Michigan Cancer Consortium

Virtual Care Offerings for Oncology

Henry Ford Health System

November 7, 2018
Core Services:

- **Five** acute med/surg and
- **Two** behavioral health hospitals
- Henry Ford Medical Group
  - 27 Medical Centers
  - 1200 physicians & scientists
- Outpatient Dialysis
- Home Health Care
- Health Alliance Plan (HAP) – Insurance Provider
Henry Ford Cancer Institute

The Henry Ford Cancer Institute is creating more hope for patients around the world. With one unified team of cancer specialists and innovations ranging from precision medicine to MRI-guided radiation therapy, we deliver one-of-a-kind cancer treatments.

Our 900 highly skilled doctors, researchers, nurse navigators and other healthcare specialists provide world class cancer care to thousands of patients each year. With five hospital locations, six additional outpatient cancer centers and dozens of aligned doctor’s offices, the Commission on Cancer designates us as an integrated network and recipient of the 2016 Outstanding Achievement Award.
Brigitte Harris Cancer Pavilion

- New 6-story, 187,000-square foot Detroit cancer facility
- Destination for comprehensive cancer care:
  - ambulatory cancer treatment
  - precision medicine
  - clinical trials
  - enhanced support services for cancer patients and caregivers
"If you ask the customer he would have asked for a faster horse"
– Henry Ford
Virtual Care Mission

To improve the value of healthcare by leveraging virtual care to impact the customer experience, access, cost reduction, efficiency, and clinical quality.

Technology + Doctor ≠ Virtual Care

Experience * (Technology + Operations + Build + Engagement) = Virtual Care
Virtual Care Capabilities

- MyChart Video Visit*
- Clinic to Clinic Telemedicine Visit*
- eVisit*
- Virtual Post Op Visit
- Remote Monitoring
- MyChart Messaging

*Some insurance payers will reimburse for these services

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Scheduled appointment, patient can “see” their provider without going to the clinic.

Video call using patient personal device
- MyChart mobile app from their smartphone or tablet
- MyChart website from laptop or desktop computer (with a web camera)

Insurance Coverage – Some payers cover
- Not covered by Medicaid or non-ACO Medicare A&B
MyChart Video Visit Programs

- Survivorship
  - 2 providers servicing 3 clinic locations
  - Available to any patient completing treatment

- OncoStat
  - 10 providers servicing 5 clinic locations
  - APPs available to patients during course of treatment

- Radiation Oncology
  - 2 providers servicing 2 clinic locations
  - Available for consults and post-procedure visits
Clinic to Clinic Telemedicine Visit

Video Call: Real-time Audio and Video

- Similar to a regularly scheduled appointment, but patient will go to one clinic and be connected to a doctor at another distant clinic.
- Patient will check in and be shown to an exam room, and a Henry Ford team member will connect patient to the doctor in real time.
- **Insurance Coverage** – Most payers cover...
Telemedicine Program

- Urology surgical consults referred from clinics outside tri-county area
- Surgeon providing robotic kidney surgeries for patients diagnosed with kidney cancer
- Considerations
  - Connectivity
  - Technology/Equipment
  - Space/Support Staff (tele-presenter) at patient location
  - Medical Licensure & Credentialing of HFHS provider
  - Radiology Images & Medical Records
  - Billing/Claims
Telemedicine Program

- Urology surgical consults – testimonial:

  “This has to be one of the most fruitful and functional telemedicine arrangements. Thanks for your participation. Our staff and patients are very appreciative.”
Telemedicine Program

- Consults performed
  - 2017 = 9
  - 2018 (through August) = 10

- Miles saved
  - 2017 = 3,897
  - 2018 (through August) = 4,330

- Minutes of travel saved
  - 2017 = 3,618
  - 2018 (through August) = 4,020
HFHS Virtual Care Specialties

- Allergy MVV
- Behavioral Health Services (Adult and Geriatric) C2C
- Cardiology eC
- Center for Autism and Developmental Disabilities MVV
- Dermatology C2C/MVV/eV/eC
- Dialysis MVV
- Endocrinology MVV
- ENT (Ear, Nose & Throat) C2C/MVV/VPO
- Functional Medicine MVV
- Gastroenterology (IBD) C2C
- Infectious Disease MVV
- International Travel Medicine C2C
- Nephrology C2C
- Neurology MVV/eC
- Neurosurgery VPO
- Oncology C2C/MVV
- Orthopedics C2C/VPO
- Pharmacy (Medication Therapy Mgmt) MVV
- Preventive Cardiology (Cardiac Rehab) MVV
- Primary Care MVV/eV
- Radiation Oncology MVV
- Reproductive Medicine (IVF) C2C
- Rheumatology C2C/MVV
- Sleep C2C
- Speech Therapy MVV
- Sports Medicine C2C
- Structural Heart Disease C2C
- Thoracic Surgery C2C/MVV
- Tobacco Treatment MVV
- Transplant (Liver & Kidney) C2C
- Urology C2C/MVV
- Vascular Surgery C2C/MVV
- Women’s Health/OB MVV

eV = eVisit
eC = eConsult
MVV = MyChart Video Visits
C2C = Clinic to Clinic Telemedicine
VPO = Virtual Post Op

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Virtual Care Enables Us To:

- Increase/improve access and reach
- Offer alternate access to healthcare
- Track with patient experience and expectations
- Reduce costs (time, travel, convenience, etc.)
- Increase clinician productivity/efficiency

Connecting with customers where, when, and how they want to be reached...

All For You!
Contact Information

Marie Lee
Program Coordinator, Virtual Care

mlee4@hfhs.org
313-870-6249

https://www.henryford.com/services/virtual-care
Advanced Technology in Caring for Cancer Patients Remotely

Geralyn Roobol, LMSW, RN, CMAC
Director Cancer Services, Spectrum Health Cancer Center

Michigan Cancer Consortium Annual Meeting
November 7, 2018
Objectives

- Spectrum Health MedNow Overview
- Spectrum Health TeleOncology
Overview of Spectrum Health

- Spectrum Health is a not-for-profit health system, based in West Michigan and West Michigan's largest employer with over 29,000+ employees.
Overview of Spectrum Health

- Health Plan: Priority Health ~790,000 members
- Spectrum Health Medical Group: >1500 physicians & APPS
- Spectrum Health Hospitals 12 hospitals ~3400 physicians & APPs

- Inpatient and outpatient rehabilitation
- Hospice
- Home Care (VNA, medical home)
- Ambulatory Services, Surgery Centers and Urgent Care ~200 sites
The Spectrum Health Cancer Center

- Provides comprehensive services and a robust clinical research program; only BMT program in West Michigan
- Affiliated with MSU School of Medicine and Van Andel Research Institute
- Leading edge programs & technology

- ~ 4000 analytic cases
- ~ 30% of patients on trials
- >15 sites of service
- Leader in Tele Oncology
Telehealth comes in many forms

- Two-way video
- Email
- Smart phones
- Wireless tools
What is MedNow℠?

- Telehealth program at Spectrum Health that is a fast, convenient and affordable way for patients to receive care using technology to bridge the distance between patient and providers.

- Three areas of focus
  - Direct to Consumer (Direct to Patient)
  - Specialty Care
  - Remote Patient Monitoring

- Two core tools
  - Video visits
  - E visits

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Why?

Consumer Demand

Technological Advancements & Competition

Value Based Care

Cost Savings
Consumer Demand - What Matters Most?

- Low Cost
- On Demand Access
- Convenience
- Local
- High Quality
Remove Geographical Barriers to Care
Requires a New Care Model

Traditional Access Points
- Primary Care Office
- Low Acuity

Consumer-Oriented Access Points
- CLINIC
- Rx

High Acuity
- Emergency Department

Source: Mehrota A et al., “Visits To Retail Clinics Grew Fourfold From 2007 To 2009, Although Their Share Of Overall Outpatient Visits Remains Low,” Health Affairs, August 2012; Health Care Advisory Board interviews and analysis.
What is MedNow℠?

**Direct to Consumer MedNow**
Care is available for low acuity primary care conditions using video visits or eVisits. The patient and clinician are in different physical locations.

**Specialty MedNow**
Allows patients with more serious conditions to have a consultation with a Grand Rapids-based Spectrum Health specialist via a secure video connection from remote clinics and hospitals.

**Remote Patient Monitoring**
Remote monitoring of chronic conditions by way of technology.
Remote Patient Monitoring

- CHF
- COPD
- Diabetes

Goals:
- Reduce hospital readmissions
- Improve QOL
Specialty MedNow<sub>SM</sub>

Allows patients with more serious conditions to have a consultation with a Spectrum Health specialist via a secure video connection from remote Spectrum Health clinics and hospitals.
Specialty MedNowSM

- Oncology
- Bariatrics
- Behavioral Health
- Cardiology
- Diabetes
- Infectious Disease
- Ob/Gyn/NICU
- Orthopedics
- Pediatrics/PICU
- Pulmonary/Sleep
- Vascular
- Wound Care

Over 24 specialties and 90+ Use Cases
Let’s Talk Tele Oncology – Why

- Open up Access
- Physician Satisfaction
- Patient Satisfaction
- Decrease the Overall Cost of Care
Access

- ASCO published its report *The State of Cancer Care in America: 2016*, which detailed a potential workforce shortage of oncologists over the next decade just as the demand for oncology services will be surging.

- Telemedicine or tele-oncology will definitely help mitigate the problem of a physician workforce shortage.

- In addition, the technology allows other populations of physicians, such as retired, disabled, or stay-at-home moms and dads, to continue to use their medical expertise by practicing medicine as virtual consultants as long as they maintain their board certification and keep current through CME courses.
Increase Rural Access

2012 report by the Institute of Medicine for the National Academies, entitled *The Role of Telehealth in an Evolving Health Care Environment* (DOI: 10.17226/13466), found that telehealth drives volume, increases quality of care, and reduces costs by reducing readmissions and unnecessary emergency department visits for rural communities. Through telemedicine, rural hospitals can serve rural patients at better costs and help cut down on the time it takes rural patients to receive care, particularly specialty care.
Tele Oncology – Current Outcomes

- 35, 81 and now 176 YTD
- Slow but now steady growth
- Patient satisfaction – top box currently 91%
- Provider satisfaction – top box currently 91%
  - No difference for either group by age or indication
- In Oncology, physicians are now actively searching for opportunities
  - After exposure to the technology, believe in the potential
  - Physical exam remains a barrier despite available tools
Tele Oncology at Spectrum Health

- Areas of focus determined by:
  - Alignment with strategic plan and areas of growth
  - Potential market
  - Community need
  - Financial feasibility
  - Physician interest/ readiness
Tele Oncology - Model

- Specialty based pre visit reviews are performed by the program coordinator
  - Eligibility for the program
  - Results of imaging

- Originating site is the regional cancer center
  - Schedule patient for a tele oncology visit at both originating and central locations
  - Patient registered and roomed at originating site
  - Originating site bills the technical (facility) fee
Tele Oncology - Model

- Visit begun by physician after the patient is in the room
- Visit performed
- Follow up appointments are made based on physician recommendations
- Physician bills the professional component
Tele Oncology – Areas of Focus

- Psych Oncology
  - Consult to onco-psychiatrist triggered when distress 7-10
  - Tele oncology used for non suicidal high distress regional patients

- Lung Program
  - Lung Nodule follow up appointments
  - Lung Cancer Screening counseling and follow up
  - New patient evaluation for lung nodules
  - Routine follow up from the Lung Cancer multispecialty clinic
Tele Oncology – Areas of Focus

- Heme/ BMT
  - Routine follow up with normal testing
  - Low risk BMT patients at this point
  - Benign Heme
- General Cancer Center Initiatives
  - Medical Genetics consultations - Two studies in 2014 reported in *Journal of Clinical Oncology* indicate that telephone-based education or counseling initiatives can be successful in educating individuals at familial or genetic risk of cancer and in inducing these at-risk individuals to undergo recommended screening (*J Clin Oncol* 2014; DOI: 10.1200/JCO.2013.51.6765, *J Clin Oncol* 2014; DOI:10.1200/JCO.2013.51.3226).
- Survivorship
- Cancer Smoking Cessation counseling and follow up
Partnering with our community resources to provide cancer prevention and education to our underserved areas.

The main topics discussed included:

- Exercise/Physical activity
- Diet/Nutrition
- Family cancer history
- Smoking cessation
- Cancer screening recommendations based on age and gender
- Guests knowing what is normal for their bodies and the need to report changes

The nurse at Mel Trotter follows up with guests after each visit to ensure they have a plan to follow through on recommendations or to help make appointments as needed.
Tele Oncology – Opportunities

- Melanoma
  - Skin Lesion screening: Dermatology is not yet a believer in the technology, despite the high resolution tools, and are worried about risk
  - Melanoma multispecialty team: Dermatologist participation in MST conference from their office
6 Hours & 34 Minutes - Patient Travels to Ludington (if traffic, construction, or weather allow)

10 Minutes - Patient Leaves Office and Returns to Vehicle

15 Minutes - Patient Meets with Specialist

15 Minutes - Patient Waits in Exam Room

20 Minutes - Patient Waits in Waiting Room

10 Minutes - Patient Walks to Specialist's Office

10 Minutes - Patient Parks and Locates Building Elevator

Patient Lives in Marquette, MI

Patient's Household Income is $37,355

Total Time: 14.5 Hours

Traditional Model

Patient Costs

Food Expense: $16.00
Total Gas Expense: $434.16
Wages Lost: $161.64

Total Patient Costs Excluding Any Medical Expenses:

$611.80
Patient Impact

BMT

Patient Lives in Marquette, MI

Patient’s Household Income is $37,355

IRS Mileage Rate of .54 a Mile

Patient’s Appointment in Marquette

Patient Must Take Time Off Work to Attend Appointment

5 Minutes- Patient Travels to Marquette Location

5 Minutes- Patient Travels Home

5 Minutes- Patient Leaves Office and Returns to Vehicle

15 Minutes- Specialist Meets with Patient via Telehealth

2 Minutes- Patient Waits in Exam Room

5 Minutes- Patient Waits in Waiting Room

5 Minutes- Patient Parks and Locates Specialist’s Office

5 Minutes- Patient Waits in Exam Room

5 Minutes- Patient Meets with Specialist via Telehealth

2 Minutes- Patient Leaves Office and Returns to Vehicle

5 Minutes- Patient Travels Home

Total Time: 0.7 Hours

Tele Oncology

Patient Costs

Food Expense: N/A
Total Gas Expense: $1.43
Wages Lost: $12.57

Total Patient Costs Excluding Any Medical Expenses:

$14.00

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**Patient Impact**

**Lung**

- **Patient Lives in Lakeview, MI**
- **Patient’s Household Income is $25,529**
- **IRS Mileage Rate of .56 a mile**
- **Patient's Appointment is with Specialist in Grand Rapids, MI**

**Traditional Model**

**Patient Costs**
- Food Expense: $9.00
- Total Auto Expense: $53.76
- Wages Lost: $36.51

**Total Patient Costs Excluding Any Medical Expenses:**

**$99.27**

**Total Time:** 2.97 Hours

- 49 Minutes – Patient Travels to Hastings (if traffic, construction, or weather allow)
- 10 Minutes – Patient Leaves Office and Returns to Vehicle
- 15 Minutes – Patient Meets with Specialist
- 15 Minutes – Patient Waits in Exam Room
- 20 Minutes – Patient Waits in Waiting Room
- 10 Minutes – Patient Walks to Specialist’s Office
- 10 Minutes – Patient Parks and Locates Building Elevator
- 10 Minutes – Patient Locates Correct Parking Ramp of Specialist’s Facility
- 49 Minutes – Patient Travels to Grand Rapids (if traffic, construction, or weather allow)

**Patient Impact**

*Lung*

Traditional Model

**Patient Costs**
- Food Expense: $9.00
- Total Auto Expense: $53.76
- Wages Lost: $36.51

**Total Patient Costs Excluding Any Medical Expenses:**

**$99.27**

**Total Time:** 2.97 Hours

- 49 Minutes – Patient Travels to Hastings (if traffic, construction, or weather allow)
- 10 Minutes – Patient Leaves Office and Returns to Vehicle
- 15 Minutes – Patient Meets with Specialist
- 15 Minutes – Patient Waits in Exam Room
- 20 Minutes – Patient Waits in Waiting Room
- 10 Minutes – Patient Walks to Specialist’s Office
- 10 Minutes – Patient Parks and Locates Building Elevator
- 10 Minutes – Patient Locates Correct Parking Ramp of Specialist’s Facility
- 49 Minutes – Patient Travels to Grand Rapids (if traffic, construction, or weather allow)
Patient Impact
Lung

Tele Oncology
Patient Lives in Lakeview, MI
Patient's Household Income is $25,529
IRS mileage rate of .56 a mile
Patient's Appointment with Specialist at Spectrum Health Kelsey Hospital via Telehealth
Patient Must Take Time Off Work to Attend Appointment

Total Time: 0.7 Hours

5 Minutes – Patient Travels Home
5 Minutes – Patient Leaves Office and Returns to Vehicle
15 Minutes – Specialist Meets with Patient via Telehealth
2 Minutes – Patient Waits in Exam Room
5 Minutes – Patient Waits in Waiting Room
5 Minutes – Patient Parks and Locates Specialist's Office
5 Minutes – Patient Travels to Spectrum Health Reed City Hospital

Patient Must Take Time Off Work to Attend Appointment

Patient Costs
Food Expense: N/A
Total Auto Expense: $3.35
Wages Lost: $8.59

Total Patient Costs Excluding Any Medical Expenses:

$11.94
Summary

- Feasible
  - Patient and physician satisfaction high
  - Financially sustainable to date
  - Broad number of indications in addition to traditional remote monitoring & primary care uses

- Tele Oncology
  - Can expand market and exposure of subspecialists across broad geography and into rural areas
  - Optimizes patient time and resources
  - Potential not fully realized at this time
Lung Cancer Telehealth