

Client success story

Using telehealth to reduce preventable ER transfers from skilled nursing facilities



New York State's Delivery System Reform Incentive Payment (DSRIP) program began in 2014 to implement the state's response to the Medicaid Redesign Team (MRT) Waiver Amendment. Funded with up to a \$6.42 billion Medicaid waiver, DSRIP provides funding to advance its goals of helping organizations transition from a fee-for-service to a value-based payment model and to avoid preventable hospitalizations and emergency department visits by 25%.

The program created 25 Performing Provider Systems (PPSs) that developed programs and distributed funds in their respective regions of the state. Care Compass Network (CCN) is, geographically, one of the largest PPSs covering one-eighth of New York State. CCN is a not-for-profit community organization with a dedicated region serving approximately 700,000 lives, including 200,000 Medicaid members. CCN has more than 165 partner organizations, including four hospital systems and a wide variety of community-based organizations, nursing homes, behavioral health and substance use disorder programs, social services agencies and higher education systems.

CCN's multi-departmental network serves its community members by supporting the development of innovative programs, funding assistance, and building strong and resilient partnerships. Investing in telehealth to improve patient access to care throughout the region became an important initiative for Care Compass Network.

Not only does CCN want to increase access to healthcare, it also strives to use telehealth specifically to:

- Increase patient access to specialty consultations
- Improve the quality of care
- Reduce hospitalizations and emergency department visits
- Deliver cost-effective services
- Increase patient satisfaction

Challenge

CCN telehealth program staff developed a pilot group in 2019 to measure the effectiveness of telehealth consults in facilities with the highest need in various skilled nursing facility (SNF) settings. The key requirements identified for the program were that the telehealth system needed to be implemented easily while also removing any technical, financial and administrative obstacles. Therefore, CCN concluded a single solution package was a primary criterion.

Ultimately, the primary goal of CCN's telehealth initiative is to improve availability and access to medical and behavioral health providers in CCN's network to boost care quality.



CCN's pilot program

27.9%

DECLINE IN ED TRANSFERS

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Our telehealth setup has reduced the number of transfers to the ED, and the telepsych services have helped alleviate the shortage of providers in our area.

Nasar Khan, Groton Community Health Care Center

Solution

Teladoc Health was selected to support the program. Each of the six participating SNFs received two Teladoc Health Vici carts and accompanying peripheral equipment, which were provided on lease. The self-contained carts include professional-grade cameras and microphones for high-quality remote telehealth consults and a lockable drawer for accessories or other features. The telehealth software runs on a tablet seamlessly mounted to the Vici with Wi-Fi connecting the cart to the hospital network and the Teladoc Health cloud-based software.

SNF provider staff used the carts to arrange telehealth consults instead of transporting patients to a doctor or emergency department. More than 3,000 telehealth consults were conducted in skilled nursing facilities in the first 12 months of the pilot.

Results

The encouraging results from CCN's pilot program exceeded expectations. Emergency department transfers declined by 27.9% among the six participating SNFs. Of the 3,143 telehealth visits they conducted, 1,826 (58.1%) addressed changes in condition during overnight and weekend hours, which meant using telehealth prevented a delay in care.

The teleconsult pilot program provided CCN with some key takeaways. Providing a single telehealth solution in resource-limited facilities helped gain and strengthen leadership buy-in for the program. Because there is high-level support, CCN and its partners are poised to add funding for critical infrastructure, such as network upgrades. Engaging the skilled nursing center staff early in the telehealth program and giving them comprehensive training proved extremely important in the success of the program. It was especially valuable in getting users to adopt the system quickly and increased their effectiveness. Finally, establishing long-term sustainability became critical for making telehealth a permanent feature of the organization.

Ultimately, the successful results from the pilot program encouraged CCN to expand the program to six additional SNFs.

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