Two Decades of Telehealth at Cherokee Health Systems:
Clinical, Operational & Financial Perspectives
Our Mission...

To improve the quality of life for our patients through the blending of primary care and behavioral health.

Together...Enhancing Life
Cherokee Health Systems

Last Fiscal Year:

72,911 Patients
383,230 Services
16,690 New Patients

Number of Employees: 723

Provider Staff:

Psychologists - 45
Primary Care Physicians – 22
NP/PA (Primary Care) – 58
Community Workers – 40

Cardiologist - 1
Nephrologist - 1
Dermatologist - 1
OB/GYN - 3
Pharmacists - 12

Psychiatrists - 9
NP (Psych) - 15
Social Workers - 58
Dentists – 3
Strategic Emphases

- Blended behavioral health and primary care
- Go where the grass is brownest
- Outreach and care coordination
- Telehealth
- Training healthcare providers
- Value-based contracting
- Healthcare analytics
What Was Happening When We Implemented Telemedicine?
Clinical Applications

- Primary Care
- Specialty Mental Health
- BHC Consults
- Pharmacy
- Discharge/Aftercare Planning
- Mobile Crisis
- Mental Health Hospital Admission (Second Certification)
- Interpretation
- Treatment Teams
- Supervision
- Hypertension Groups
- Nutritional counseling
- Community Health Coordinators
- Parent-Child Interactive Therapy
- Online care of acute Primary Care and Behavioral Services (Future Service)
Telemedicine In Action
# Service Volume CY2018

<table>
<thead>
<tr>
<th>Visit Type</th>
<th>Patients</th>
<th>Visits</th>
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<tbody>
<tr>
<td>Therapy/BHC</td>
<td>91</td>
<td>180</td>
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<tr>
<td>Psychiatry</td>
<td>3,627</td>
<td>10,261</td>
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<td>Primary Care</td>
<td>1,610</td>
<td>2,693</td>
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<td>Other</td>
<td>87</td>
<td>207</td>
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<td><strong>Total</strong></td>
<td><strong>5,333</strong></td>
<td><strong>13,341</strong></td>
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Initial Challenges

• Expensive video equipment
• Complicated network infrastructure setup required by IT professionals
• Inadequate and expensive internet bandwidth
• Dedicated office space for telemedicine setup
• Provider buy-in
• Training providers and nurses on workflow
Current Environment

• Inexpensive plug and play video equipment (Webcams, iPads, iPhones)
• Easy to use cloud based video services (Zoom and Polycom)
• Cost effective broadband internet available in most rural and urban locations
• Dedicated office space no longer required
• Providers no longer fear telemedicine technology
• Telemedicine visits are part of everyday workflow
Section 190 - Telehealth Services

Clarification - RHCs and FQHCs are not authorized to serve as a distant site for telehealth consultations, which is the location of the practitioner at the time the telehealth service is furnished, and may not bill or include the cost of a visit on the cost report. This includes telehealth services that are furnished by a RHC or FQHC practitioner who is employed by or under contract with the RHC or FQHC, or a non-RHC or FQHC practitioner furnishing services through a direct or indirect contract.
Lessons Learned & Strategies for Success

• Patients always point the way.
• Good technology is essential.
• Management support is key.
  • Billing can be difficult.
• Advocating for policy change is important.
  • Keep it simple.
Questions?