Telehealth in Community Health Centers: The Weitzman Institute at CHC, Inc.

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Disclosure

• We have no financial or commercial conflicts of interest to report regarding this educational presentation
Community Health Center, Inc.

CHC Profile

- Founding year: 1972
- Primary care hubs: 15; 204 practice locations
- Annual budget: $100m
- Staff: 1,000
- Patients/year: 140,000 (est. 2017)

CHC Locations in Connecticut

Three Foundational Pillars

1. Clinical Excellence
2. Research and Development
3. Training the Next Generation
The Weitzman Institute works to improve primary care and its delivery to medically underserved and special populations through research, innovation, and the education and training of health professionals.
Moving Knowledge, Not Patients
Telehealth Strategies to Strengthen Primary Care
Project ECHO

“The mission of Project ECHO is to develop the capacity to safely and effectively treat chronic, common and complex diseases in rural and underserved areas and to monitor outcomes.”

Dr. Sanjeev Arora
University of New Mexico
Using Project ECHO to tackle “Hot Spots”
368 practices
864 ECHO sessions
2,859 case presentations
Primary care providers from 36 states, PR, and DC
- 918 Medical Providers
- 323 Behavioral Health Providers
- 519 Care Team Members

Weitzman Institute National ECHO Learning Network

The Weitzman Institute is a program of Community Health Center, Inc.
Middletown, Connecticut USA | www.weitzmaninstitute.org
Expanding Reach: Project ECHO Medication Assisted Treatment

Table 5. Hierarchical Multiple Regression Analysis was conducted using SPSS to determine the relationship between participation in ECHO and number of patients prescribed buprenorphine by ECHO providers.

<table>
<thead>
<tr>
<th>Correlations</th>
<th>Pearson Correlation</th>
<th>Change in Number of Patients (r)</th>
<th>Time on ECHO (r)</th>
<th>Sessions Attended (r)</th>
<th>Cases Presented (r)</th>
<th>Cases Heard (r)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Change in Number of Patients</td>
<td>1.000</td>
<td>0.618**</td>
<td>0.427*</td>
<td>0.568**</td>
<td>0.402</td>
<td></td>
</tr>
<tr>
<td>Time on ECHO</td>
<td>0.618**</td>
<td>1.000</td>
<td>0.710*</td>
<td>0.591**</td>
<td>0.680**</td>
<td></td>
</tr>
<tr>
<td>Sessions Attended</td>
<td>0.427*</td>
<td>0.710**</td>
<td>1.000</td>
<td>0.478*</td>
<td>0.486*</td>
<td></td>
</tr>
<tr>
<td>Cases Presented</td>
<td>0.568**</td>
<td>0.591**</td>
<td>0.478*</td>
<td>1.000</td>
<td>1.000</td>
<td></td>
</tr>
<tr>
<td>Cases Heard</td>
<td>0.402*</td>
<td>0.692**</td>
<td>0.980**</td>
<td>0.450*</td>
<td>0.973*</td>
<td></td>
</tr>
</tbody>
</table>

* Statistically significant at p ≤ 0.05; ** Statistically significant at p < 0.001.

*Marwan Haddad, MD, MPH; Woodlyn Joachim, BS; Lauren Bifulco, MPH; Zachary Manville, BGS; Traci Norman, BS; Mandy Lamb, MA

"Addressing the Opioid Epidemic in Primary Care: Expanding Access to Buprenorphine Treatment Using a Federally-Qualified Health Center-based ECHO Clinic." Poster presentation at MetaECHO 2019.
NP Residents began joining the full program in 2015, since then:
- 13 practice sites
- 7 states
- 77 NP Residents
- 4 Postdoctoral Residents
- 43 cases

Resident Onboarding
- Types of cases to submit
- How to submit
- Case scheduling
What Residents Are Doing Differently

Keywords:
- Behavioral health
- Nervous systems
- Trauma conversations
- Psychological approach
- Chronic pain factors
- Medications
- Psychological functioning
- Anxiety management
- Integrative approaches
- Client-centered care
- Multidisciplinary approach
- Holistic types
- Information
- Confidently getting
- Experienced using
- In-house assessing
- Conveying
- Thinking
- Discussing
- Considering
- Contribute
- Conjecture
- Cause
- Understanding
- Learning
- Experiential
- Deeper
- Physical
- Pharmacological
- Helped
- Facilitate
- Focus
- Reorganized
- Developmentally
- Convey
- Ideas
- Concepts
- Reason
- Converting
- Terms
- Modalities
- Tree
- Groups
- Change
- Functioned
- Enhancing
- Experienced
- Using
- Implementing
- Addressing
- Pills
- Medications
- Root
- Types
- Holistic
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- Confidently getting
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- Facilitate
- Focus
- Reorganized
- Developmentally
Weitzman Learning Academy provides evidence-based strategies to support practice transformation and culture change through dynamic coaching & learning opportunities to address needs or goals in specific focus areas.

(Examples of focus areas include; Implementing or expanding a Medication Assisted Treatment program, Integration of Behavioral Health Services, Quality Improvement Training, Practice Transformation Coaching)

**Learning Methods:**
- Customized coaching and consultation
- Collaborative site visits
- In-person formal training events
- Interactive virtual training sessions
- Dynamic webinars
- Learning Collaboratives

For more information contact: WeitzmanLearning@chc1.com
How CeCN Works

Community eConsult Network, Inc.

Any practice, whether large or small, rural or urban, can benefit from eConsults. CeCN has a varied and growing client base which currently includes:
- Indian health services
- Correction facilities
- ACOs
- Community health centers
- Primary care networks
- Individual primary care practices
- Teaching programs

Primary care practice sends consult

CeCN processes consult and forwards it to specialists

Primary care practice receives consult

CeCN sends consult back to the PCP within 2 business days

Specialists review consult

Specialists consult added to EHR

CeCN now offers eConsults in over 20 specialties including:
- Pediatrics
- Medical
  - Cardiology
  - Dermatology
  - Endocrinology
  - Gastroenterology
  - Infectious Disease
  - Nephrology
  - Neurology
  - Orthopedics
  - Pain Medicine
- Surgical
- Behavioral health

CeCN specialty areas continue to expand to meet client needs.
Up to 35% of all primary care patients are referred to specialists annually.
Up to 45% of these referrals DO NOT require a face-to-face visit.
Dermatology Referral PRE-eConsults

1258

Received an appointment
744 (59%)

Did not Receive an appointment
514 (41%)

Seen by Dermatologist
139 (11%)

Missed Appointment
605 (48%)
Dermatology Referral POST-eConsults

1129

F2F
629 (56%)

Completed consult (e+F2F)
Dermatologist
746 (66%)

eConsult
500 (44%)

No appointment
383 (34%)
Reduced Cost Of Specialty Care Using Electronic Consultations For Medicaid Patients

ABSTRACT Specialty care accounts for a significant and growing portion of year-over-year Medicaid cost increases. Some referrals to specialists may be avoided and managed more efficiently by using electronic consultations (eConsults). In this study a large, multisite safety-net health center linked its primary care providers with specialists in dermatology, endocrinology, gastroenterology, and orthopedics via an eConsult platform. Many consults were managed without need for a face-to-face visit. Patients who had an eConsult had average specialty-related episode-of-care costs of $82 per patient per month less than those sent directly for a face-to-face visit. Expanding the use of eConsults for Medicaid patients and reimbursing the service could result in substantial savings while improving access to and timelines of specialty care and strengthening primary care.

The increase in specialty referrals for patients with Medicaid makes a substantial contribution to year-over-year health care cost increases and has significant economic consequences for state budgets. Specialty care is significantly more expensive than primary care. Limited access compounds the problem by delaying needed treatment and increasing the use of urgent care and emergency departments.

Advanced payment models are rapidly expanding across the country and are providing increased incentives for primary care providers to find ways to increase value and reduce the cost of care. Many cost-saving interventions in primary care have focused on enhancing access in order to reduce unnecessary emergency department visits or on improving care coordination and hospital discharge follow-up to reduce costly hospitalization and rehospitalization. Less attention has been paid to finding strategies to reduce the need for specialty consultation despite the fact that a decision to refer to a specialist is one of the most common, and likely most expensive, decisions made by primary care providers each day.

Improving Pain Care with Project ECHO in Community Health Centers

Daren Anderson, MD; Janita Zlateva, MPH, Benett Davis, MD, Lauren Bifulco, MPH, Tierney Giannotti, MPA, Emil Coman, PhD, Douglas Spegman, MD, MSPH, FACP

Pain Medicine, pnx187, https://doi.org/10.1093/pmj/pnx187
Published: 04 August 2017

Abstract
Objective. Pain is an extremely common complaint in primary care, and patient outcomes are often suboptimal. This project evaluated the impact of Project ECHO Pain videoconference case-based learning sessions on knowledge and quality of pain care in two Federally Qualified Health Centers.

Design. Quasi-experimental, pre-post intervention, with comparison group.

Setting. Two large, multisite federally qualified health centers in Connecticut and Arizona.

Subjects. Intervention (N = 10) and comparison (N = 10) primary care providers.
Thank You!

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