

South Carolina Telehealth Alliance
Quarterly Report
September 2015

Summary

The South Carolina Telehealth Alliance has continued to meet the strategic deliverables established for the second and third quarter of 2015. Members of MUSC Health, Department of Mental Health, Palmetto Health/USC, Greenville Health System, Palmetto Care Connections, SC DHHS, ETV and two rural physicians continue to collaborate as the Advisory Council. The Council has overseen the progress of the deliverables as well as actively begun to develop strategies for 2016. Provided in this document is a progress report of the strategic plan deliverables, an overview of the 2016 planning process, and proposed initiatives for full adoption by the South Carolina Telehealth Alliance.

Mission

Improve the health of all South Carolinians through telehealth.

Values

- Patient centered
- Quality
- Collaboration
- Sustainability
- Accountability

Vision

Telehealth will grow to support delivery of health care to all South Carolinians with an emphasis on underserved and rural communities. It will facilitate, coordinate and make more accessible quality care, education and research that are patient-centered, reliable and timely. Our state will become recognized nationally for telehealth that is uniquely collaborative, valuable and cost-effective.

Value Proposition

Telehealth in South Carolina will deliver high value through productive collaboration.

Strategic Plan Deliverables

1. Deploy a coordinated, open-access telehealth network in South Carolina.				
Champions: Designees of MUSC, USC, GHS, DMH and PCC				
Tactic	Deliverable	Owner	Deadline	Completion Status
Explore a common telehealth technological platform that is capable of coordinating multiple referring and consulting hospitals	SC Telehealth Alliance providers will collectively establish: <ul style="list-style-type: none"> ○ Core compatibility standards for video conferencing, security and confidentiality, and electronic medical record integration. ○ MUSC to complete RFP process for a telehealth delivery platform to include advisory members of GHS, USC and DMH 	MUSC	March 1, 2015	Complete
Coordinate existing telehealth programs within the Alliance	Create a plan for existing telehealth services to coordinate their delivery will be established	MUSC	June 1, 2015	Complete

Since these deliverables have been completed, work under this strategy has largely focused on developing proposed initiatives for the coming year. Preparations for a large scale deployment of technology in hospitals and primary care clinics is underway, including ongoing collaborative discussions regarding the use of state appropriated dollars to support large health systems that are well positioned to serve as support hubs for their region.

The steps taken in the second and third quarter include:

- Three of the largest regional health systems in the state, Palmetto Health, Greenville Health System and McLeod Health, have received agreements that would provide them with telehealth funding to create regional telehealth support hubs throughout the state. These newly formed SC Telehealth Alliance regional support hubs would hire dedicated telehealth personnel to better serve their surrounding community hospitals and further advance telehealth initiatives that improve the delivery of healthcare in our state. In addition, the regional hubs will strengthen the open-access telehealth network by building their own internal telehealth infrastructure that is compatible with the standards set forth by the South Carolina Telehealth Alliance. A detailed description of these activities can be found in **Appendix 1**.

- The telehealth software platform, Avizia, which was selected by the South Carolina Telehealth Alliance representation during MUSC Health's RFP process, is being implemented for inpatient and emergency department programs. The workflow assessment and technical readiness phases have been completed, and now the MUSC Health team is working with leadership at Conway Medical Center, Tidelands Health, and Beaufort Memorial Hospital to serve as the initial connected sites to this platform. The expected initial go-live date is scheduled for October 19, 2015.

2. Understand and effectively respond to the needs of users of telehealth with an emphasis on the underserved and rural.

Champions: Designees of PCC, SCETV and USC

Tactic	Deliverable	Owner	Deadline	Completion Status
Conduct onsite assessments of rural providers to include interest, desired services, workforce capacity, and internet connectivity	<p>Perform a thorough needs assessment of rural hospitals, FQHCs and clinics</p> <p>A needs assessment team will be facilitated by PCC and include investigators from MUSC, USC and GHS.</p> <ul style="list-style-type: none"> ○ The team will develop a community health access assessment plan for at least one rural region to include a critical access hospital, regional referral hospitals and all primary care health access points ○ The team will assess the ability of a primary care network to be augmented by telehealth 	PCC	March 1, 2015	Complete
Conduct onsite assessments of rural providers to include interest, desired services, workforce capacity, and internet connectivity	<p>Develop workflow assistance for referring sites for the implementation of quality telehealth service delivery</p> <ul style="list-style-type: none"> ○ a PCC initiative will establish a telehealth best-practices advisory team for referring sites charged with advising on technical specifications, connectivity, administration 	PCC	June 1, 2015	Complete

	and clinical workflow aspects of a telehealth enabled site			
Facilitate improved connectivity for rural providers	<p>The capability of assessing a referring site's current broadband capabilities and performing a review of all options for desired connectivity for site, including ETV resources and the USAC's HCF Program for subsidized funding, will be established</p> <ul style="list-style-type: none"> ○ connectivity assessment for all sites in at least one rural region will be completed 	PCC	September 1, 2015	Complete
Facilitate improved connectivity for rural providers	<p>Assist with equipment installs, support and training</p> <ul style="list-style-type: none"> ○ all health access points that have adequate bandwidth and desiring to participate in telehealth activities within at least one rural region will be equipped with telehealth technologies 	PCC	December 1, 2015	
Objectively assess for care disparities in chronic health condition management	<p>Perform a telehealth needs assessment at the regional level to include both available quantitative health data and qualitative community assessments</p> <ul style="list-style-type: none"> ○ The needs assessment team detailed in Strategy 2a will establish a telehealth service delivery needs assessment following the completion of the health access assessment 	PCC	TBD	Complete
Objectively assess for care disparities in chronic health condition management	<p>Identify and assist in the development of appropriate telehealth service lines</p> <ul style="list-style-type: none"> ○ PCC will establish a region-specific database of the available telehealth services in South Carolina to be utilized in identifying service gaps upon completion of the needs assessment (Strategy 2a and 2c) 	PCC	September 1, 2015	Complete

Objectively assess for care disparities in chronic health condition management	Identify consulting assistance to communities for telehealth grant opportunities <ul style="list-style-type: none"> ○ establish a formal support mechanism to assist community providers in participation of telehealth grant opportunities 	PCC	September 1, 2015	Complete
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In the second and third quarters of this year PCC has led this initiative by evaluating the Hampton, Barnwell, Bamberg and Allendale regions for readiness for telehealth services. PCC has performed a connectivity assessment for all health care sites in the region, established a database of available telehealth services and completed a needs assessment for the region. The needs assessment findings reveal that of the twenty (20) organizations that participated in the readiness evaluation, sixteen (16) have telehealth equipment and ten (10) are currently utilizing telehealth services. These sites find telehealth services advantageous if brought to rural areas, including care improvement in community settings to patients with chronic illness, reduced transportation barriers, improved access to specialty care and enhanced efficiency of service delivery. The full results of the Needs Assessment Summary for the Low Country Region and Needs Assessment Comprehensive Report is found in **Appendix 2**.

An additional Tactic under this strategy has called for the development of a grant support mechanism. PCC has demonstrated the ability to provide these services to rural practices and have now developed an application process for their support. The Technical Assistance Support Form for Grant Writing is found in **Appendix 3**.

3. Invest in expanding needed specialty and subspecialty capabilities through telehealth.				
Champions: Designees of MUSC, USC and GHS				
Tactic	Deliverable	Owner	Deadline	Completion Status
Promote telehealth services which transform the care delivery system to provide better care, lower cost and maximize the limited supply of care providers	Report a timeline and the pathway of service development	MUSC	March 1, 2015	Complete

Throughout the 2015 year, telehealth service development has proceeded at an unprecedented pace. Existing services have grown ever more robust, with MUSC telestroke and Department of Mental Health programs crossing milestones of 6,500 and 25,000 conducted consults, respectively. These

programs are now seeing patients on the order of thousands per year, with demonstrated cost savings north of \$3,000 per encounter in both programs. New services at MUSC have also grown rapidly, with a more than 200 percent increase in patient volume across various specialties in the outpatient setting. Planning for 2016 is underway with a focus on services that enhance efficiencies of care delivery and cost containment that can be replicated widely.

4. Conduct statewide education, training and promotion to providers and the public to accelerate and spread adoption of telehealth.				
Champions: Designees of PCC and ETV				
Tactic	Deliverable	Owner	Deadline	Completion Status
Leverage the experience of the PCC to raise awareness, educate and facilitate the adoption of telehealth	Provide monthly newsletter discussing telehealth news and send to health care providers in SC, hold educational webinars for providers and their staffs, maintain central website for telehealth information and continue to convene the annual telehealth summit to promote state efforts and educate on national trends	PCC	Ongoing	Ongoing
Provide training for future providers through multidisciplinary telehealth courses at the graduate level	Establish a telehealth best practices training mechanism <ul style="list-style-type: none"> ○ articulate a model for disseminating telehealth knowledge and training for multidisciplinary health teams 	PCC	June 1, 2015	Complete
Provide training for future providers through multidisciplinary telehealth courses at the graduate level	Leverage SCETV's 50+ years of experience and the Area Health Education Consortium SCHOOLS network to disseminate telehealth best practices and tele-educational courses for health care providers and patients	ETV	Ongoing	Ongoing
Investigate the feasibility of statewide centralized credentialing program for all telehealth providers	PCC will report a feasibility assessment of a centralized credentialing program	PCC	June 1, 2015	Complete

Progress under this strategy includes promotional and educational activities that are ongoing. Palmetto Care Connections continues to distribute a monthly e-newsletter and host webinars on telehealth topics. The 4th Annual Telehealth Summit of SC has been expanded to a two day event and will be held on October 15th and 16th at the Columbia Metropolitan Convention Center in Columbia, SC. The draft agenda can be found in **Appendix 4**. This Summit will also be preceded by a SC Telehealth Alliance planning retreat on October 14th, allowing for three continuous days of telehealth celebration and discussion. The draft agenda for the planning retreat can be found in **Appendix 5**.

5. Develop a telehealth organization structure that encourages and facilitates statewide collaboration among providers in the delivery of health care, education and research.

Champions: Designees of MUSC and representatives of the State Legislature

Tactic	Deliverable	Owner	Deadline	Completion Status
Establish a SC Telehealth Advisory Council	The Advisory Council will convene by December 15, 2014.	MUSC	December 15, 2014	Complete
Establish success metrics that focus on SC care problems that are amenable to telehealth and which encourage collaboration for equitable impact	The Advisory Council will establish success metrics for telehealth delivery in South Carolina	MUSC	March 1, 2015	Complete

The Advisory Council structure has successfully maintained a venue for transparency and ongoing discussion on the development of telehealth in South Carolina. Expansion of this collaborative structure is proposed for 2016, including a council structure under the SCTA to allow for broader inclusion and engagement in regional and statewide health related initiatives.

6. Demonstrate to legislators, payers, providers and the public, the impact of telehealth in improving access, quality and affordability.

Champions: Designees of MUSC, USC, GHS, DHHS, PCC and ETV

Tactic	Deliverable	Owner	Deadline	Completion Status
Document, evaluate and communicate outcomes related to	As representing the South Carolina Telehealth Alliance, MUSC and ETV will initiate effective public	MUSC and ETV	June 1, 2015	Complete

<p>existing and new telehealth initiatives to include cost savings, clinical quality improvements, increased access to care, etc. ETV resources and experience will be leveraged to deliver telehealth successes to the public and other stakeholders</p>	<p>awareness campaigns</p>			
<p>Support research that establishes academic visibility and credibility for telehealth in SC</p>	<p>A report on the ongoing assessments and telehealth activities will be presented at the 2015 Annual Telehealth Summit of South Carolina</p>	<p>MUSC and PCC</p>	<p>October 16, 2015</p>	

The SCTA telehealth awareness campaign, which includes television and print advertisement, continues to promote to the general public. Looking forward to 2016, a team is being established with SC ETV to lead the development of a telehealth informational campaign for providers and consumers across the state. This initiative intends to create telehealth content that can be freely shared with all members of the Alliance.

2016 Strategy and Proposed Initiatives

The South Carolina Telehealth Alliance Advisory Council has quickly demonstrated its ability to work collaboratively to address new priorities. Adopted Alliance initiatives from the past year will be formalized in the new strategic plan at the October 14, 2015 South Carolina Telehealth Alliance Advisory Council retreat. Proposed 2016 strategies and tactics are found in **Appendix 6**.

Allocation of Funds

The Center for Telehealth began operations in November 2013. Below is an illustration of the allocation of funds for the first 22 months of operations (Figure 1).

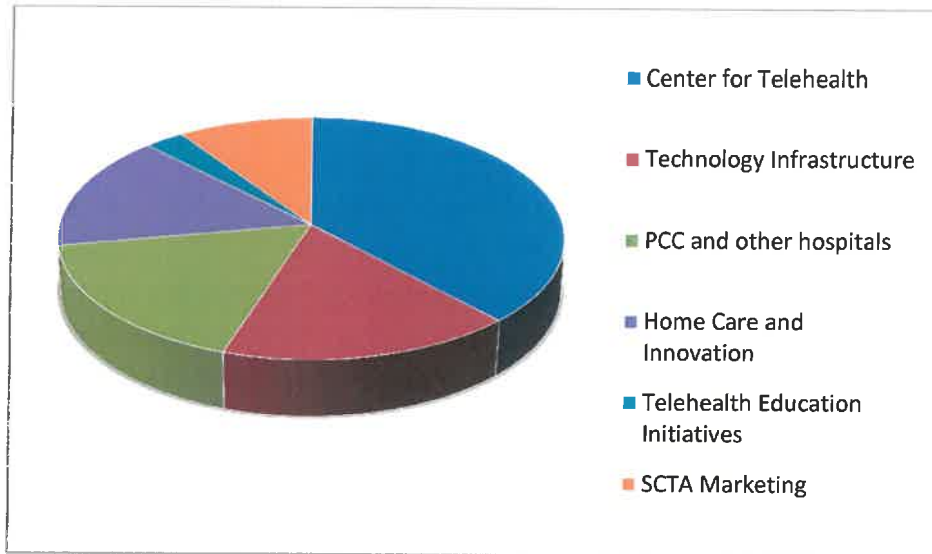


Figure 1 – Allocation of Funds (November 2013 – August 2015)

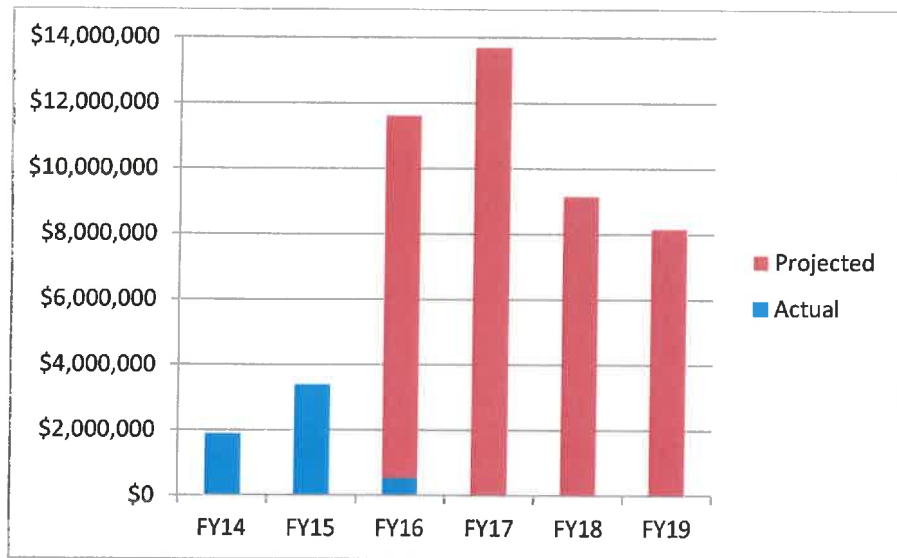


Figure 2 – Actual Expenditures and Projected Expenses

“Telehealth in South Carolina will deliver high value through productive collaboration.”

