Telemedicine in Metabolic & Bariatric Surgery

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Disclosures:

• Apollo Endosurgery - Faculty Member
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• Obesity is a chronic disease and its treatment requires close follow-up to accurately assess the efficacy and durability of any treatment strategy.

• It is widely accepted that bariatric surgery patients require lifetime follow-up for durable weight loss, co-morbidity changes, and nutritional deficiencies.

(Brethauer, et al., Surgery for Obesity and Related Diseases, 2015)
Over the past few decades research has found a reciprocal relationship between long-term follow up and weight loss after bariatric surgery.

(Brodia, S. Archives of Clinical Gastroenterology 2016)
• **Standard 5.3 Long-Term Follow-Up**
  - Centers must document a process is in place to achieve long-term follow-up of the metabolic and bariatric surgery patients.

• **Standard 5.4 Support Groups**
  - Centers must provide regularly scheduled organized and supervised support groups to metabolic and bariatric surgery patients via either in person, Web-based or teleconferenced meetings.
Challenges for Bariatric Follow Up

• Higher deductibles and co-pays
• No insurance or bariatric coverage
• Geographic isolation/travel time
• Weight recidivism
• Life ........
Current Landscape of Healthcare

• Traditional healthcare means patients wait for appointments, sometimes miss work, and often incur travel expenses.

• Patients are expected to discuss all their medical conditions and concerns in 15 minutes. This is not appealing to a patient and is equally difficult for the provider.
To stay viable in healthcare today, providers must implement innovative methods of delivering healthcare that are patient centric and increase engagement, while showing a clear differentiation in an increasingly competitive market place.

You must couple this with enhancing revenue and reducing costs.
A Paradigm Shift of Patient Expectations

- The healthcare industry is becoming increasingly consumer-driven.

- To build and maintain patient loyalty and engagement in an era when consumers can shop around for the best value, healthcare organizations must not only provide quality care but also surpass patient expectations.

- Trust must be earned throughout the continuum of care and patients must perceive value.
A Paradigm Shift of Patient Expectations

• Be proactive in meeting patient’s needs - anticipating their needs when possible and responding quickly to their requests.

• Demonstrate empathy for patients and their families by addressing patient needs throughout their journey.

• Ensure proper communication from all providers across the continuum of care.
• Our society is evolving at a blistering pace and technology is the catalyst.

• Consumers our using technology more and more everyday.

• Internet & mobile technology have become part of everyday life.
  - 95% of Americans have a cellphone
Technology is Changing How Society Communicates and Interacts

- **Social Media:** Has completely redefined the way we build and maintain relationships.
  - **Facebook**
    - 1.13 billion daily active users on average.
    - Daily, each user spends an average of 20 mins.

- **Smart Phones:** Mobile has also become the most popular content consumption platform as it has now passed up newspaper and magazine readership (combined)
You may not be contemplating becoming an Uber driver any time soon, but the *Uberization* of work may soon be coming to your chosen profession. It represents the rise of the so-called “on-demand economy.”

*Uberization* has its benefits: Technology could make your work life more flexible, allowing you to fit your job, around your schedule, rather than vice versa.

The movement away from old-fashioned jobs requires us to rethink workplace benefits.
Changing Landscape for the Delivery of Healthcare

• With more than 8 billion mobile devices in the world today, innovation and technology will greatly impact how providers and patients interact to meet healthcare needs.

• A recent Harris Poll indicates that 64% of patients are likely to engage in a virtual visit, if available with their own provider or health system.
Telemedicine as an Adjunct to Traditional Care Model

• Telemedicine is not a replacement for onsite or hands on care, rather it serves as an alternative to the traditional patient encounter.

• Further, it fosters the triple aim model of healthcare that improves health outcomes of patient populations, quality of care, and increases patient satisfaction while reducing their healthcare costs.
Solutions to Bridge the Gaps in Order to Increase Access To Care

- Telemedicine or Virtual Care is the use of medical information exchanged from one site to another via electronic communication to improve a patient’s clinical health status.

- It includes a variety of applications and services using two-way video, email, smart phones, wireless tools and other forms of telecommunications technology.
Telemedicine is not a new concept rather technology and societal demand are driving the movement.

An 1879 article in *The Lancet* discussed the use of the telephone to reduce unnecessary office visits.

*(The Lancet, vol. 114)*
Telemedicine

- It can be utilized in a variety of ways:
  - Video-conferencing.
  - Transmission of still images.
  - Benefits and Uses
    - Remote monitoring.
    - Patient education and counseling.
    - Pre and Post surgical acute care.
    - Health and nutritional care.
Telemedicine
ACP’s position is that telemedicine can potentially be a beneficial and important part of the future of healthcare delivery; however it also stresses the importance of balancing the benefits of telemedicine against the potential risks for patients.

Technology is an Advantageous Tool for Supporting Behavior Changes

• Studies have shown that technology interventions for obesity management are effective compared to treatment controls. *(Tate et al. JAMA 2001)*

• This reinforces the importance of follow up in the long-term success after bariatric surgery.

• Technology can help facilitate a gap in care.
Telemedicine in Metabolic & Bariatric Surgery Practice

- It creates an extension of care by reducing barriers.
- Increases practice recognition and distinguishes you from your competitors.
- Enhances revenue and clinical workflow.
- Opens up in office schedule for more complex patients.
- Community Outreach and Education.
- Support Groups.
Telemedicine or Virtual Care Model

The Ideal Virtual Model of Care

- Pre-Op Screening
- Health Maintenance
- Post-Op Care
- Support Groups
Telemedicine or Virtual Care Model

The Ideal Virtual Model of Care

Medical Management  Behavior Modification  Touch Points for Accountability  Support Groups
Post- Op Care

• Traditional immediate postoperative care can be augmented via telemedicine.

• The next day, post-procedure follow up is personalized and convenient. The patient may schedule an appointment with the nurse or provider instead of the traditional follow up call.

• The provider or RN can visualize the patient, ask questions and assess how he/she is doing after the procedure.
• Long-term post-operative care and long-term medical management is critical for patients’ successful outcomes.

• Patients can receive improved post-operative care through a virtual platform. Patients may be seen post-operatively for wound assessments, nutritional counseling, medication management, ordering of diagnostic testing or therapies, and lifestyle coaching—all lending to improved outcomes and demonstrated healthcare costs savings.
• After an initial visit to the practice, medical management of the metabolic patient can be tailored to meet the patient’s needs.

• Successful outcomes with behavior modification related to weight loss require frequent touch points with the patient. In addition to education around nutrition and exercise, they need support with implementation of these plans into their daily lives.

• Coaching and counseling are an essential aspect to sustaining these changes, and a telemedicine platform gives patients the access they need for monitoring and modifying the treatment plan.
Bariatric and Metabolic Support Groups

• Takes away geographical & travel barriers.
• Ability to reach more patients within minimal time commitment.
• Can offer smaller sub-support groups.
  ▪ Procedure specific, duration from surgery, etc.
• Control of the support and education your patients are receiving. If they aren’t coming to you for help, where are they going?
• Meets MBSAQIP Requirement: 5.4
Community Outreach

• Serves as a marketing arm for your practice by attracting new patients and expands your geographic visibility in key local and remote areas.

• Patients are looking for solutions and want to have access to their own providers more than ever before.

• The ability to offer telemedicine will enhance your clinical workflow, revenue opportunities and give your program a competitive edge through marketing these services.
Have you tried weight loss products, but just can’t seem to lose the weight?

We are here to help. We offer daily clinic and easy to use Virtual Care. You need us and we can be there, even in the comfort of your home to help you reach your weight loss goals.

Go to Dr. Smith’s website at www.dr.smith.weightloss.com to learn more about our unique solutions.
• Evaluate Needs and Identity Patients.
• Develop Care Services Plan.
• Develop Business and Marketing Models.
• Plan Technology.
• Train Personnel.
• Test Clinical Care and Technology Plans.
• Evaluate Outcomes and Grow.
Evaluate Practice Needs

• Evaluation of needs is the most critical step in telehealth planning. Decisions made in this step will affect the entire program. As a planner in the organization, you will answer the question “Why do we need telemedicine?” You and your colleagues should begin by first considering the patients that you serve.

• Patient needs: Telemedicine can bring specialty healthcare services to the citizens of communities in need.
The next consideration in evaluating needs is the doctors, nurses, and other healthcare providers.

Telemedicine should not be a detriment to the financial status of the organization. It should be planned so that its return on investment to the organization will be realized.

THE POINT: Identify the problems that may be solved using telemedicine.
## Analysis

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<th>Type of patient</th>
<th>Individual appt</th>
<th>Price point for ind. Appt.</th>
<th>Group appt.</th>
<th>Price point for group appt.</th>
<th>Additional Comments</th>
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<td>No</td>
<td>n/a</td>
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<tr>
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<td>n/a</td>
<td>Not tech savy, likes personal approach</td>
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<tr>
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<td>Yes</td>
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<tr>
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<tr>
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<td>35</td>
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<td>10</td>
<td>Would pay co-pay amount for appt.</td>
</tr>
<tr>
<td>Post-op</td>
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<tr>
<td>MWL</td>
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<td>20</td>
<td>Yes</td>
<td>10</td>
<td>Use as every other office visit</td>
</tr>
</tbody>
</table>

**Price point for ind. appt.**

| MWL             | 30                          | 19                          | Use as every other office visit Would pay co-pay amount for appt. |

**Price point for group appt.**

| MWL             | 20                          | 19                          | Use as every other office visit Would pay co-pay amount for appt. |

**Max = 75 / Min = 20**  
**Max = 40 / Min = 10**
Develop A Care Service Plan

Consider the needs identified in the previous step, determine which services will be offered, and how they will be delivered using telemedicine.

- Source of medical services through telemedicine - (who are your clinical assets?)
- How will those services will be delivered?
- Location of the providers and the patients?
- Guidelines and protocols for delivering services?
- Telemedicine technology features used in delivering the services?
Developing a business model is a critical step that is often omitted, but is necessary for predicting sustainability of the program.

- Identify all possible increases and decreases in cost, increases in revenue and risk assessment that will be impacted by the telemedicine program.

- Reimbursement from CMS/Commercial payers is complex.
Develop A Business Model and Risk Analysis

- Identify state laws regarding telemedicine
- Identify state licensure for regulations
- Develop Telemedicine Program Policies:
  - Consenting to Treatment
  - Notice of Privacy
  - Terms of Use
- Consult your malpractice carrier
A marketing plan should be included in the business model. It is a part of this step since marketing typically has a cost, and the success of the marketing plan will impact utilization and revenues.

The marketing plan should include communication to leaders of the community, patients, healthcare providers, and other healthcare organizations.
Plan for Technology

The technology planning process should begin with a review of the priorities you listed in Step 1 (Evaluating Needs)

- Functions/technology needed by the patient?
- Functions/technology needed by the healthcare provider?
- After a specification is written, vendors can be invited for demonstrations and performance testing of their products.

THE POINT: The needs of the program drive the technology, don’t try to fit the needs into the technology.
Train Personnel

• Develop a policy and procedure manual based upon previous steps.

• Develop a training plan and orientation packet for providers and staff members.

• Identify “super-users.”

• Implement training plan and encourage early adoption by staff.
Test Care and Technology Plan

• Should be tested by performing a pilot program with a limited number of patients and staff members (early adopters).

• This knowledge could be used to revise the clinical protocols, the business model, and other parts of the telehealth plan.
Think of three target beneficiaries in the planning process, and identify 3 related sets of outcomes:

- Important to patients
- Important to providers
- Important to program

• Outcome data will be important in evaluating the results, adjusting the operation of the program, and planning the future of the program.
Lessons Learned

• Must embrace early adopters.
• Must create value and excitement.
• Providers and staff must promote and encourage usage.
• Providers and staff must test within the program after training.
• Have training and implementation schedule for all staff.
Lessons Learned

• Create Patient Education
  ▪ FAQ sheets.
  ▪ Quick users guide.

• Start Slowly:
  ▪ Set realistic expectations.
  ▪ All providers must embrace it.
  ▪ Scheduling patients.
  ▪ Services provided & time slots.
  ▪ Gradually expand services and marketing.
Resources

• American Telemedicine Association
  http://www.americantelemed.org/policy/state-policy-resource-center#.V-_DbWcVA6t

• Telehealth Resource Center
  http://www.telehealthresourcecenter.org/legal-regulatory

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Questions

See us over video visit, you will.