Virtua Veterans Telehealth Initiative
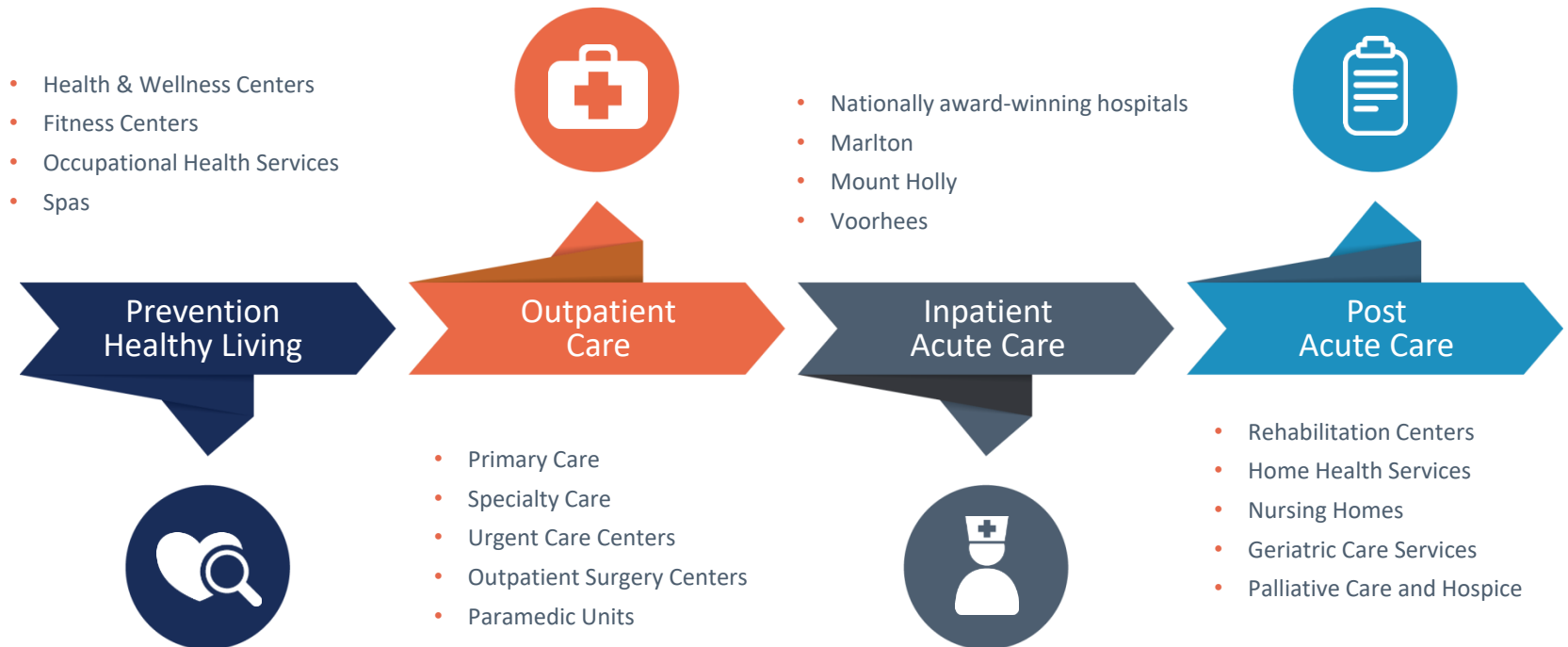
Lessons Learned from Developing a Targeted Program

Elliott Wilson
Manager, Telehealth and Mobility Programs
exwilson@virtua.org
856-355-1067

October 18, 2017

A comprehensive continuum of care that begins with wellness and prevention.

- Health & Wellness Centers
- Fitness Centers
- Occupational Health Services
- Spas

- Nationally award-winning hospitals
- Marlton
- Mount Holly
- Voorhees

Prevention Healthy Living

Outpatient Care

Inpatient Acute Care

Post Acute Care

- Primary Care
- Specialty Care
- Urgent Care Centers
- Outpatient Surgery Centers
- Paramedic Units

- Rehabilitation Centers
- Home Health Services
- Nursing Homes
- Geriatric Care Services
- Palliative Care and Hospice

More residents choose Virtua than any other healthcare system in our region.

- **310,000+** Outpatient Visits

- **216,000+** Emergency Room Visits

- **157,000+** Home Health Visits

- **60,000+** Admissions

- **54,000+** Emergency Paramedic Responses

- **~8,000** Births

A network of **150+ care locations** provide easy and convenient access.

BURLINGTON

GLOUCESTER CAMDEN

SALEM

ATLANTIC

South Jersey

Mission, Vision & Six Guiding Values

- Virtua helps you be well, get well and stay well

- Virtua will be the premier choice in health and wellness

- Integrity, Respect, Caring, Commitment, Teamwork, Excellence

Virtua Telemedicine

Synchronous Care
- Virtua eVisits
- Teladoc
- Specialists on Call
- Insight Telepsychiatry

Asynchronous Care
- Pediatric Imaging by CHOP
- Nighthawk Remote Radiology

Remote Patient Monitoring
- GE Telemetry
- Philips eCare Coordinator
- Avasys Telesitting

NJ Veterans Overview

- >400K Veterans in NJ (5% of the state-wide population)

- Highest percentage of veterans over 65

- Most of our Veterans served in Vietnam

- 5 County area contains approximately 100,000 veterans

- Approximately 700 homeless veterans in 2015

- Approximately 100,000 NJ veterans experience housing problems

- 1 in 5 homeless Americans are veterans
- 1 in 3 homeless men are veterans
- Veterans of Iraq and Afghanistan have an unemployment rate 40% higher than the general population
- ~50% of combat veterans from Iraq report PTSD
  - Of which 40% report "problem alcohol use"

The National Council, Meeting the Behavioral Health Needs of Veterans, Nov. 2012

Pew Research Center. The military-civilian gap: war and sacrifice in the post-9/11 era.

- **$290,000 Grant Award**
- **Goals:**
  - Provide primary care to veterans
  - Provide behavioral health care to veterans
  - Whenever possible, schedule same-day or next-day appointments
  - Provide care through the use of telehealth modalities
  - Connect veterans to other services as needed (housing, employment, legal, etc.)

- **Proposal** – What is your approach and plan?

- **Organizational Capacity** – How able are you to execute your plan?

- **Readiness** to implement – How quickly can you operationalize your plan?

- **Evaluation** – How will you evaluate your program mid-stream and at the end?

- **Budget** – How reasonable is your budget to meet the requirements?
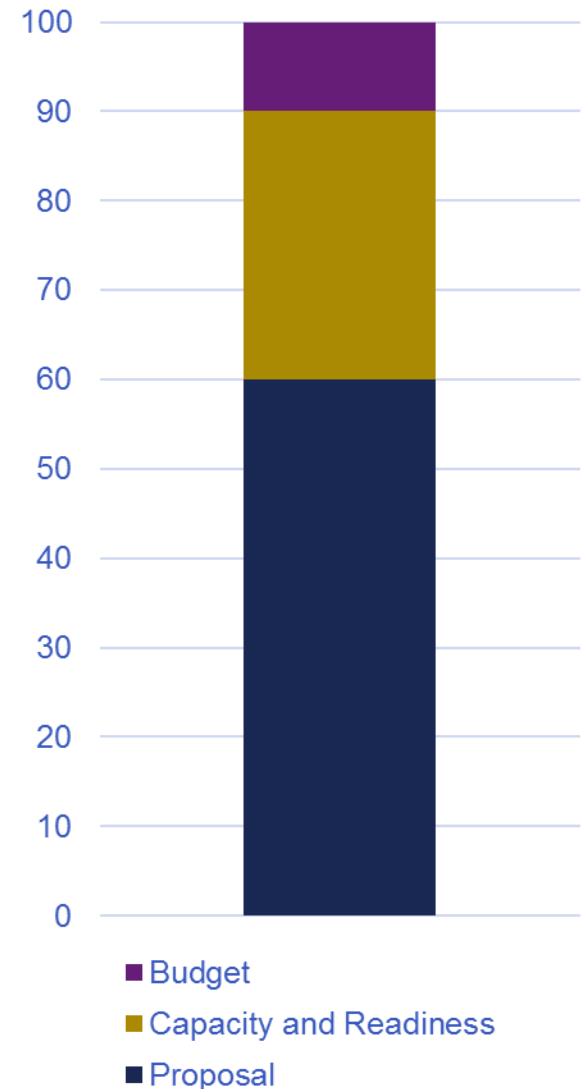
- Cohort of 325 veterans

- Veterans offered any combination of four (4) visits for primary or behavioral health care
  - Primary care would be provided by our Urgent Care physicians
  - Behavioral health care would be provided by local behavioral health providers

- Appointments would be offered using our telehealth platform

- Veterans would be linked with
  - Community-Based health Manager (CBHM)
  - Scheduling navigator
  - Health insurance benefits counselor

- A bundled per-visit fee would be assessed to the grant

- Remaining funds would cover care coordination, tech support, program management and reporting
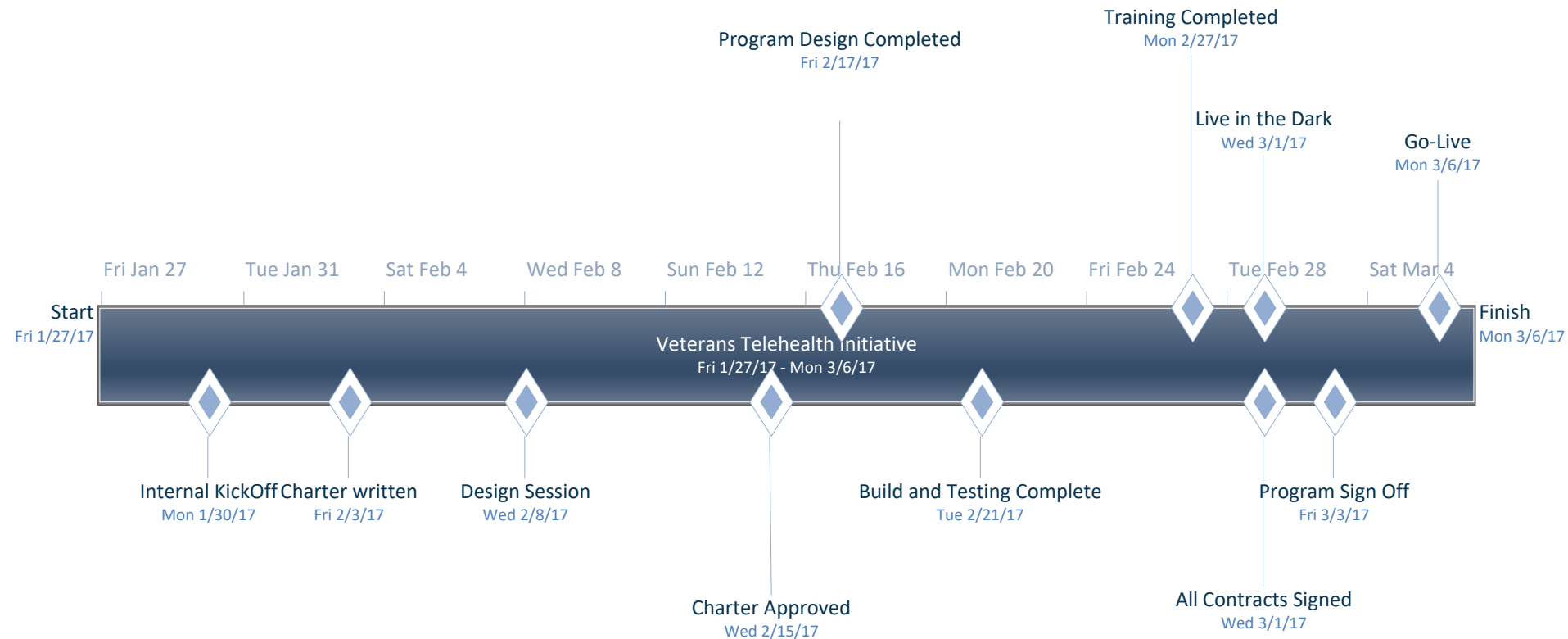
- What was Virtua's Score?

?

Lessons Learned

- Know how grant proposals are submitted in your organizations

- Keep your ears perked for grant opportunities

- Structure your proposals with as little risk to the grant money as possible.

- Try not to schedule around your child's birth
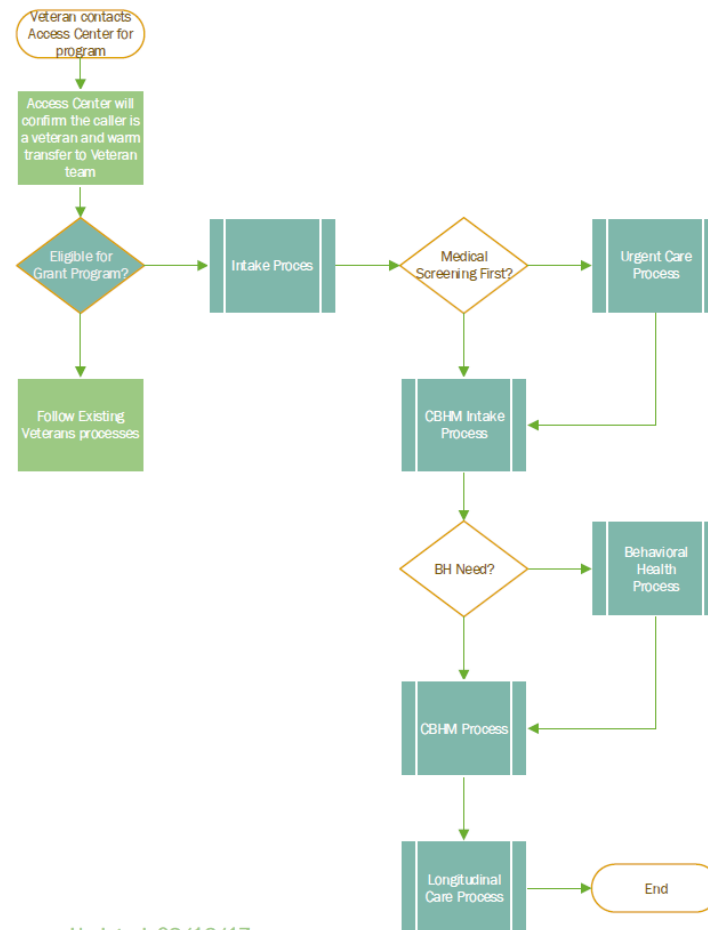
Program Development - Timeline

Virtua

Training Completed
Mon 2/27/17

Program Design Completed
Fri 2/17/17

Live in the Dark
Wed 3/1/17

Go-Live
Mon 3/6/17

| Fri Jan 27 | Tue Jan 31 | Sat Feb 4 | Wed Feb 8 | Sun Feb 12 | Thu Feb 16 | Mon Feb 20 | Fri Feb 24 | Tue Feb 28 | Sat Mar 4 |

Start
Fri 1/27/17

Finish
Mon 3/6/17

Veterans Telehealth Initiative
Fri 1/27/17 - Mon 3/6/17

Internal KickOff
Mon 1/30/17

Charter written
Fri 2/3/17

Design Session
Wed 2/8/17

Build and Testing Complete
Tue 2/21/17

Program Sign Off
Fri 3/3/17

Charter Approved
Wed 2/15/17

All Contracts Signed
Wed 3/1/17

Lessons Learned

- Identify roles and responsibilities!

- Program Kick-Off – February 8th, 2017
- Design Session
- Reviewed weekly

Veterans Telehealth Initiative - Main Process

Veteran contacts Access Center for program

Access Center will confirm the caller is a veteran and warm transfer to Veteran team

Eligible for Grant Program?

Follow Existing Veterans processes

Intake Proces

Medical Screening First?

Urgent Care Process

CBHM Intake Process

BH Need?

Behavioral Health Process

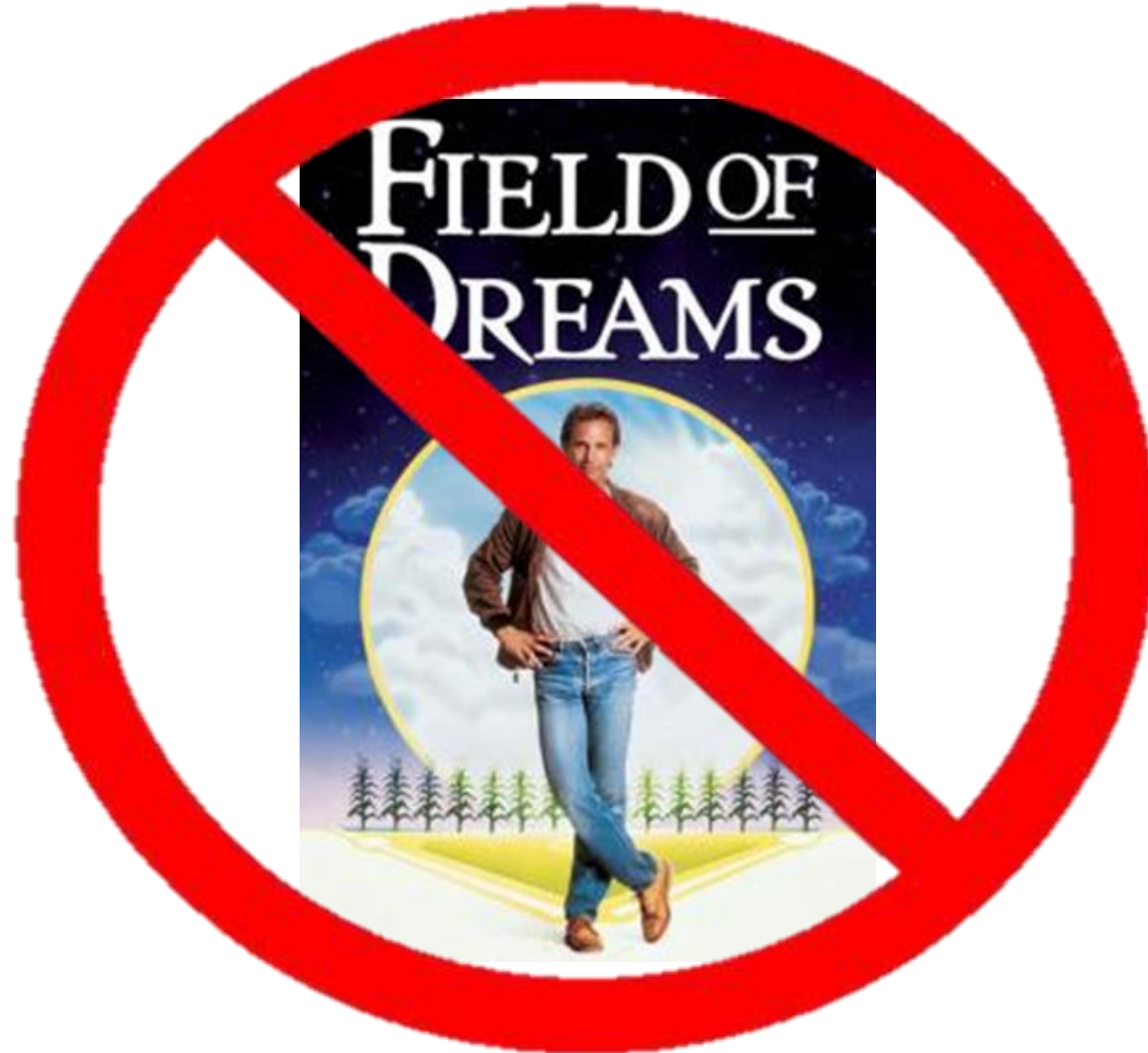CBHM Process

Longitudinal Care Process

End

Updated: 03/16/17

Lessons Learned

- Be Flexible! Don't be bound by your original ideas

- Live discussions are the best when designing a program

- Technology is the easy part

- Do a dry run/dress rehearsal…without technology

Lessons Learned

- Maintain focus!

- Document everything!

- www.virtua.org/evisits