Virtual Care: Opportunities and Challenges for Underserved Populations

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Meet Our Speakers

Jonathan Nebeker, MD
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Microsoft
Conflict of Interest

Jonathan R. Nebeker, MS MD

Has no real or apparent conflicts of interest to report.

Would like to acknowledge

- Salt Lake GRECC and Office of Rural Health
- Anywhere to Anywhere: Use of Telehealth to Increase Health Care Access for Older, Rural Veterans
  Hillary D. Lum, Kathryn Nearing, Camilla B. Pimentel, Cari R. Levy, William W. Hung
  Public Policy & Aging Report, 2020, Vol. 30, No. 1, 12–18
Conflict of Interest

Kathleen McGrow, DNP, MS, RN, PMP

Salary: Microsoft Corporation
Agenda

- Introductions
- Speakers session:
  - Kathleen McGrow, DNP, CNIO
    Microsoft
  - Jonathan R. Nebeker, MS MD, Acting National CMIO
    US Department of Veteran Affairs
- Panel Discussion
- Audience Q&A
Learning Objectives

- Identify trends in virtual care and opportunities in implementing telemedicine and how these apply to safety net settings
- Describe significant policy and payment changes regarding telemedicine
- Recognize approaches and potential concerns for safety net populations
Trends in virtual care

- Change in Reimbursement
- Direct to consumer
- Technology advancements
The rural broadband divide: An urgent national problem that we can solve

- The world is becoming more digital
- Participating requires a high-speed broadband connection to the internet
- According to the Federal Communications Commission (FCC) broadband is unavailable to roughly 25 million Americans, more than 19 million of which live in rural communities
Live 3 miles apart in rural Delaware
Lots of older veterans in rural setting

- **12m** Veterans over 65
- **6m** Veterans in VHA over 65
- **2.7m** Rural Veterans

- **39%** in rural America
- **23%** in rural America
- **49%** over 65

Some data from this paper: *Anywhere to Anywhere: Use of Telehealth to Increase Health Care Access for Older, Rural Veterans*  
 Hillary D Lum, MD, PhD; Kathryn Nearing, PhD; Camilla B Pimentel, PhD; MPH; Cari A Levy, MD, PhD; William W Hung, MD, MPH  
Geriatrician to >65 mismatch worse in VA

7,000
Geriatricians
In America

10% in rural America

290
Geriatricians
In VHA

0% in rural America

Some Data from this paper: Anywhere to Anywhere: Use of Telehealth to Increase Health Care Access for Older, Rural Veterans
Hillary D Lum, MD, PhD, Kathryn Nearing, PhD, Camilla B Pimentel, PhD, MPH, Cari R Levy, MD, PhD, William W Hung, MD, MPH
<table>
<thead>
<tr>
<th>Telehealth Modality</th>
<th>Description</th>
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<tbody>
<tr>
<td>Clinical video</td>
<td>Synchronous, real-time visits between patients and clinicians via a communications link. Rural Veterans at home or at local VHA Community-Based Outpatient Clinics interact with VHA primary care physicians or specialists through a secure video platform.</td>
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<tr>
<td>Store and forward</td>
<td>Asynchronous encounter where providers electronically send images, sounds, and videos to be evaluated by experts who may be thousands of miles away. It does not require the simultaneous presence of both parties.</td>
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<td>Remote monitoring</td>
<td>Clinicians and case managers use simple technology to remotely monitor health data from rural veterans’ homes.</td>
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Criteria for Video on Demand (VoD)

Patient or caregiver has:

• email, computer, smartphone or other technology

• confidence to use these technologies.
Home Visits

When criteria for VoD are not met

VA can provide tablet
GRECC Connect

• Geriatric Research and Education Clinical Centers
• 16 nationally with Connect program
• 107 spoke clinics average of 96 miles away from hub VAMC
Hubs with these staff members

12 sites represented
Questions

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