



Munson Home Health

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Why Telehealth?


WOULD YOU LIKE TELEHEALTH WITH THAT DIAGNOSIS ???

Innovative Proactive Response

- CONGESTIVE HEART FAILURE
 - To Increasing Aging Population
 - Decreasing Nursing Population
- COPD
 - Decreasing Funds For...
 - Increasingly Complex Healthcare
- MYOCARDIAL INFARCTION
 - Issues related to Longer Lifespans
- RECENT CARDIAC SURGERY
- HYPERTENSION
- DIABETES
- FREQUENT ER VISITS
- HOSPITALIZATIONS
- PRN VISITS

While Improving Patient Care

- Actually Increases monitoring and efficiency in planning nursing visits.
- Demonstrates improved outcomes over those without Telehealth
- Increases ability to discharge sooner from the hospital
- Demonstrated increased ROI.





Michigan Rural Health Conference 2009

**Borgess TeleStroke Network
South West Michigan
TeleHealth**

**Borgess Medical Center
Certified Primary Stroke Center
via Joint Commission
since April 2004**

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Weight Management



Dr. Griffin

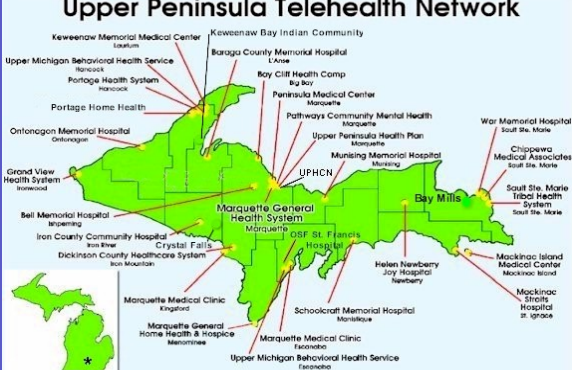
- Bariatric Pre and post-op
- Support groups
- Distance education
- Nutritional consults



Dr. English pt. at BCMH

"Telemedicine is helping us comply with Standard 10 which requires the program to be 75% compliant in 5 years with follow-up of post surgical patients or at least show a paper trail that we have attempted follow-up. This is an area of compliance a lot of other programs are falling short."

Upper Peninsula Telehealth Network



Michigan Association of Community Health Providers - Lansing

Real Time Telehealth
2 way interactive, see patient, talk to patient, and visa versa

Reimbursement

Rural Health Professional Shortage Areas

- Medicare: May 2001
- BCBSM: August 2003
- UPHP: July 2004
- Medicaid: May 2006
- United Healthcare
- Preferred Provider of Michigan



ROI

- Windshield Time
- Productivity
- 2 Lane Highways
- Unpredictable Weather
- Stoic Population
- Price of Gas

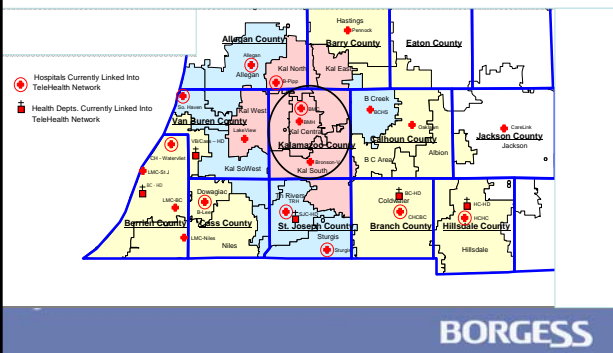


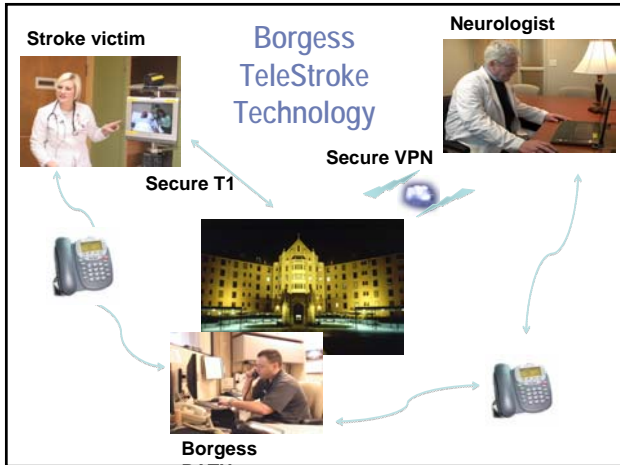
Any Questions?

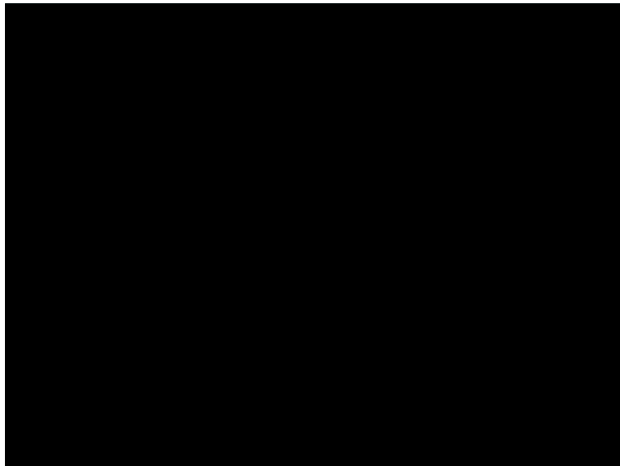




Southwest Michigan TeleHealth Network







Lessons Learned

- **Identify Champions Early**
 - Secure the clinical experts
 - Use existing resources ie,
 - Engage information technology
 - Secure physician support
 - Administrative support

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Lessons Learned

- Takes longer than anticipated
POTS versus 21st Century

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Value Added

- Immediate interaction with regional referral physicians in real time.
- Disposition and treatment can be evaluated with little delay.
- TeleStroke provides a continuum of specialized care in the community hospital.





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Michigan Rural Health Conference 2009 Partnerships for Success

Borgess TeleStroke Network presented by:

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Marquette General Behavioral Health Services

Outpatient Behavioral Health Service
Center for Intensive Addiction Services
Adult Psychiatric Unit
Child & Adolescent Psychiatric Unit



Applications & Accomplishments

- *Follow-up visits for patients seen by psychiatrist/psychologist.
- *Probate court hearings.
- *Child/adolescent psychiatry.
- *Education.



How It Works

- *Determine location of teleconferencing site closest to patient.
- *Schedule.
- *Patient arrives at distant site and is escorted to teleconferencing room.
- *Billing.
 - Patient is charged a site fee of \$30.



Value

- * Reduction in no-shows/cancellations.
- * Keeps child/adolescent unit open.
- * Kinder treatment for involuntary patients.
- * Increased educational opportunities for professionals across the UP.
- * Increased efficiency with valuable clinician time.



Value: \$\$\$\$

- * 1/1/07 – 12/31/08
 - 237 MSU Consultant Contacts
 - \$26,500 gross charges
 - \$100,000 savings over cost of psychiatrist
 - 285 MD Contacts (90862) - \$27,075
 - 153 PhD Contacts (90847) - \$25,704
 - Total: \$179,279



What We've Learned

- * Worth it – the benefits exceed the potential liabilities.
- * Works – mainly due to the cooperation and support we get from the UPTN and those at the “far” site.
- * Win-win – for both patient and MGHS.
