

Models of Long Term Care Telemedicine Delivery

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Outcomes

- Define the place and the service
- Develop awareness of the realities for success
- Examples of SNF Services



Definitions

- Service: Provider-Resident encounter or interaction over live audio-video connections
- Location: Long Term Care vs Skilled Nursing Facility
 - Owned or affiliated



Location

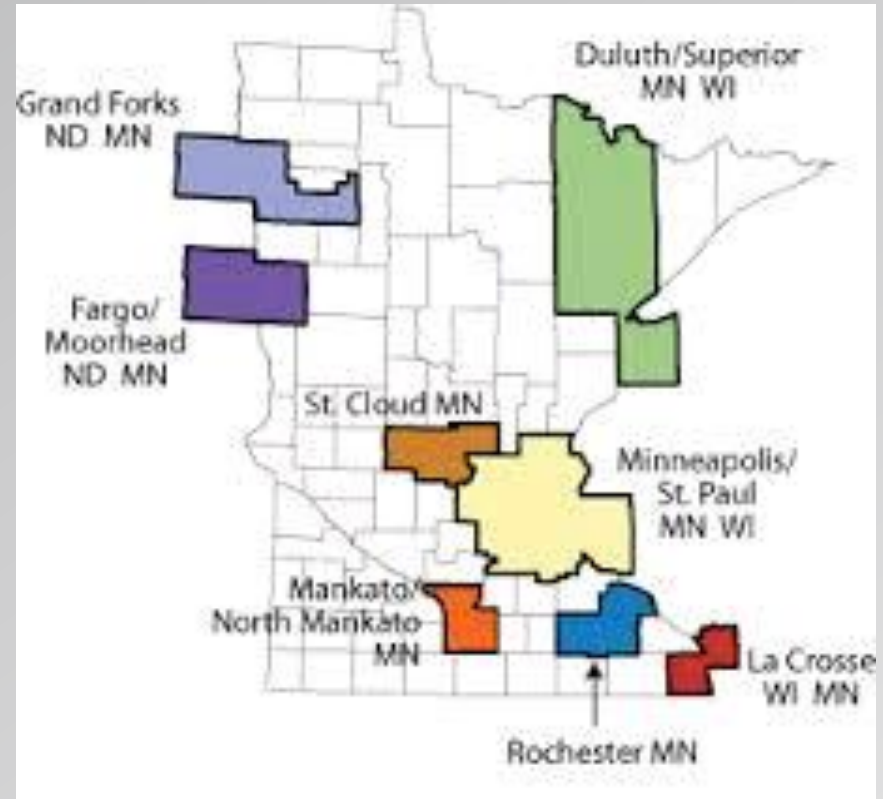
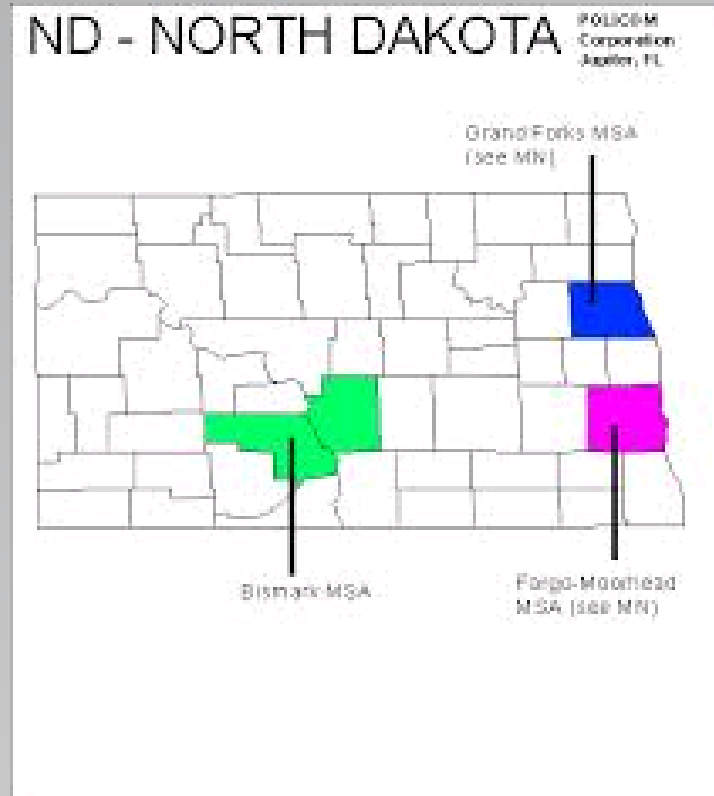
Location

Location

- Originating site – Rural vs Urban Medicare Telehealth Payment Eligibility Analyzer
 - County outside of a MSA
 - Rural HPSA located in a rural census tract



Condition of payment



Metropolitan Statistical Areas



Outcome Drivers

- Reduce ER visits
- Reduce costs of travel and staff support
- Reduce return to hospitals
- Increase provider efficiencies

Improve quality of care by including the bedside care team and connecting with provider who knows them best or specialty provider



Benefits

- Keeps the resident/patient 'at home' with care givers that know them best
- Immediate access to urgent/demand care services
- Early intervention
- Safer: unnecessary hospitalizations
- Keeps the ambulance in the community



Models

- Urgent care
- SNF med staff visits
- Specialty Rounds
 - Psych
 - Wound
 - Ortho
 - Renal
- Rehab Therapy
- Managed care -- Bundled care



Payment models

- Providers who can bill
- Contracted

Originating site fee: The originating site facility fee is outside the SNF prospective payment system bundle and, as such, is not subject to SNF consolidated billing. The originating site facility fee is a separately billable Part B payment. Type of service is "9", other items and services. Office place of service code 11 is the only payable setting for Q3014. Submit on TOB 22 or 23; use rev code 78. Part A stay must be on a 22 TOB

- <https://www.cms.gov/Medicare/Medicare-General-Information/Telehealth/index.html>



Considerations

- Equipment cost
- Room/space
- Nurse time
- Nurse training
- IT infrastructure
- IT support
- Ancillary services:
lab, x-ray
- Communications
- Consent
- EMR sharing
- Orders
- Photos
- Mobile connections



Care and Planning

- Familiarize **staff** and **families** on concept of telemedicine
- Scheduling is an issue: Set up follow-up visits
- FIND YOUR ADVOCATE: transportation coordinator
- Encourage family members to participate in appointments
- Invite other professionals, such as **social workers** to sit in on appointments
- Create an action plan and a clinical protocol
- Ensure adequate digital bandwidth for data transfer
- Be aware of restricted HIPAA-compliant software applications
 - Evaluate data port availability
- Obtain proper licensing, credentialing, and insurance

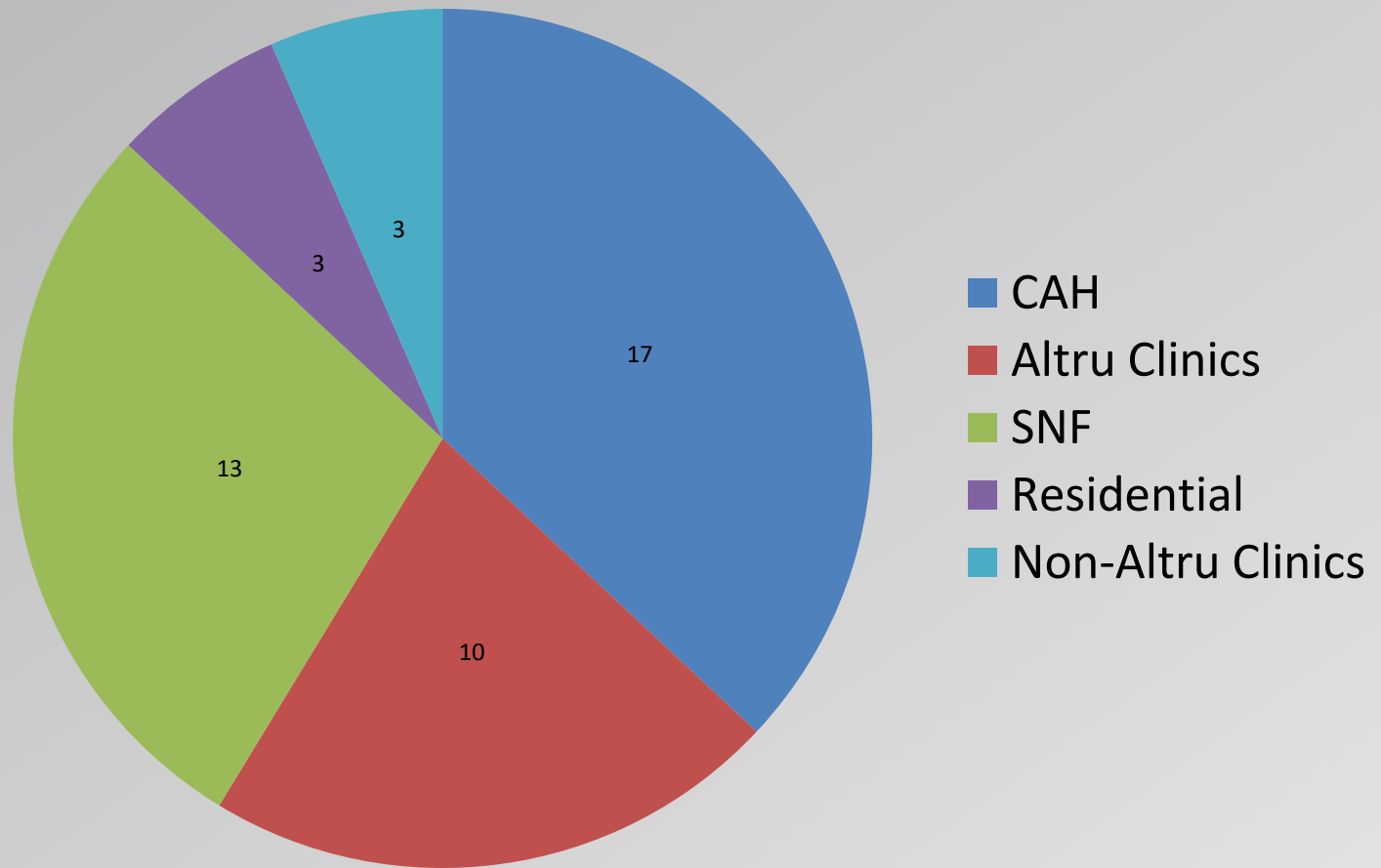


Benefit = Better Care Efficient Care

- ✓ Expanded access to providers
- ✓ Faster and more convenient treatment
- ✓ Better continuity of care
- ✓ Include families in care
- ✓ Reduce travel costs
- ✓ Ability of residents to remain with support networks

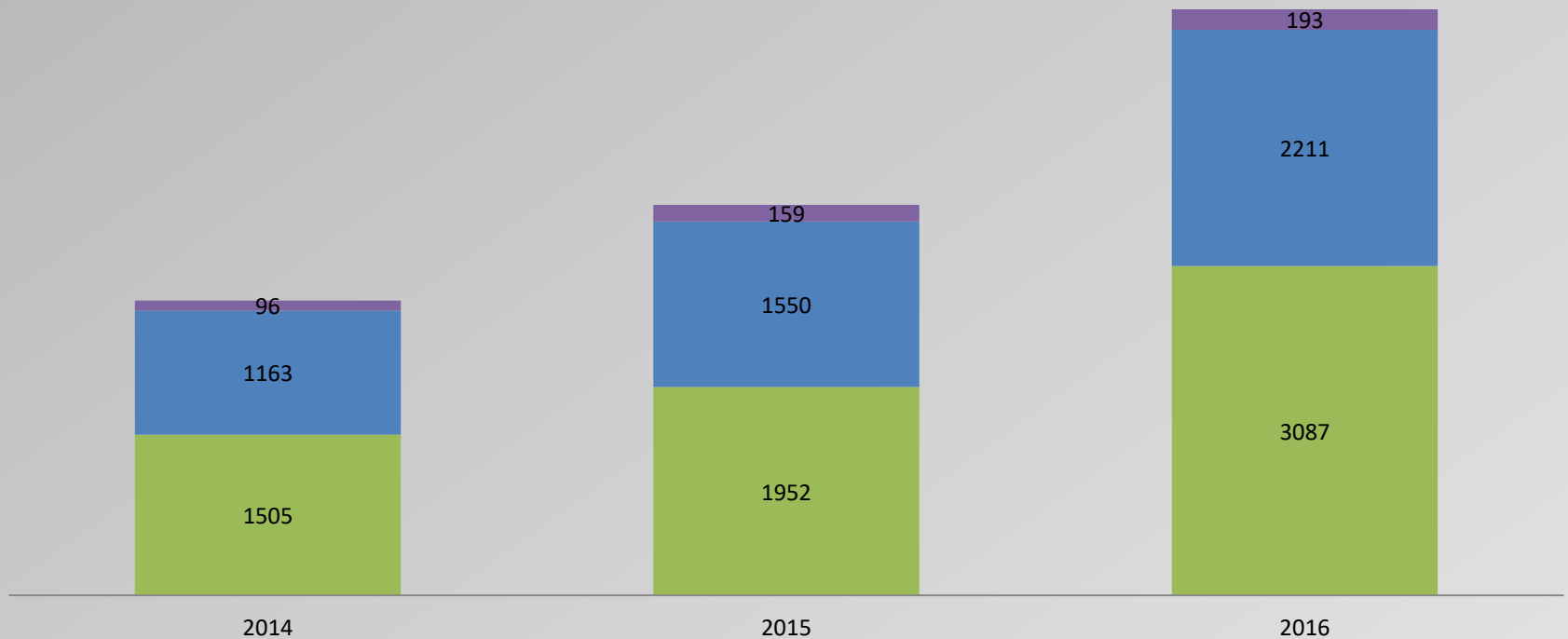


Altru Originating Sites



SNF Growth by encounters/year

■ Altru Sites ■ Non-Altru Sites ■ SNF





Access to quality care, close to home.

Discover Altru's Telemedicine Services >>

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HEALTH SYSTEM

Resources

- Rabinowitz, T., Murphy, K.M., Amour, J.L., Ricci, M.A., Caputo, M.P, & Newhouse, P.A. (2010). Benefits of telepsychiatry consultation service for rural nursing home residents, 2010. *Telemedicine Journal and E-health*, 16(1), 34-40.
- [Perspect Health Inf Manag](#). 2013 Summer; 10(Summer): 1f. Published online 2013 Jul 1.
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