

Telemedicine Services In the California Area

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California Area
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TELEMEDICINE

- Creates a layer of specialty care
In Rural & Urban areas without
access to specialty care, and for
patients with Medi-Cal
- Helps increase some GPRA
indicators
 - Retinal Screening
 - HgbA1c's

Clinic Sites With Video Conferencing Services

- Round Valley
- K'ima:w
- Pit River
- Toiyabe
- Tule River
- Lake County
- Feather River
- Karuk
- United Indian Health
- Sycuan
- Greenville

Clinic Sites Currently Providing Telemedicine Service Via Video Conferencing

- Round Valley
 - K'ima:w
 - Pit River
 - Toiyabe
 - Tule River
 - Lake County
- 

TELEMEDICINE SPECIALTIES

Via Video Conferencing From UC Davis Medical Center


- Endocrinology8hrs/mo
\$200/hr
- Nutrition8hrs/mo
\$100/hr
- Psychiatry16hrs/mo
\$188/hr
- Hepatitis C Treatment.....

Tele-Medicine Specialty Care Child Psychiatry Shingle Springs

- Child Psychiatry4hrs/mo
- No Charge!



Specialty Care Through Telemedicine is a Better Visit!

- Visit Lasts One Full Hour
 - Reasonably Priced
 - Care Plan Devised Immediately
 - Focus on Chronic Condition
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Provider Concerns

- Telemedicine Adds Specialty Care to Your Practice
- Does Not Replace Primary Care
- Is a Better Specialty Care Visit for Your Patient
- Specialist Offer Recommendations; the Primary Care Physicians' Remain in Charge of Care

Billing

- Primary Care Provider included in the last 15 minutes
- Can then bill the CMS/FQHC Fee

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Spin-Off Activity From Video Conferencing Capability

- **Administrative**

Tribal Negotiations with Indian Health Service
Inter-Clinic Health Board Meetings

- **Education**

Continuing Medical Education
Annual Training
Medical Student (UCDMC)
Community Education

- **Clinical**

Physician / Peer Consultation

Clinic Sites With Retinal Cameras

- Round Valley
- K'ima:w
- Pit River
- Toiyabe
- Tule River
- Lake County
- Feather River
- Karuk
- United Indian Health
- Sycuan
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Clinic Sites With Retinal Cameras

- Chapa De
- Indian Health Council
- San Manuel
- Warner Mtn
- Sonoma County
- Shingle Springs

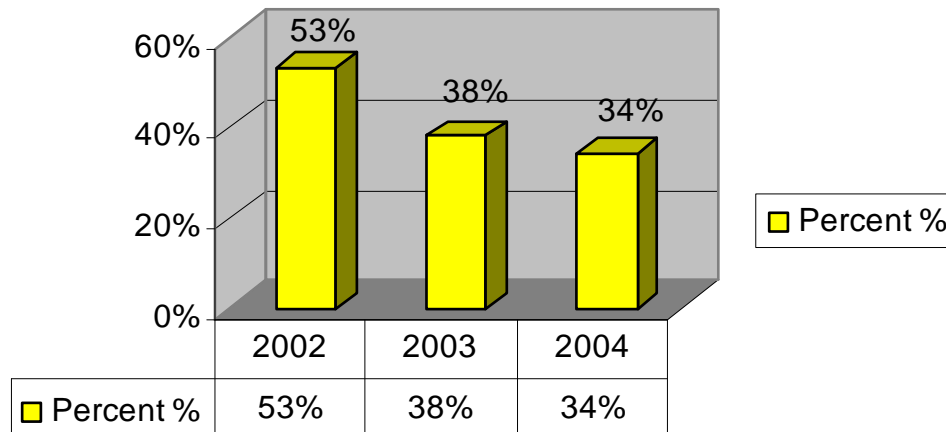
THANK YOU



Tele-Endocrinology Visit

- One Hour
 - 45 minutes with Specialist
 - 15 minutes with Specialist, Local Provider & Patient
- Care Plan Devised

Hgb A1c > 8 Overall



A Closer Look

- 49 People
- American Indian
- At least 3 HgbA1c's Pre and Post Tele-Endo Visit
- 65% (32) Had an Average Decrease in Their HgbA1c of 2.5 points


A Closer Look

- 41% HgbA1c < 7.5
- 38% HgbA1c < 7.0

United Kingdom Prospective Diabetes Study (UKPDS)

- Reports that for every *1 percentage point drop* in A1C (e.g. from 9 percent to 8 percent), there was a 35 percent reduction in the risk for diabetes-related complications.
- What's more, each 1 percentage point drop also lowered the risk of fatal and nonfatal heart attacks by 18 percent.

What Made the Difference?

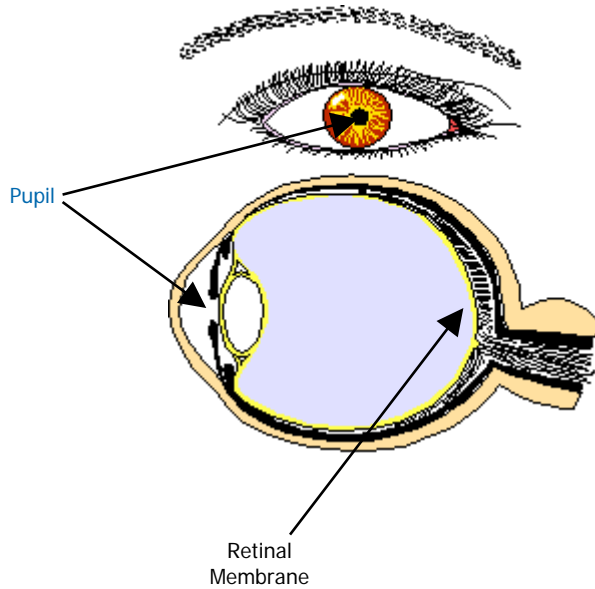
- Focus on Diabetes
 - Third Party Intervention
 - Insulin recommendation
- 
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Tele-Ophthalmology



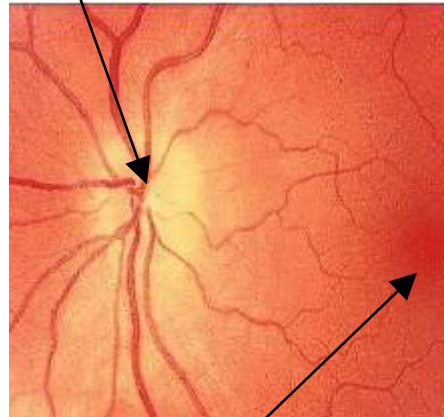
Eye Care Education



Optic Nerve and blood supply enters and exits here.

Picture of retinal membrane looking into the pupil. That is sent to the Ophthalmologist for evaluation

Normal Membrane



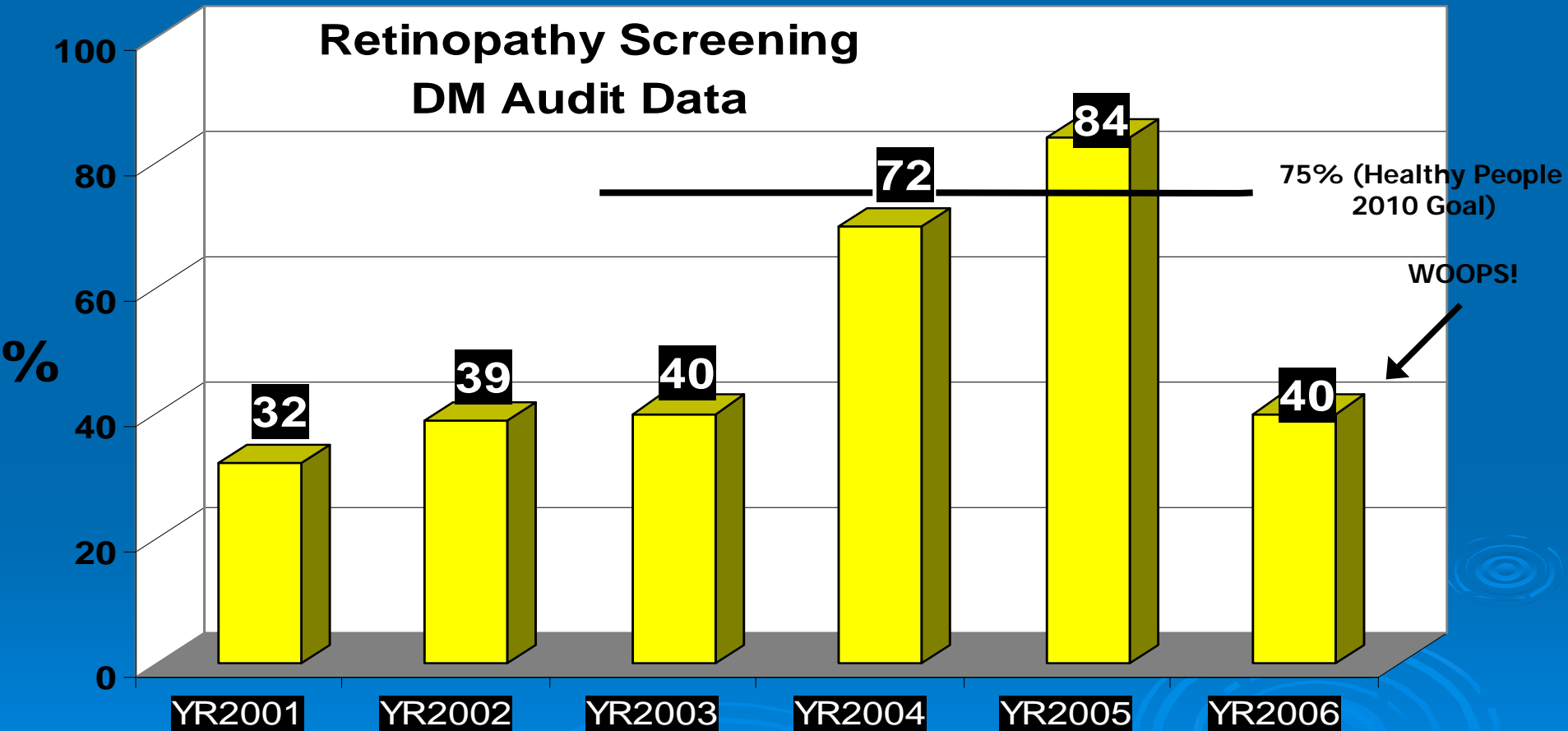
Macula (the center of vision)

Abnormal Membrane (Diabetic Retinopathy)



Prevention of Blindness

Measuring Effectiveness Tele-Ophthalmology



*Year One

6 previously Undiagnosed Cases of Diabetic Retinopathy Discovered

Email October 6th 2004

From: Moore, Kelly (NPABQ)

Subject: RE: California SES Documents

- California Area exceeded the GPRA performance targets for the diabetes indicators.
- In addition, their Retinal Imaging tele-medicine program has resulted in an increase of 232% in screening for diabetic retinopathy at the 13 sites where this has been deployed.
- Like the Joslin Vision Network, this is a model best practice approach for screening for eye disease that should be shared with other Areas.
- Their leadership in GPRA+ is exemplary and is seen in their diabetic GPRA+ findings for the national GPRA report.

Kelly R. Moore, MD
Captain, U.S. Public Health Service
Clinical Consultant
IHS Division of Diabetes Treatment and Prevention
5300 Homestead Road NE
Albuquerque, NM 87110

Barriers?

How to Handle them

- Changing the Way We Do Business
 - Threat to Your Providers
 - Threat to Local Specialists
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- The background of the slide is a solid blue color. In the lower half, there are several decorative elements consisting of concentric circles, resembling ripples in water. These circles are light blue and vary in size and opacity, creating a subtle pattern.

Patient Buy-In

- Fact Sheets



Tribal Health Center (RVIHC) Telemedicine Fact sheet

Psychiatry

WHAT IS TELEMEDICINE?

Telemedicine allows you to visit with specialist physicians that may be hundreds of miles away. Using “video conferencing technology”* a “real time” visit with a physician anywhere in the world is possible. The specialist is supplied with your personal health information i.e. current labs, vital signs, medical history and can then visit with you about your care. The specialist will make recommendations that include new ways to improve your care.

***WHAT IS VIDEO CONFERENCING?**

Video conferencing consists of a camera mounted on a TV screen both in your doctor’s office and in the specialist’s office hundreds of miles away. Video and audio is transmitted so that you can see and speak with your specialist about your health problems in “real time” as if the physician specialist is in the room.

WHY AM I RECEIVING CARE VIA TELEMEDICINE?

There are great benefits to receiving care via telemedicine. A visit with a Psychiatrist would normally require a ten (10) hour round trip to Sacramento or San Francisco. Telemedicine saves time and money for you and the clinic. You will be getting care from highly qualified specialists who work at major medical centers.

WHAT KIND OF CARE DOES A PSYCHIATRIST OFFER?

A psychiatrist can offer help with medication suggestions, evaluation of your symptoms and provide or recommend appropriate counseling.

WHAT WILL THE VISIT BE LIKE?

Your first visit may take about forty-five (45) minutes; the specialist will want to get to know you. He may ask you questions about your health habits, your family and other aspects that may affect your condition. He may ask questions you have been asked in the past because he hasn’t met you before.

At the end of each visit your primary care physician will consult with the specialist and then meet with you to discuss any changes in your care i.e. medication changes, labs.

WILL I BE ABLE TO ASK QUESTIONS?

Yes, we invite you to ask questions. Please write down any questions you have about your condition, medication or other treatments and the specialist will take the time to answer them.

Lastly: be sure to make a follow-up appointment with your primary care physician before you leave the clinic!

Your appointment date: / / DAY: _____ TIME: _____

IMPORTANT: PLEASE CALL US AT LEAST 48 HOURS IN ADVANCE TO CANCEL YOUR APPOINTMENT SO THAT WE MAY SCHEDULE ANOTHER PATIENT FOR THIS VALUABLE VISIT

Community Buy-In

- Health Fair
- Newsletter
- Meet and Greets; All Staff

How Will You Develop Buy-In?

- List Barriers
- How will you approach:
 - Providers
 - Patients
 - Community
- Spin off Activity?

