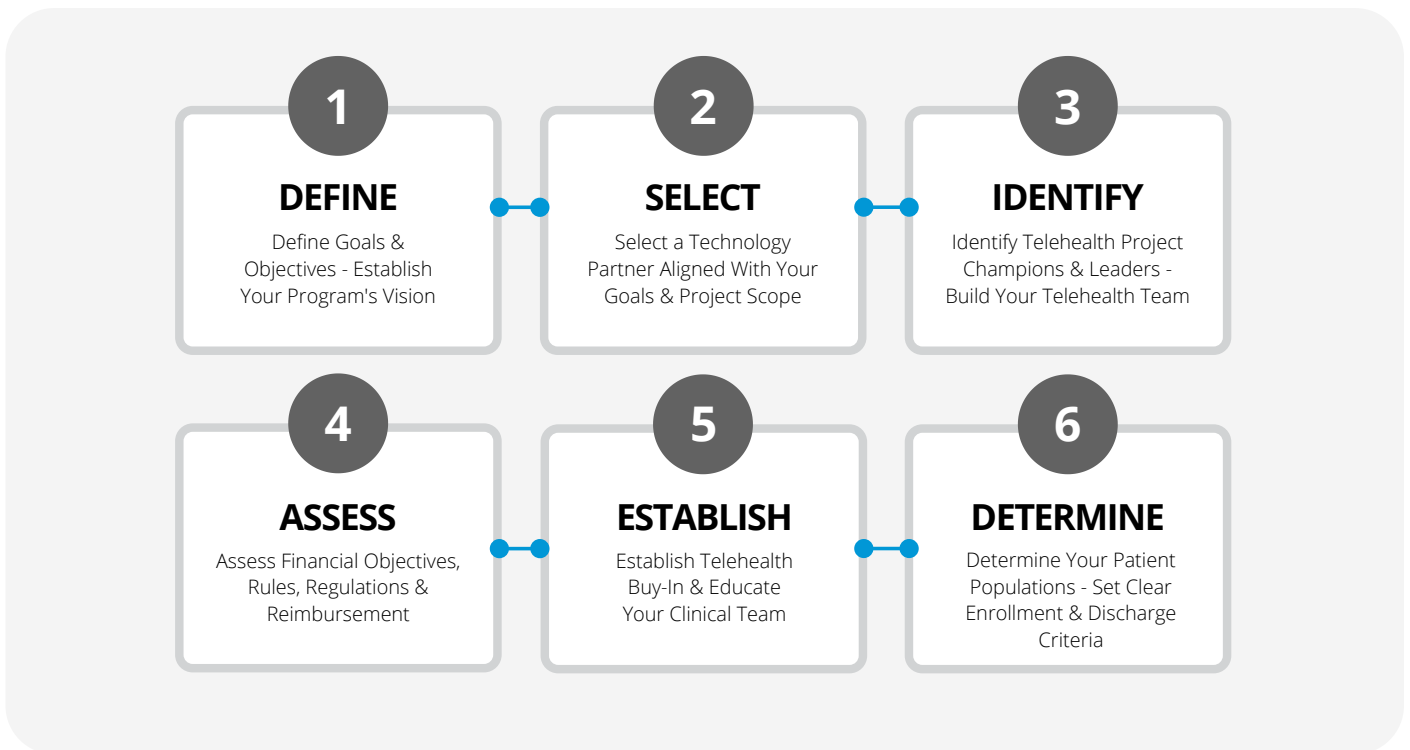# 6 Essential Steps to Building a Scalable and Profitable Telehealth and Remote Patient Monitoring Program

# Introduction

Launching or expanding a telehealth and remote patient monitoring (RPM) program can be an intimidating task. From establishing goals and determining your financial plan, to choosing a technology partner and building clinician and patient buy-in, there are many essential factors to consider to ensure your program is successful.

This guide, informed by HRS health system, home health, and hospice clients across the country, as well as HRS' Client Success, Implementation, Reimbursement and Clinical teams will serve as a resource for your organization as you start the telehealth implementation journey.

**1**

**DEFINE**

Define Goals & Objectives - Establish Your Program's Vision

**2**

**SELECT**

Select a Technology Partner Aligned With Your Goals & Project Scope

**3**

**IDENTIFY**

Identify Telehealth Project Champions & Leaders - Build Your Telehealth Team

**4**

**ASSESS**

Assess Financial Objectives, Rules, Regulations & Reimbursement

**5**

**ESTABLISH**

Establish Telehealth Buy-In & Educate Your Clinical Team

**6**

**DETERMINE**

Determine Your Patient Populations - Set Clear Enrollment & Discharge Criteria

# 1 Define Goals & Objectives - Establish Your Program's Vision

Start with defining your goals and objectives, both big and small. Why are you launching a telehealth program and what are you hoping to achieve? For your program to be successful, it's essential that there is a clear vision backed by quantitative goals (clinical, financial, operational, etc.) as well as a clear understanding of how the telehealth program will contribute to the overall vision and mission of your organization.

Setting goals for your telehealth and remote patient monitoring program does not need to be difficult. Consider the following when setting your goals and objectives:

1. Clearly state in order of precedence the business (financial and operational) and clinical (outcomes and quality) metrics you are setting out to improve
2. Which clinical services and patient cohorts lend themselves to improving those metrics
3. How a telehealth program will be deployed and supported operationally
4. How and when success will be measured and what technology will be implemented

Again, the goals of the telehealth program must be strategically valuable and align with the goals of your organization.

There are many types of telehealth programs, all with different goals and objectives. It is important to focus on a few goals, as opposed to many. Common goals we see include:

- ✓ Reducing readmissions
- ✓ Reducing ED utilization
- ✓ Reducing overall cost of care
- ✓ Increasing staff efficiency
- ✓ Shortening length of stay
- ✓ Improving clinical collaboration with providers and partners
- ✓ Increasing patient and/or caregiver satisfaction and engagement
- ✓ Increase reimbursement from CCM, TCM, and virtual visit programs
- ✓ Improving provider workflow and morale
- ✓ Enabling patients to age in place
- ✓ Improving access to care in rural areas
- ✓ Increasing referrals and in-network utilization

Your program should not set out to fix or improve every organizational metric. Focus on the goals that will provide the most value to your patients, clinicians, and organization as a whole. Once your program is optimized, you can always add more goals, or iterate on your initial ones.

The majority of organizations have different goals for different patient populations. Telehealth and RPM are not a one-size-fits all solution. Regardless of what your goals are, we recommend utilizing the SMART goal model to achieve them. Once you have your goals and objectives in place, establish a cadence for measuring your progress. Depending on the goal, this can be weekly, monthly, or quarterly.

**SMART** goals are:

- ✓ **S**pecific
- ✓ **M**easurable
- ✓ **A**ttainable
- ✓ **R**elevant
- ✓ **T**ime-bound

| | **EX 1:** Home Health Telehealth Program CHF Patients | **EX 2:** Hospital at Home Program Physical Therapy, Surgical Recovery |
|---|---|---|
| **SPECIFIC**<br>Specific goals are well defined and clear on what needs to be accomplished.<br>What outcomes do you need to see in order to consider the goal accomplished? | Reduce readmissions from current 20% to below US average of 14.9% within 1 year of program launch. | Conduct 1 virtual check-in per week with each CHF patient on the telehealth program for the first 2 months of the telehealth program. |
| **MEASURABLE**<br>Measurable goals enable you to evaluate whether or not the goal was achieved.<br>How will you decide whether the goal was achieved? | Reduce readmissions rate among CHF patients enrolled in telehealth to below US average 14.9%. | Conduct 1 virtual check-in per week with each CHF patient on the telehealth program for the first 2 months of the telehealth program. |
| **ATTAINABLE**<br>Attainable goals are realistic about what is possible given the availability of resources. How likely is it that you can accomplish this goal? | Based on data from other telehealth programs, we believe this goal is attainable. | Based on the number of patients and the number of staff we have, this is possible. |
| **RELEVANT**<br>Relevant goals are important to your organization and will make an impact on achieving larger objectives. Does it make a difference to your overall objectives if this goal is met? | Reducing readmissions among our chronic care patients is a primary objective of our organization. | Improving clinician-provider communication and providing continuous engagement is a primary objective of our telehealth program. |
| **TIME-BOUND**<br>Timely goals lock into a specific time frame and specify when they need to be completed by. What is the timeline for achieving this goal? | Within 1 year of telehealth program launch. | 1 weekly visit per patient for first 2 months of telehealth program |

In addition to SMART goals, it's essential to consider your model(s) of care delivery. This will also help you define and refine your program's goals and objectives. The model of care should align with your SMART goals.

**Model examples**

**Access to Care Model** - telehealth services as a tool for increasing access to care (specialist and general) to those in rural and/or underserved populations. In many cases, patients are not able to access care due to location, transportation barriers, socioeconomic status, or other factors. The goal of this model is to bring telehealth to those populations.

**Hospital at Home Model** - delivering hospital level care to patients in the comfort of their own home. This is used by organizations who are looking to decrease length of stay and readmissions, as well as provide an alternative to hospital care within the brick and mortar hospital or clinic setting. This model enables patients to receive acute and post acute care at home.

**Cost Savings Model** - alternative care delivery methods that aim to reduce costs by reducing readmissions, improving care coordination, increasing shared savings, and avoiding windshield time.

**Chronic Care Management Model** - managing the health of patient populations with multiple (two or more) chronic conditions over a period of time.

**Post-Acute Model** - immediately at hospital discharge, monitoring patients to ensure they do not return back to the hospital.

**Aging in Place Model** - telehealth services as a tool for increasing peace of mind and patient engagement. The goal of this model is to ensure that patients can receive care safely at home for as long as possible.

Determining clear goals and objectives that align with your organization's mission is the first step in launching successful, scalable and profitable telehealth and RPM programs. Once you've done this, you are ready to move on to step 2 - selecting a technology partner.

## Quick Tips

- Focus on a few goals, as opposed to many
- Ensure every goal is a SMART goal
- Determine your model of care delivery early

# 2 Select a Technology Partner Aligned With Goals & Project Scope

When evaluating potential vendors, ensure that the technology aligns with the goals of your program determined in Step 1. What technology capabilities are needed to reach the goals your organization has outlined? A few examples include virtual visits for specialty and general health visits, remote monitoring of vitals and biometrics chronic disease management, medication reminders to promote engagement and care plan adherence, risk alerts to inform clinicians of symptom exacerbations, education modules to build health literacy, EMR integration to ensure optimized workflow, etc.

Consider ease of use, security, integrations, the role of implementation, branding and marketing assistance, roadmap, total cost of ownership, logistics management, clinical support, and reimbursement resources.

## Quick Tips

- Ask every technology partner you evaluate the same questions (utilize a rubric)
- Focus on support and cynical expertise in addition to features
- Discuss success stories from vendor's current customers

## 15 questions to ask when evaluating your telehealth partner

1. Is the platform cloud-based?

2. What equipment is included for vital and biometric monitoring?

3. How does connectivity work?

4. Does the solution offer video visit capabilities?

5. What is the virtual visit platform?

6. Is the software platform secure and HIPPA compliant?

7. Can I use this to get reimbursed?

8. Is a mobile application available?

9. Do you offer technical support to patients and providers?

10. How does logistics and inventory management work?

11. Will I have access to a Client Success team? What does that relationship include?

12. Do you offer marketing guidance and support?

13. What is the total cost of ownership?

14. Do you involve the patients' caregiver in any way?

15. Is the care plan customizable by patient?

# 3 Identify Telehealth Project Champions & Leaders - Build Your Telehealth Team

Regardless of the size of your organization, there are two roles of involvement that will make a significant impact on your program's success: the "Telehealth Executive Champion" and the "Telehealth Leader."

The telehealth executive champion, telehealth leader, and your telehealth partner's client success team are responsible for developing and iterating upon a methodology that aligns with your organization's vision and mission for patient care as determined in Step 1.

Telehealth executive champions are change agents who are inspirational and visionary leaders. They ensure telehealth options are evaluated as part of the planning process each year and ensure appropriate financial, operational, clinical and technical resources are allocated to the telehealth program. The telehealth champion is the telehealth spokesperson within your organization - they are tasked with driving development and ongoing support of the telehealth program. This individual is usually the CEO, Chief Nursing Officer, Chief Medical Officer, Chief Operating Officer, Chief Technology Officer, Chief Medical Information Officer, or a VP/Director governing the telehealth program.

Regardless of who it is, it is crucial that they perform on the above functions and pick the right person to be the "telehealth leader."

The telehealth leader runs the day-to-day function of the telehealth program, serves as a role model and coach to the telehealth team, and manages the relationship with the telehealth partner. Your telehealth champion and telehealth leader will work hand in hand to achieve on-going program success. The telehealth leader is responsible for putting in place all key operational and clinical elements of the telehealth program. They will lay the foundation upon which all further development and growth is based. This individual is the "eyes and ears" of the telehealth executive champion and other executive leadership.

When recruiting your telehealth leader, there are several important factors to consider. First, be patient - you will find the right person for the job. Examples of recruiting tactics[1] for retaining a telehealth leader include:

- Identify internal hires who have supported or assisted in the planning of the telehealth program

- Identify internal hires with experience in technical aptitude, project development and an interest in leading clinical operations

- Identify an external professional who has proven experience in leading a data driven and systemic telehealth approach

- Identify interim leadership (this is less sustainable) from an organization who have proven experience in executing on telehealth methodology for other vendors and agencies - this individual can provide quicker time-to-initial-value, and effectively hire new telehealth leader once the program is more mature

Work to develop telehealth clinical experts within your program to build buy-in and clinician engagement. Foster an environment of continuous iteration and support by emphasizing the importance of sharing weekly patient stories and improvement areas to ensure that your program has continuous improvement and momentum.

The telehealth and RPM team will learn the most by seeing each other in action and hearing frontline stories.

**The Importance of Telehealth Governance and Executive Buy-In**

As your telehealth team and program grows, you will need to consider how the team is structured from a licensure and a staffing ratio perspective. Some staffing questions to consider are:

- What is the patient to nurse ratio for monitoring?Will you be using LPN's or RN's?

- Will there be a physician liaison for the program?

- Is there coverage for holidays, weekends, PTO, etc? If not, does your telehealth partner have a clinical call center to assist with this?

- Do you need to hire a telehealth installer or technician?

- Are you managing the inventory internally or outsourcing (or does your telehealth partner offer inventory management)?

If you're unsure of how to answer these questions or best practices, lean on your telehealth partner to provide assistance and staffing models.

1 Arkwright, Bryan, et al. "Telehealth Governance: An Essential Tool to Empower Today's Healthcare Leaders." *Telehealth and Medicine Today,* 2 May 2018, telehealthandmedicinetoday.com/index.php/journal/article/view/12.

## Quick Tips

- Determine whether your executive champion is an internal or external hire
- Continuously share patient success stories and challenges
- Foster an environment of learning and innovation

# 4 Assess Financial Objectives, Rules, Regulations & Reimbursement

When considering your financial plan, there are many important factors to consider including your financial justification and goals, as well as rules and regulations regarding telehealth and RPM in your state. When thinking about the financial plan, we suggest breaking the conversation into two parts: 1) Financial Objectives and 2) Reimbursement, Rules and Regulations

**Financial Objectives & Goals**

Every organization approaches this in a unique way. For some organizations, financial considerations are the prime objective of their program, for others, financial considerations are a secondary or tertiary factor in their adoption of telehealth.

Regardless, programs that begin with a robust financial justification will be the most successful.

Start with assessing your current organizational structure (i.e. home health, palliative care, hospice, physician group, hospital group, etc.) and what type of clinical staff your organization employs (MDs, NPs, RNs, LPNS, PTs, etc).

Review your organizational structure and determine what is required by your organization to meet the regulations of providing and receiving RPM and telehealth reimbursement.

All financial models need to go beyond reimbursement to include cost avoidance metrics as well. Organizations often include readmission reduction, operational improvements such as reduced home health visits or saved time, improved shared savings, and other non-reimbursement metrics.

Consider how you will measure your short and long-term financial goals as they relate to the telehealth program. How and when will you measure financial success?

Grants are also important to consider. During the COVID-19 pandemic, the FCC provided grants to support expansion of telehealth services. Some of the Managed Care Organizations will offer grants that are related to various disease management groups that would benefit from RPM/Telehealth services. Agencies should reach out to their MCO contacts and inquire if any grant projects are being offered. There may also be an opportunity at the state level for Medicaid grants as well and we encourage every organization to monitor **Grants.gov** to see if any grant opportunity arises.

## Rules, Regulations and Reimbursements

Telehealth and RPM rules and regulations are a complex subject. The regulations and reimbursement climate is continuously evolving and is becoming increasingly more progressive as telehealth gains popularity and shows efficacy across the continuum of care. Regulations vary from state to state and it is essential that you understand the rules in your unique location. When considering your telehealth or RPM partner, understand whether they have reimbursement experts on their team who can help you navigate through all telehealth and RPM reimbursement and regulations.

**The Center for Connected Health Policy** provides great resources on state by state rules and regulations.

Get acquainted with Medicare, Medicaid, and commercial carriers; each entity has different rules and resources available when it comes to the delivery of telehealth services.

Many clinical organizations establish contracts with commercial carriers to drive continued reimbursement for their programs. When evaluating telehealth partners, consider whether they aid in navigating these relationships and contracting processes. Also, be sure to consider which patient populations are already part of cost savings programs. Many organizations are part of Accountable Care Organizations (ACOs) or have their own health plans, so they can start monitoring patients and achieving a financial ROI without requiring direct reimbursement.

If you are looking to provide RPM or telehealth service to a Medicaid population, be sure to review your state's Medicaid guidelines as not all state Medicaid plans will cover RPM and telehealth services, and provider eligibility differs across states.

## Quick Tips

- Research rules and regulations in your state on The Center for Connected Health Policy
- Discuss reimbursement opportunities with your telehealth partner

# 5 Establish Telehealth Buy-In & Educate Your Clinical Team

By empowering your clinicians you will empower your patients. Buy-in across your organization is essential for telehealth program success and it starts by ensuring your team understands the value, outcomes, and need surrounding your new or expanded program.

You can accomplish this by stressing the convenience the program will provide patients, sharing frequent patient stories and continuously sharing data and trends on the program.

For example, if you are using telehealth for your CHF population, provide examples and stories of how telehealth has been successful in treating and managing that specific disease group.

Explore with your team how telehealth will enable them to provide better and more efficient care to their patients. On a daily or weekly basis share the stories that make your program so special; they're incredibly powerful tools to keep the momentum of the program.

**Educating Your Staff**

Training and education is critical to program success. Ensure your clinicians understand the capabilities of the telehealth platform, and what their individual role is.  When evaluating telehealth and RPM partners, be sure to consider what their role  is in educating your clinical team. Many times they will have robust educational material that you can utilize in the education process with your teams.

**Your Telehealth Program: The Importance of Patient and Clinician Education**

Educate your staff on the importance of maximizing utilization - if your telehealth program is not utilized it will lose steam quickly and you will not reach your program's goal.

Marketing can come in to play here to ensure everyone knows the telehealth program is a service your organization provides

Your telehealth partner should provide a robust clinical and technical training schedule. A typical training schedule should include, for example:

- **Pre-training demo** - kick off presentation with a high level overview of the telehealth platform. On a high level, how does the solution work for patients, and how does it work for clinicians? During this conversation, you should determine the clinical training for the rest of the team. A large focus should be on building excitement around the telehealth program and aligning your team with the vision, goals, and objectives of the telehealth program.

- **Clinical discussion** - during this conversation you will break down workflows, patient identification, eligibility criteria, discharge criteria, and other clinical factors to consider.

- **ROI discussion** - the goal of this conversation is to discuss ROI goals with your telehealth program and create a data collection plan to track program success metrics.

- **Clinical training** - discuss and practice how the telehealth software will work in the field. Practice virtual visits, voice calls, and text messaging. Practice customizing care plans. Discuss the clinical monitoring and the day-to-day workflow of your clinical staff.

- **Monthly training to ensure continuous education** - ensure all clinicians stay up to date with the functionality of the software. When selecting a technical partner, be sure to consider whether they offer training as new features or updates are released.

## Quick Tips

- Continuously share patient successes and challenges as well as clinical team successes and challenges
- Provide resources on best practices to your clinical team (your telehealth partner should have this)
- Offer options for telehealth education and advancement

# 6 Determine Your Patient Populations - Set Clear Enrollment & Discharge Criteria

Which patient populations are you offering telehealth to and what is the goal for each group? Within the chosen patient population(s), which patients should be enrolled in telehealth? Once on the program, when should patients be discharged from the telehealth program? These are very common questions that must be considered when planning your telehealth program launch.

Based on your goals determined in Step 1 (defining your vision and goals), which patient populations align with that goal?

**SMART Goals for Your Telehealth Program**

Stratifying your patient cohorts is a critical first step to enrollment. The majority of telehealth programs select their patient populations by diagnosis-related groups (DRGs), or discharge dispositions (i.e. home health, home, hospice).

Regardless of how you stratify your patients, it is essential that the patient population(s) chosen align with the goals and objectives you outlined in Step 1.

**Establishing Enrollment Criteria**

Before you launch your telehealth program, you should have a clear plan for patient enrollment. What is the criteria to determine whether a patient will be an eligible candidate for telehealth?

Organizations use criteria as specific as the organizations EMR's algorithm risk assessments, ICD-10 codes, and LACE scores, to criteria as broad as Triggering Events and Discharge Disposition.

Beyond that, it's important to consider whether the patient will be open to utilizing telehealth to manage their care. Based on the populations and patients select for the program, enrollment criteria is established.

Telehealth is not a one-size fits all solution, in order to avoid operational inefficiencies the program should be tailored to respond to the needs of patients based on cognitive/physical abilities, home environment, social determinants, caregiver support, and the patients' willingness to consistently and thoroughly participate.

**Discharge from the Telehealth Program**

How do I know when a patient should be discharged from the telehealth program?

This is different for every organization and every patient cohort. The duration for which patients are monitored depends on your program model. For example, post acute programs are short-term, while chronic care management programs are long-term. Some organizations keep their patients on for 30 days, while will enroll patients for 60 or 90 days.

However, it's important to always base discharges on health outcome improvement - has this patient's health status improved to the point where they no longer require a telehealth or RPM platform? Will they be able to manage their care without this tool? Setting an estimated enrollment (30, 60, or 90+ days) for each population will be a helpful guideline, but we encourage all providers to evaluate health status before discharging the patient from telehealth or RPM.

Setting discharge criteria and a communication plan will alleviate a lot of uncertainty and provide peace of mind to both the patient, but also the clinicians.

## Quick Tips

- Ensure your enrollment and discharge criteria align with your SMART goals
- Telehealth is not a one-size-fits-all solution, be sure to consider how each individual patient will respond to telehealth

# You're Ready to Launch Your Program!

A clear and methodological approach from the onset of your telehealth program will prime your organization for initial and continued success.

Through thoughtful planning and execution and by partnering with the correct telehealth and RPM partner you will ensure that the program is always working to meet the needs of both your staff and patients.

It's important to check in with your goals regularly and reflect on what is working, what needs to be improved and how your partner can help you improve the program.

By following the steps outlined here and making adjustments as needed, your patients, team and organization will surely see the benefits of telehealth and remote patient monitoring for years to come.