI will be released on Tuesday, December 10th. It will build a report using articles from November 23rd to December 6th. 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 here.

We will also be circulating this report on our social media channels. If you are receiving this on Twitter, LinkedIn or Facebook, please make sure you subscribe to our list by clicking here. It will allow us to maintain a more direct relationship with you.

If you know someone who will benefit from this report, please do share. For any questions regarding RCI, please email the editor at rahat.haque@aetonixsystems.com





