



**CALIFORNIA
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American Academy of Pediatrics

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CALIFORNIA CHAPTER 2 San Luis Obispo • Santa Barbara • Ventura
Incorporated in California Kern • Los Angeles • San Bernardino • Riverside



Telehealth ECHO Project

Session 3: Telehealth Platforms

Starts at Noon

February 18, 2021





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Telehealth ECHO Project

Enter your name in the Chat
For CME

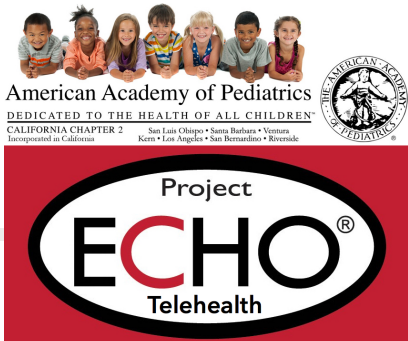
February 18, 2021

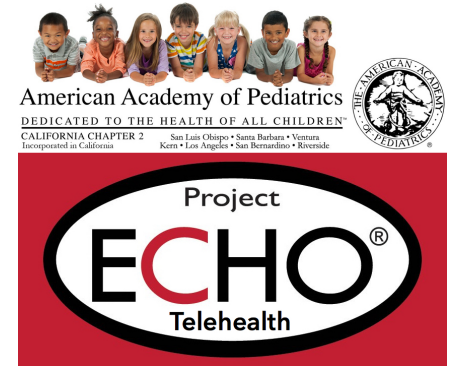


SESSION TOPICS

1. **JAN 21:** TELEHEALTH 101 DURING COVID (SUCCESSFUL VISIT/PRACTICE WORKFLOW) - **MITZI YOUNG & DAVID FORD**
2. **FEB 4:** TELEHEALTH 102. (LEGAL ASPECTS/CODING-BILLING/NEW REGULATIONS) - **MARY JEAN SAGE**
3. **FEB 18:** TELEHEALTH PLATFORMS IN MARKET/TECHNICAL DIFFICULTIES
4. **MARCH 4:** TELEHEALTH FOR PREVENTIVE CARE
5. **MARCH 18:** SOCIAL AND CULTURAL CONSIDERATIONS WHILE PROVIDING TELEHEALTH
6. **APRIL 1:** TELEHEALTH AFTER COVID-19.

60-MINUTE ECHO SESSION





Telehealth for Small and Medium Sized Practices

Selecting the Right Telehealth Platform for Your Practice



Mitzi Young
Physician Advocate

February 18, 2021





AAP-CA2 Telehealth ECHO

Case Presentation Form

Please complete applicable portions of this form and return to chapter2@aapca2.org

PLEASE NOTE that Project ECHO® case consultations do not create or otherwise establish a provider-patient relationship between any clinician and any patient whose case is being presented in a Project ECHO® setting. Do not share any confidential patient information (name, etc.) when identifying your patient during the ECHO session.

Instructions:

The submission of cases for presentation and discussion is a key component in the Project ECHO® model. We welcome cases that involve patient care as well as process and/or policy-related cases. Project ECHO staff will follow up with you to provide guidance and structure around this presentation. The case presentation serves as a tool to educate providers on telehealth modalities that are consistent with best practices. The presentation is typically about **5 minutes long**.

What Cases Should I Present?

This ECHO program seeks de-identified patient cases that involve the use of telehealth. Consider the following ideas for types of potential cases to submit:

- Example of a telehealth visit that did not go well – how could we improve?
- Cases could be patient or process focused, relevant to the session lecture or not.

Case Number (to be entered by AAP-CA2 Staff):

What is your reason for presenting this case? What question(s) do you have about the case that you would like the group to discuss? enter text

Please briefly describe the main points of your case: enter text

Please describe your practice setting (number of providers, administrative staff): enter text

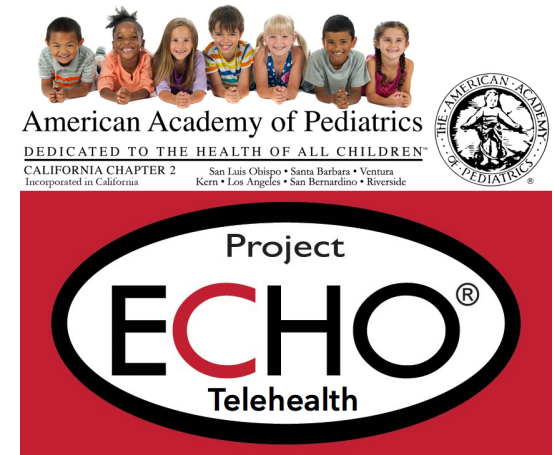
Is there a practice-level or institutional-level policy or process that relates back to your case? Please describe. enter text

Case Presentation and Discussion



Case Presentation and Discussion

Presented by Marcelino Calimlim, MD



Patient: 2-year-old female, Hispanic/Latino

Chief complaint: Cough

Telehealth Platform: Doximity/Phone call **Issues:** Computer /technology literacy

Main Points:

The mother only speaks Spanish and expressed her daughter's illness through the phone.

I understand/speak some Spanish and can communicate well the plan of care.

Told her I would call her back through a video telehealth through Doximity. They did NOT accept the call.

Plan: Supportive care and chest x-ray was ordered since the patient is COVID positive.

Comment: Regardless of the telehealth modality used, the most important factor is:

Was the communication effective on both sides?

January 21, 2020



Telehealth “Tipping Point” Educational Campaign



Information and resources tailored to the needs of small and medium-sized practices

1. 12-Part Webinar Series (today is #5)
2. Telehealth Resource Center on the CMA Website (*Under Construction*)
 - *Please provide feedback at the end of the webinar on telehealth resources you would find valuable*

This project is made possible through the generous support of the California Health Care Foundation.

CMA Needs to Hear from You!

- In order to tailor resources to your needs, **CMA needs your input**
- Questions and comments on this webinar are logged and compiled
- You will receive a brief survey after today's presentation
- We might reach out to schedule a 1:1 phone call

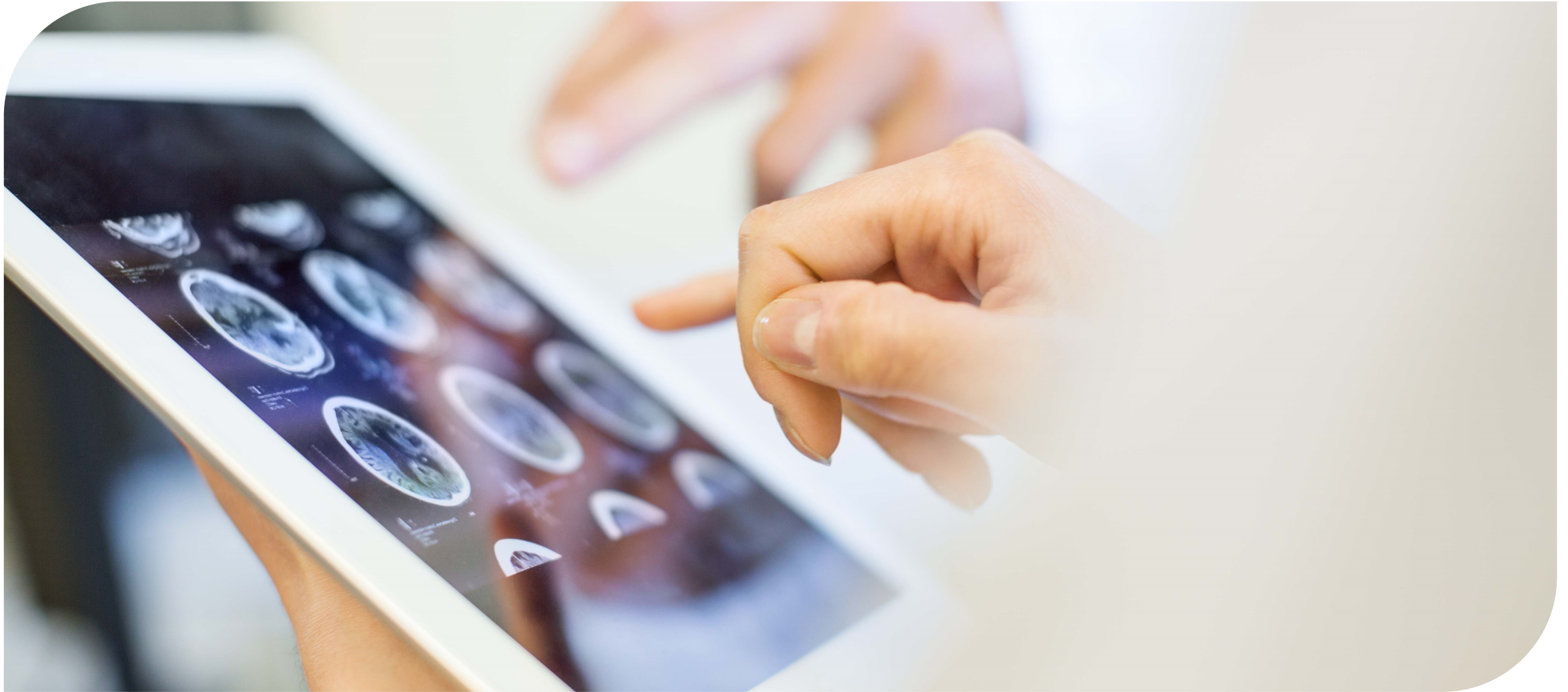




A Few Thoughts as we Get Started- Webinar Objectives

1. Support physician product selection - #2 priority from physicians (after billing & reimbursement)
2. CMA does not endorse any vendor platform discussed on the webinar today
3. Important takeaway – How to approach telehealth

Selecting the Right Telehealth Platform



Telehealth Technology: Patient Facing Modalities



Telehealth Modalities	Perceived Ease of Use
Telephone (“voice only” or “audio only”)	Very easy
Commercially-available communications platform (Skype, Zoom, Facetime, etc.)	Easy
Telehealth Platform (doxy.me, Medici, etc.)	Moderately easy

Telephone



- **Pro** – Ease of use, may be more accessible to patients without other technologies, who are not comfortable with technology, etc.
- **Con** – Not all payors will reimburse physicians for telephone-only telehealth visits, lack of video can limit physician-patient interaction



Commercially-Available Communications Platform

- Skype*, Zoom*, FaceTime are allowed during the public health emergency
- Not allowed – TikTok, Facebook Live, etc.
- **Pro** – Ease of use, vast majority of patients have access, allows videoconferencing without special software
- **Con** - Generally not HIPAA-compliant, authorization for future use uncertain

* *Basic versions only*



Telehealth Platform

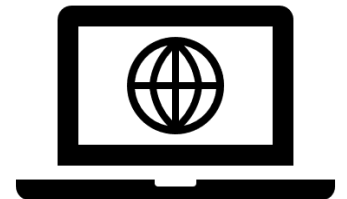


1. Stand-alone system

- Examples: doxy.me, Medici, UpDox, Vsee, Zoom Health

2. Embedded

- Examples: Athena Telehealth, Otto Health, Healow, EHR-specific modules





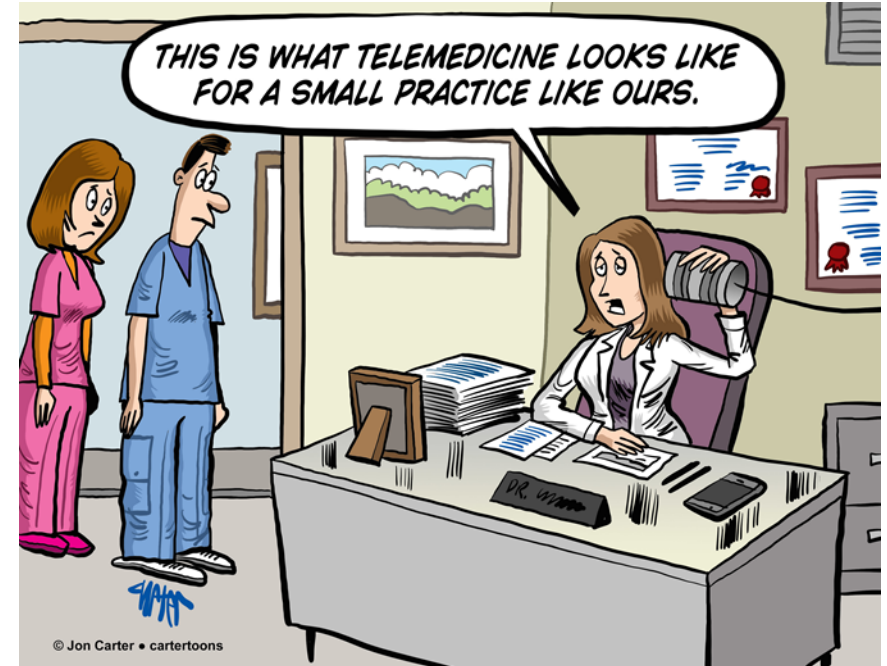
Telehealth Platform- Two Types

Stand-Alone	Embedded
Easier for physicians and patients	Telehealth tool integrated with EHR
Quick start up	Data can be entered into structured fields
No language translation issues	Can pull reports easier on number of visits schedule through telehealth
Patient app download not required, login may or may not be required	Staff and provider training required
Little to no equipment required	May require templates be translated into patient language
	Patient training and support likely
	Telehealth equipment considerations
	More patient visibility and interaction which will support a successful visit

Selecting a Platform – Key Considerations

1. Business History and Business Model

- How long have they been in business?
- Funding?
- Revenue stability?
- Number of installations nationally and in California with like practices?



CartoonStock.com

Selecting a Platform – Key Considerations



2. EHR Integration

- If the practice is not using a system embedded within the EHR, find out if it will integrate, how much it will cost and specifically which fields are integrated? Pay attention to uni- and bi-direction integration.
- Need to check with both the telehealth vendor and the EHR vendor – **problems can arise on either side!** EHR vendor may or may not assign resources to integration, may have their own additional fees
- Consider the benefits of EHR integration (see slide 12) specifically for data reporting and claim submission

Selecting a Platform – Key Considerations



- **3. Patient Experience**

- Approach the platform as a patient, a scheduler, an MA - not just as a physician.
- Does the patient need to download special software? Create a user profile and log in?
- Is the software easy to navigate and use for the patient? E.g., some solutions walk the patient through set up.
- If it is mobile-enabled, does it work on iOS and Android?

Selecting a Platform – Key Considerations



4. Cost

	Doxy.me	Medici	Updox	VSee	Zoom Health
List Price (Basic Version)	\$35/mo per user	\$149/mo per user	\$35-60/mo per user	\$49/mo	\$200/month
Free Version	Yes	Yes	No	Yes	No
EHR Integration	No	Yes (5 EHRs)	Yes (Practice Fusion)	No	Yes

- Note per month vs per user pricing
- Potential hidden costs: set up, training, implementation, support fees, access to resource center

Prices above are listed on the respective companies' websites. CMA cannot confirm pricing information.

Selecting a Platform – Key Considerations



5. Device Compatibility

- What device(s) will the staff and physicians in your practice be using?
- Will staff and physicians always be working from the office, sometimes at home?
- Desktop – Mac/Windows
- iPhone, iPad
- Android phone/tablet
- Not all telehealth systems operate on all of the above

Selecting a Platform – Key Considerations



6. Customer Support

- Both for implementation and tech support
- Is training included for physicians and staff? By role (front office, back office, provider)? One time only? Ongoing training? Resources for new staff hires? Are there user groups or resource centers, standing trainings?
- Where is customer support located?
- What are the customer support hours?
- What is considered a “critical issue” and what is the associated promised response time?



HIPAA Compliant Solutions

Telehealth Tool	Features	Summary	EHR Integration?
Zoom Health	Patient waiting room: provider monitors pts waiting. Recording session review. Collaboration feature to allow for multi-provider visits.	User friendly, HD video and audio consistent in low bandwidth, English only, no eRX	Yes (all EHRs)
OTTO Health	Share your screen, pass documents, chat with patient, payments, transition after-hour calls to virtual visits without EHR access, customizable email and text reminders.	Use any device for the virtual visit, no username needed, English and Spanish available. Check dbl entry in PM and OTTO scheduling platform	Yes (NG, Athena Health, Greenway)
Doxy.me	Phone capture, 3-way calling, screenshare, file transfer, payments, waiting room, patient queue, text chat, meeting history.	Ease of use, no download, username or password required	No Stand alone solution
TriMed	Private video conference, no app or patient login required.	Customizable templates, text messages to launch visit, free during COVID-19	Yes (TriMed only)
Curago	Text and email appointment reminders, insurance card image capture, virtual waiting room, document passing, provider screen sharing.	Text messaging reminders, multi-lingual patient registration, seamless EHR integration	Yes (all EHRs)
Healow	Initiate visit with text or email, on-demand calls, pre-visit questionnaire, usage analytics, mobile app for providers.	Analytics dashboard to track solution usage, Requires patient email, must be web-enabled, English only, per visit cost	Yes (eCW)



HIPAA Compliant Solutions

Telehealth Tool	Features	Summary	EHR Integration?
Follow My Health	Outreach, mobile check-in, post-care notifications, appointment acquisition, personalized education.	Expedited implementation in a matter of days	Yes (Allscripts)
MyChart	Integrated in patient portal, reconcile medications, pre-visit questionnaire.	Integrated in MyChart patient portal	Yes (Epic)
Updox	Video chat, secure texting, patient reminders, payments, campaigns, electronic fax.	Integration with Practice Fusion EHR, can get up and running in 30 minutes	Yes (Practice Fusion)
Amwell	Video visits, scheduling, configure provider workflows, virtual visit reminders, email templates, payments, visit summaries and tracking.	Integration with Epic, Cerner and other major EHRs.	Yes (Epic, Cerner)
Pocket Docs	App based, can choose provider for visit, scheduling, video visits, multiple specialties.	Quick set up, accepts most insurance types, integrates with MyChart	No, stand alone solution
eVisit	Virtual waiting room, in-visit chat, ePrescribe, scheduling, on demand visits, visit reminders, charting during visit, payments.	Integration with all major EHRs. Works across specialties. Providers can set availability	Yes (over 50)
Simple Visit	Video visits compatible with Skype, Google Hangouts and FaceTime. Subscription for providers.	Quick set up, primarily for video visits and doesn't require software	No, stand alone solution
VSee	Virtual waiting room, one click video calling, emails, screenshare, texting, payments.	Quick set up, direct video communication, one package is free	No, stand alone solution



Some good resources

1. California Telehealth Resource Center

www.CalTRC.org

2. Capterra (search for “telemedicine”)

www.capterra.com

Questions?



**Please enter all questions into
the chat box on the right side of your screen**

CMA Telehealth Resources



Available on the CMA Website

Telehealth Practice Implementation Guide

<https://www.cmadoocs.org/Portals/CMA/files/public/CMA%20COVID-19%20Telehealth%20Overview.pdf>

Telehealth FAQs

<https://www.cmadoocs.org/covid-19/faq/CategoryID/44>

Next Telehealth Webinar



Webinar: Telehealth Series for Small and Medium Sized Practices: (Pt. 6): Strategies for an Effective Telephone Visit

Thursday, October 29th

12:15-1:15pm

Information and registration:

<https://www.cmadocs.org/events>

CME: COVID Virtual Grand Rounds



- GOAL: Brief clinicians (e.g., front line physicians, nurse practitioners or physician assistants) on the evolving nature of COVID-19 patient management
- Free, monthly & CME-eligible
- cmadocs.org/covidroundsca



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Thank You