Housekeeping Tips

All participant lines have been muted

- Please use the *"Chat Box"* located on the lower right side of your screen, to submit questions or comments

- If we are unable to respond to your question today, we will follow-up with you after the program

- After the session, the recording and slides will be posted to the IPRO QIN-QIO website at https://qi.ipro.org/2020/07/21/telehealth-qin-series/

Presentation Agenda

- IPRO Quality Innovation Network-Quality Improvement Organization (QIN-QIO) Introduction

- Overview of the IPRO QIN-QIO Telehealth Series

- Telehealth 101 and Lay of the Land

- Questions and Answers

The IPRO QIN-QIO: Who We Are

The federally funded Medicare Quality Innovation Network–Quality Improvement Organization for 11 states and the District of Columbia

- A collaboration of three organizations: IPRO, Healthcentric Advisors, and Qlarant, led by IPRO.

- Offering enhanced resources and support to healthcare providers and the patients and residents they serve

- Promoting patient and family engagement in care

- Supporting implementation and strengthening of innovative, evidence-based, and data-driven methodologies to support improvements

The IPRO QIN-QIO: Where We Are
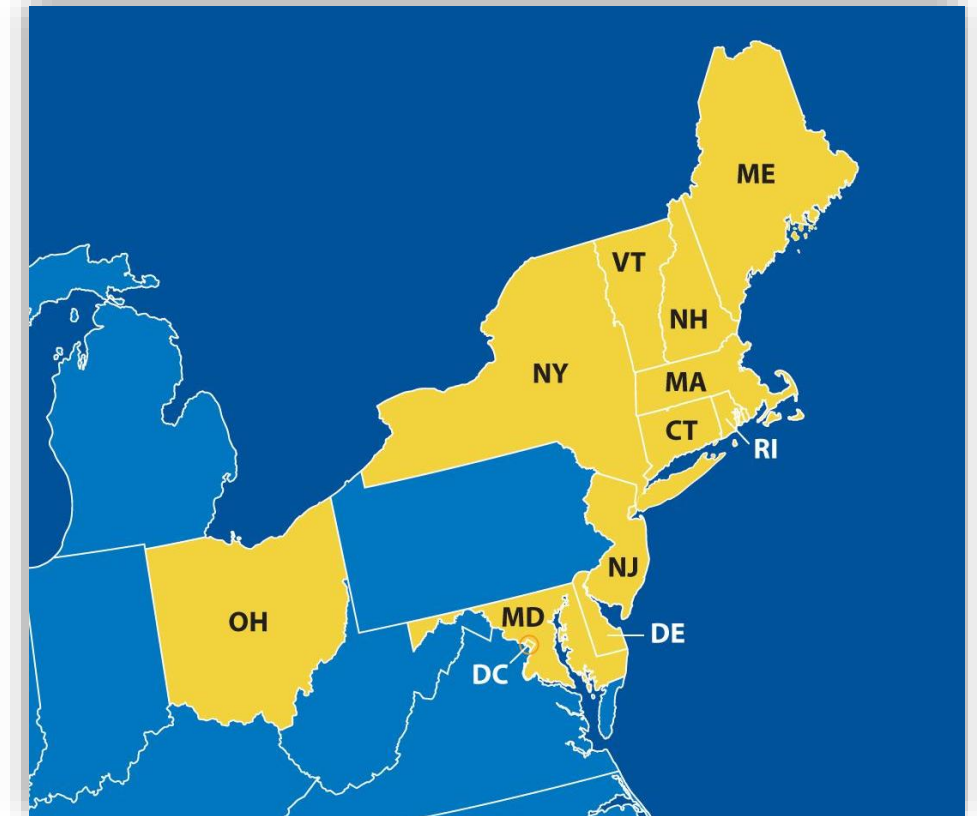
The IPRO QIN-QIO Region

IPRO:
New York, New Jersey, and Ohio

Healthcentric Advisors:
Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont

Qlarant:
Maryland, Delaware, and the District of Columbia

Working to ensure high-quality, safe healthcare for **20% of the nation's Medicare FFS beneficiaries**

The IPRO QIN-QIO: What We Do

- Work toward better care, healthier people and communities, and smarter spending

- Catalyze change through a data-driven approach to improving healthcare quality

- Collaborate with providers, practitioners and stakeholders at the community level to share knowledge, spread best practices and improve care coordination

- Promote a patient-centered model of care, in which healthcare services are tailored to meet the needs of patients

Focus Areas Across Settings

Nursing Homes	Community Coalitions		
✓ Working with more than 1,500 of the nursing homes in the region	✓ Communities that encompass at least 65% of the Medicare beneficiaries in each state ✓ Members collaborating to improve outcomes for the communities they serve:	• Acute Care Hospitals • Critical Access Hospitals • Federally Qualified Health Centers • Home Health Agencies	• Skilled Nursing Facilities • Physician Practices • Pharmacies • Community Based Organizations

Cross-Cutting Priority Areas

- Health Information Technology
- Health Equity
- Trauma-Informed Care
- Patient & Family Engagement
- Rural Health
- Vulnerable Populations

Program Focus Areas

- Behavioral Health & Opioid Use
- Patient Safety
- Chronic Disease Self-Management
- Care Transitions
- Nursing Home Quality

IPRO QIN-QIO Telehealth Series

Telehealth Innovation During the COVID-19 Pandemic

- Colleagues working in a variety of health care settings present innovative ways they have implemented and used telehealth technology

- Benefits, challenges, barriers, and best practices

- Eight session educational series
  - Alternating Tuesdays, July 28, 2020 – November 3, 2020
  - 1:00PM – 2:00PM EDT

Telehealth 101 & Lay Of The Land

IPRO Quality Improvement Network-Quality Improvement Organization (QIN-QIO)

July 28, 2020

Quality Improvement Organizations
Sharing Knowledge. Improving Health Care.
CENTERS FOR MEDICARE & MEDICAID SERVICES

IPRO QIN-QIO

■ Healthcentric Advisors
■ Qlarant

REID PLIMPTON, MPH
Project Manager
Northeast Telehealth Resource Center
www.netrc.org

Telehealth 101:
A Lay of the Land

NORTHEAST TELEHEALTH
RESOURCE CENTER

TRC

NATIONAL CONSORTIUM OF
TELEHEALTH
RESOURCE CENTERS

*The NCTRC is dedicated to building **sustainable telehealth programs** and improving health outcomes for rural and underserved communities.*

Reid Plimpton, MPH
Project Manager- Northeast Telehealth Resource Center (www.netrc.org)
07/28/2020

Brief Presentation Outline

- FAQ's and Life as Regional TRC

- Surveying the Telehealth Landscape
  - Telehealth 101: 5,000 Foot Overview
  - Value Perspectives and Strategic Planning
  - Policy Overview
  - TeleTech "At a Glance"
  - TeleTech Considerations
  - Use Cases and Topic Examples

- Q & A

Disclaimer and Acknowledgements

- Any information provided today is not to be regarded as legal advice.

- NETRC has no relevant financial interest, arrangement, or affiliation with any organizations related to commercial products or services discussed in this webinar.

Acknowledgements:

Mei Kwong, CCHP

National Consortium of Telehealth Resource Centers

About Us

Mission and Aim

TelehealthResourceCenters.org

The TRCs are funded by the Federal Office of Rural Health Policy (FORHP), under HRSA's Office for the Advancement of Telehealth

Mission

Foster the use of telehealth technologies to provide health care information and education for health care providers who serve rural and medically underserved areas and populations.

Aim

Connecting rural communities and helping them overcome geographic barriers to receive quality healthcare services.

NETRC: About Us

- Technical Assistance includes no-cost resources and expertise on telehealth reimbursement, equipment selection, legal & regulatory issues, and more. A few examples Include:

  NETRC Site & Telehealth Resource Library
  Latest in national and regional telehealth news and resources
  Over 3,500 publicly available journal articles
  and other resources

  Annual Regional Telehealth Conference (www.netrc.org/conference) Opportunity to network and learn from regional colleagues!
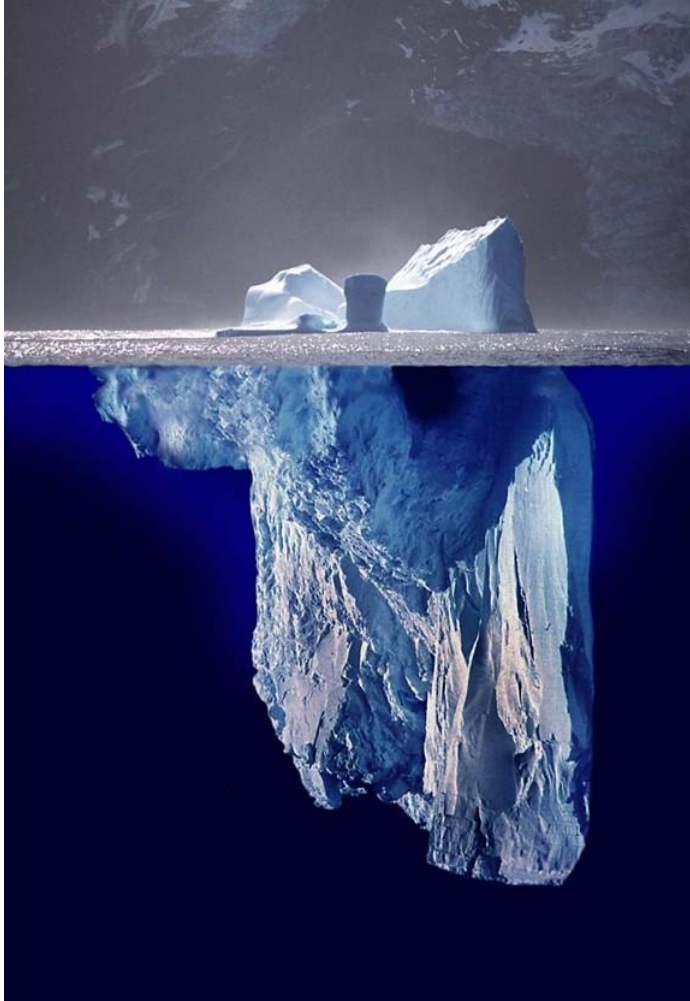
  National Telehealth Resource Center website
  Fact Sheets, Guides and Templates,
  Evidence for Telehealth, Webinar series, etc.

- Educational Presentations and Webinars
- In-depth consultative services are also available, and more!

Telehealth 101= Only the Tip of the Iceberg!

Other Common Questions that Regional TRCs receive include:
- Reimbursement
- Program development
- Strategic planning and market analysis
- Licensing & credentialing
- Malpractice & liability
- Regulations & other legal considerations
- Internet prescribing
- Technology selection
- Security, privacy, & HIPAA compliance
- Workforce development and training
- Best practices and networking
- Tools, sample forms, templates, etc.
- Program evaluation
- Research and Supporting Evidence
- *And more!*

What is Telehealth?

Broadly: the provision of health care, public health, and health education at a distance using telecommunications technologies.
See also: Telemedicine, Telepractice, Tele-X (specialties like telepsychiatry), Virtual Health, Connected Care, Digital Health, eHealth, eVisits

Telehealth vs. Telemedicine
While "telemedicine" has been more commonly used in the past, "telehealth" is a more universal term for the current broad array of applications in the field. Its use crosses most health service disciplines, including dentistry, counseling, physical therapy, and home health, and many other domains. Further, telehealth practice has expanded beyond traditional diagnostic and monitoring activities to include consumer and professional education.

Note: Telehealth is not a service or medical specialty, but a tool used to deliver care.

What is Telehealth? - Terminology

You'll often hear **Telehealth** and **Telemedicine**. These terms are sometimes used interchangeably. What's the difference?

- Telehealth: **Telehealth is an umbrella term**, which includes telemedicine and other modalities of communication. It encompasses a broader spectrum of healthcare delivery.

- Telemedicine: **Telemedicine is direct clinical care** provided from a distance using electronic communication to provide/support clinical care.

- Other Terms: You may hear other terms frequently used when discussing telehealth such as eHealth, mHealth, digital care, etc. We will focus on the terms "telehealth" and "telemedicine".

What is Telehealth? – 3 Common Modalities
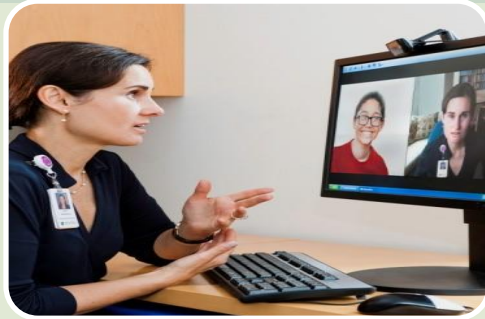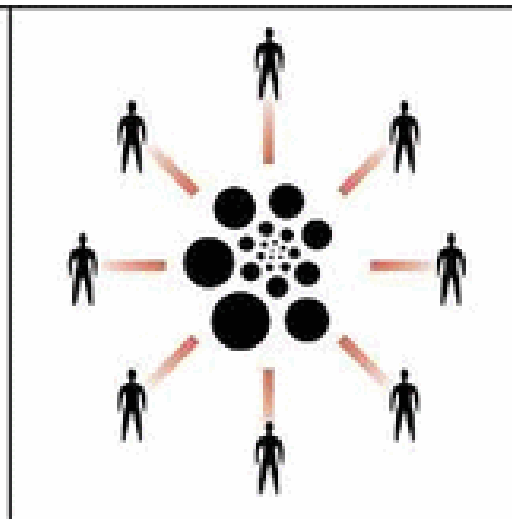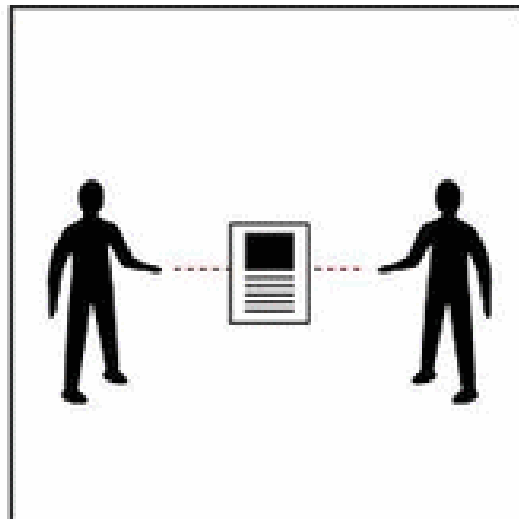
Video-conferencing
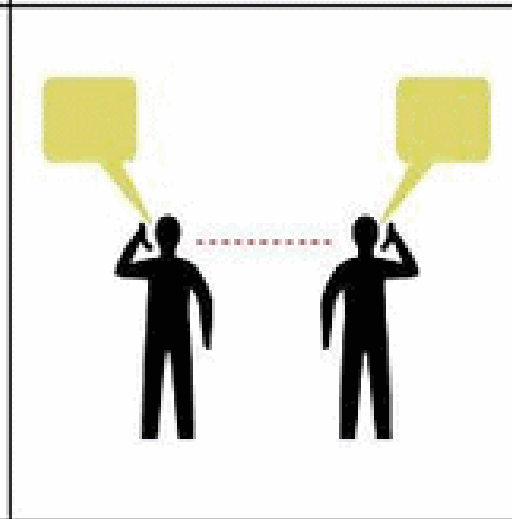
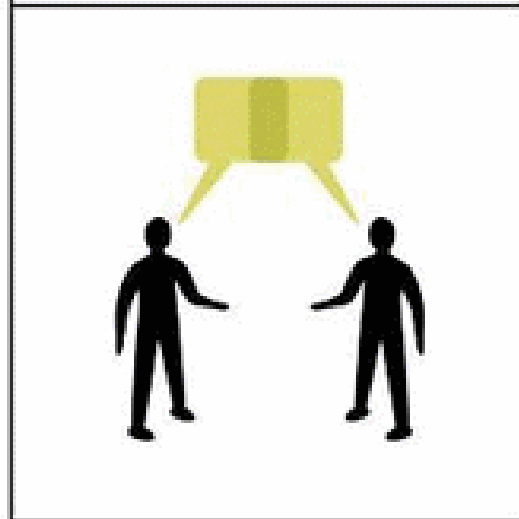(Synchronous)

Store And Forward

(Asynchronous)

Remote Patient Monitoring

(RPM)

Different Time (asynchronous) / Same Time (synchronous) × Same Place (in person) / Different Place (online)

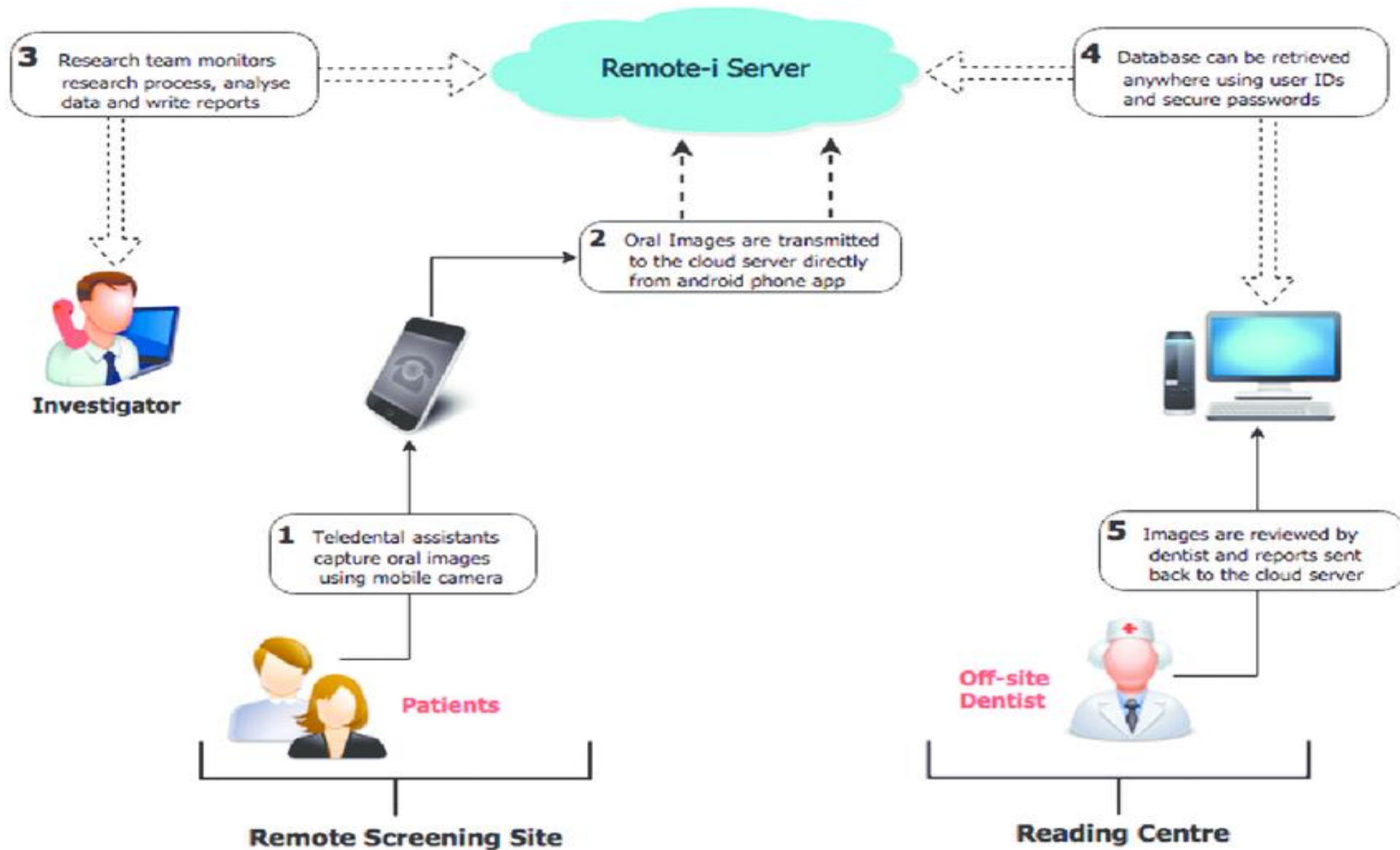Dental professional

Internet

Patient 1

Patient 2

Patient 3

Estai, Mohamed & Kanagasingam, Yogesan & Xiao, Di & Vignarajan, Janardhan & Huang, Boyen & Kruger, Estie & Tennant, Marc. (2016). A proof-of-concept evaluation of a cloud-based store-and-forward telemedicine app for screening for oral diseases. Journal of Telemedicine and Telecare. 22. 319-325. 10.1177/1357633X15604554.

Remote Patient Monitoring

SENSORS
- Electrocardiograph
- Photoplethysmograph
- Core temp sensor
- 3-axis accelerometer
- Gyroscopic sensor

Provider-to-Provider Models

eConsults: Enables primary care providers (PCPs) to consult remotely and conveniently with specialists via store and forward

New Medicare Codes – CY 2019 Physician Fee Schedule Interprofessional Internet Consultation (CPT codes 99452, 99451, 99446, 99447, 99448, and 99449):
These codes cover interprofessional consultations performed via communications technology such as telephone or Internet, supporting a team-based approach to care that is often facilitated by electronic medical record technology.

Provider-to-Provider Models

Project ECHO:

Extension of Community Healthcare Outcomes

- Medical education model
focused on enhancing capacity of rural providers
to manage complex patients locally, through
specialty support and communities of practice
- Several existing ECHO hubs across the
Northeast and more emerging across the region

6 NE States	35 Hubs	70 Programs

ECHO Explore the ECHO Movement

ECHO Partner Locations   Count: 294   Last Updated: 05/09/2019

Provider-to-Provider Model

Distance Learning Methods:

- **CME Based Web Events & Webinars**
- **Distance Learning And Telemedicine Grants (DLT Grant funded by USDA)** http://www.rd.usda.gov/programs-services/distance-learning-telemedicine-grants
  - The DLT program provides or improves Distance Learning and/or Telemedicine Services in Rural America by funding equipment that allows rural residents to access distance learning or telemedicine services from hub sites located in larger urban or suburban areas

Where is Telehealth?

NORTHEAST **TELEHEALTH** RESOURCE CENTER

Everywhere!

- Academic Medical Center
- Airplane
- Boat
- Celebrity Tour Bus
- Coal Mine
- Community Health Center
- Community Mental Health Center
- Disaster Zone
- FQHC
- Home

- Hospital
- Public Health Dept.
- Public Library
- Nursing Home
- Oil Rig
- Prison
- Refugee Camp
- Retail Pharmacy
- Rural Health Center
- Public School
- *And Many More!*

Select Telehealth Uses

- Behavioral Health
- Burn
- Cardiology
- Dentistry
- Chronic Care Management
- Dermatology
- Education / Grand Rounds
- Emergency Services / Trauma
- Family Planning

- Genetics
- Home health
- Infectious Disease
- Medication Adherence
- Neurology /Stroke care
- Obstetrics and Gynecology
- Oncology
- Ophthalmology
- Pain Management
- Pathology
- Pediatrics

- Palliative Care
- Primary Care
- Psychiatry
- Radiology
- Rehabilitation
- Rheumatology
- Surgical
- Wound Care
- *And more!*

The Value of Telehealth

Telehealth carries different value for varying perspectives.

Find solutions to...

- provide less costly
- more efficient
- higher quality care

Patients	Communities	Primary Care Providers	Specialists	Health Plans
• Accessibility: care when and where they need it • Affordability: reduces travel time, expense and time away from work/family • Timeliness: reduces wait time to access specialists • Integrated and coordinated, "team approach" to care	• Keeps patients local whenever possible • Promotes rapid diagnosis and treatment linked to improved patient outcomes • Improves outcomes and therefore improves health of population	• Promotes coordinated care • Reduces provider isolation • Maintains primary relationship with patient • Promotes greater patient satisfaction • Generates revenue – visit reimbursement • Access to education • Working at top of scope	• Extends reach to patients • Teaching and partnership with PCP reduces the need for future, same-type referrals • Promotes coordinated care	• Promotes timely access to care • Increases "provider availability" in geographically challenged areas • Cost savings • Prescriptions • Ancillary tests • Patient transportation

NORTHEAST TELEHEALTH RESOURCE CENTER

Benefits of a Video Visit

- ✓ From anywhere
- ✓ No appointment and no driving
- ✓ Guidance on if, when and where to seek care
- ✓ Home care instructions
- ✓ Prescriptions if necessary
- ✓ Referral for lab or x-ray
- ✓ Follow-up instructions

Mick Connors, MD

How do I (provider) benefit?

- ✓ Reduce loss of patients by improving access
- ✓ Offer more convenience
- ✓ Reduce no shows
- ✓ Foster continuity
- ✓ Reduce ER visits (shared savings)
- ✓ Manage complex disease
- ✓ More efficient follow-up visits
- ✓ Bill directly

Mick Connors, MD

Why Strategic Design Matters in Telehealth

Telehealth Vision
- Where You Want To Go
- Direction On How To Get There

Strategic Alignment Across Org
- Digital Health Strategy
- Payment Options (other states?)

Leadership Buy-in
- Multiple CEOs & Leaders
- Unique Physician Relationships
- Competing Internal Initiatives

Clear Communication
- Internal Marketing
- External Marketing

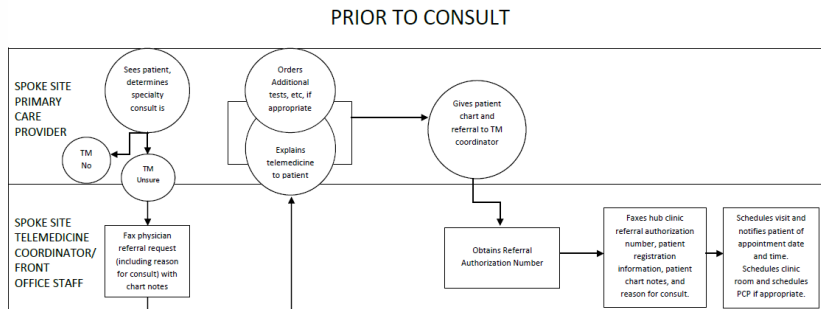**Focus on Specific Clinical Issues**
- Access to Care
- Program Expansion
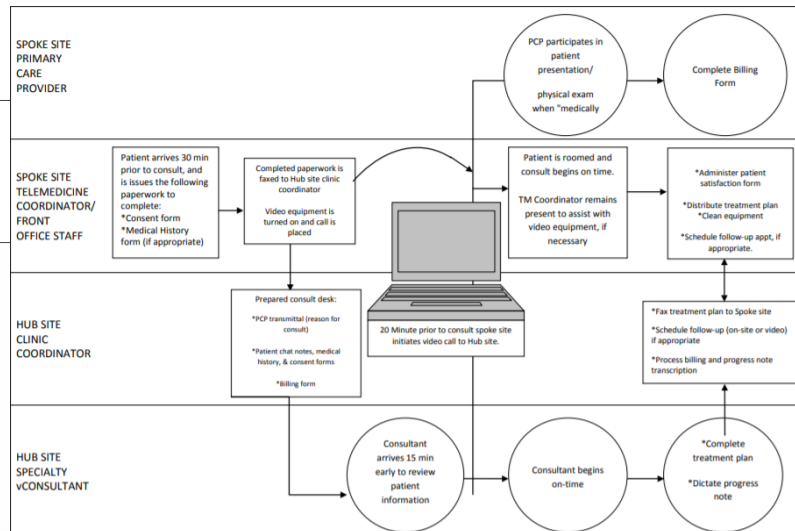
Success Metrics
- Consistent Criteria
- Comparable Data

Why Strategic Design Matters in Telehealth- Part 2

Provider

Telehealth Coordinator "Champion"

Specialist

Medical Records

Telehealth: General Workflow

Overview of workflow for a typical patient referral to telehealth specialist services.
November 9, 2017

PCP
- Referral is ordered
- Place orders per recommendations, as needed
- Document visit
- Review visit notes and follow up with patient, as needed

Telehealth Coordinator
- Create referral packet and fax to specialist
- Schedule patient
- Confirm patient two days before
- On day of, prep room and equipment
- Take vitals and fax to specialist
- Log into system and verify connection with specialist
- Room patient
- Log off system

Specialist
- Interview and examine patient with assitance from TC, if
- Discuss findings and recommendations with PCP
- Document visit and send to PCP site

Medical Records
- Transfer records into system and notify PCP

www.netrc.org

Workflows, Strategic Planning, and More!

Policy and Reimbursement

A Primer

- Originating site (patient location)
  - generally must be a health care facility that meets rural eligibility requirements, but there are a few exceptions
- Distant site (provider location)
  - Specificities depends on the Payer (State Medicaid v. Medicare)

MEDICARE
HISTORY OF FEDERAL TELEHEALTH POLICY IN MEDICARE

Balanced Budget Act of 1997
- Medicare beneficiaries in rural HPSAs may receive care via telehealth
- Practitioner required to be w/patient during consult
- Consulting & Referring physicians share fee (75/25)

Benefits Improvement & Protection Act 2000
- Included non-MSA sites
- Eliminated fee sharing
- Expanded eligible services for reimbursement

Medicare Improvements for Patients & Providers Act, 2008
- Expanded list of facilities that may act as an originating (patient location) site

Various Changes Made Administratively
- Credentialing & Privileging Regulations
- Increase in number of codes reimbursed
- Redefinition of "rural"
- Inclusion of Chronic Care Management Codes

Medicare telehealth statutory policy very limited & has not changed much in recent years

www.netrc.org

Medicaid Overview - Northeast

- ✓ State specific
- ✓ Parity laws – coverage vs. payment
- ✓ Modifiers
- ✓ Place of service / Originating site
- ✓ Custom charges

Other Common Telehealth Restrictions

The specialty that telehealth services can be provided for
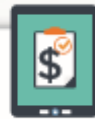
The types of services or CPT codes that can be reimbursed *(inpatient office, consult, etc.)*
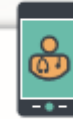
The types of providers that can be reimbursed *(e.g. physician, nurse, etc.)*

NORTHEAST TELEHEALTH RESOURCE CENTER

STATE TELEHEALTH PROGRAMS – NO TWO ARE ALIKE!

49 states
have a definition
for **telemedicine**

50 states
(and DC) reimburse for
live video

14 states
Reimburse **service
to the home**

21 states
Reimburse **RPM**

GENERAL TRENDS

State Medicaid programs continue to reduce barriers

- New Hampshire - Eliminated geographic barrier
- Vermont - Eliminated provider type restrictions

13 STATES ALLOW THE HOME AS PATIENT SITE

15 STATES & DC ALLOW SCHOOL AS PATIENT SITE

EXPANSION OF ORIGINATING SITES & SPECIALTIES

7 STATES ALLOW FOR TELEDENTISTRY

13 STATES ALLOW FQHC AND/OR RHC AS DISTANT SITE

States with Parity Laws for Private Insurance Coverage of Telemedicine (2018)

Legend:
- Telemedicine Parity Law
- Partial Parity Law
- Proposed Parity Bill
- No Parity Legislative Activity

States with the year of enactment: Alaska (2016)*, Arizona (2013)*, Arkansas (2015), California (1996), Colorado (2001), Connecticut (2015), Delaware (2015), Georgia (2006), Hawaii (1999), Indiana (2015), Iowa (2018), Kentucky (2000), Louisiana (1995), Maine (2009), Maryland (2012), Michigan (2012), Minnesota (2015), Mississippi (2013), Missouri (2013), Montana (2013), Nebraska (2017), Nevada (2015), New Hampshire (2009), New Jersey (2017), New Mexico (2013), New York (2014), North Dakota (2017), Oklahoma (1997), Oregon (2009), Rhode Island (2016), Tennessee (2014), Texas (1997), Vermont (2012), Virginia (2010), Washington (2015) and the District of Columbia (2013)

States with proposed legislation: In 2018, Alaska, Massachusetts, Pennsylvania, and South Dakota

*Coverage applies to certain health services.

AMERICAN TELEMEDICINE ASSOCIATION

https://www.ncsbn.org/nurse-licensure-compact.htm
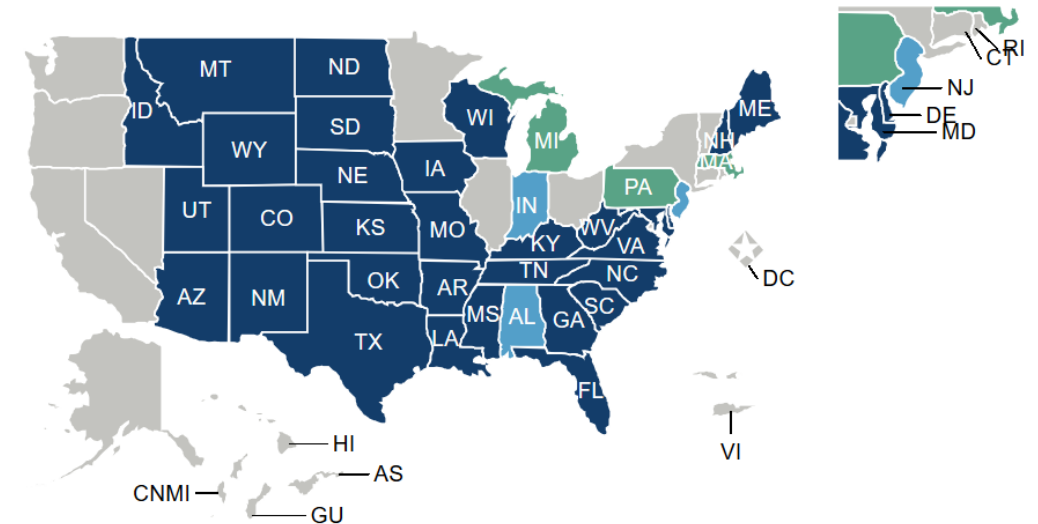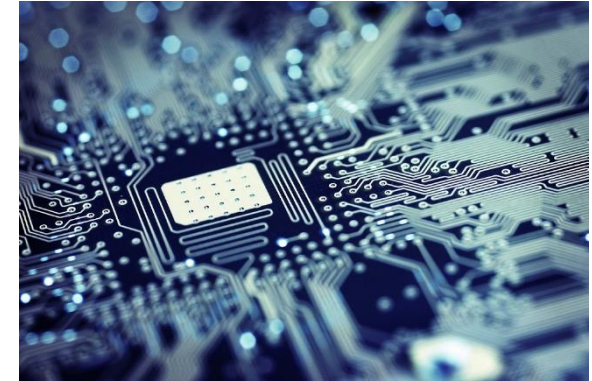

The NLC increases access to care while maintaining public protection at the state level. Under the NLC, nurses can practice in other NLC states, without having to obtain additional licenses.

🟩 State with pending NLC legislation

🟦 NLC enacted: Awaiting implementation.

🟦 NLC State

Current NLC States and Status

A Quick Tele-Tech 101

From smartphones to robots, there are a variety of tools available!

NORTHEAST
TELEHEALTH
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Equipment

Off the Shelf

Peripherals

Field Kits

Telemedicine Carts

Telehealth Tablet Carts

Remote Presence

Remote Patient Monitoring

Equipment (Carts)

Something In-Between

Something In-Between

iPad Pro in rugged case w/ videoconferencing and stethoscope apps

Speaker for enhanced audio quality

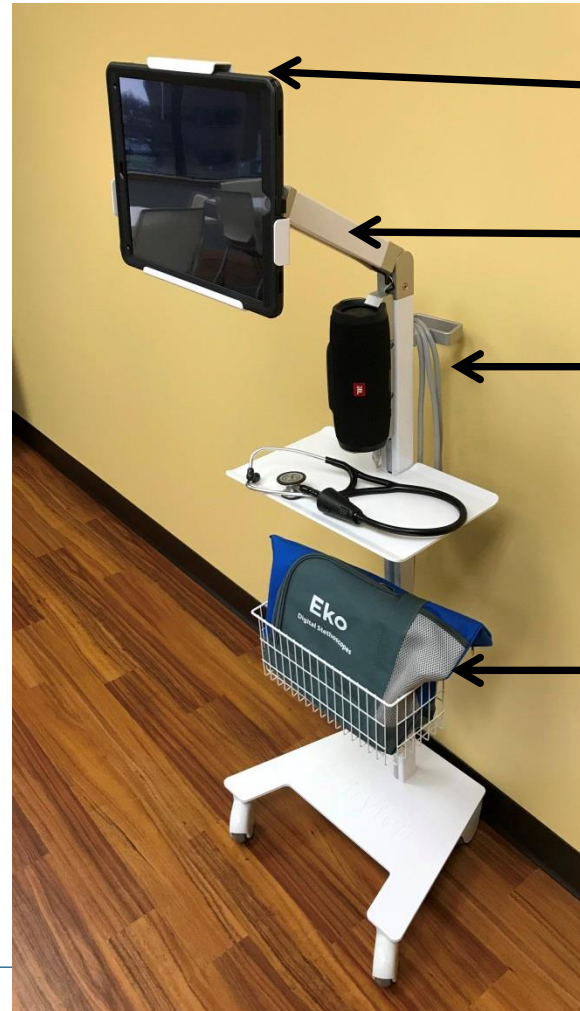Eko CORE Digital Stethoscope

Tryten NOVA 2 Medical Tablet Cart

Locking bracket to hold tablet

Extendable arm

Power cable wired to speaker and tablet for charging

Bag for storing stethoscope during transport

For more information on telehealth technologies, contact your Regional Telehealth Resource Center (www.TelehealthResourceCenters.org) or the National Telehealth Technology Assessment Center (www.TelehealthTechnology.org)
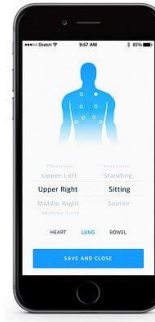
Equipment (Peripherals)

Clearsteth

ThinkLabs

Firefly

Littman

JedMed
Digital Scope

Eko Digital Steth
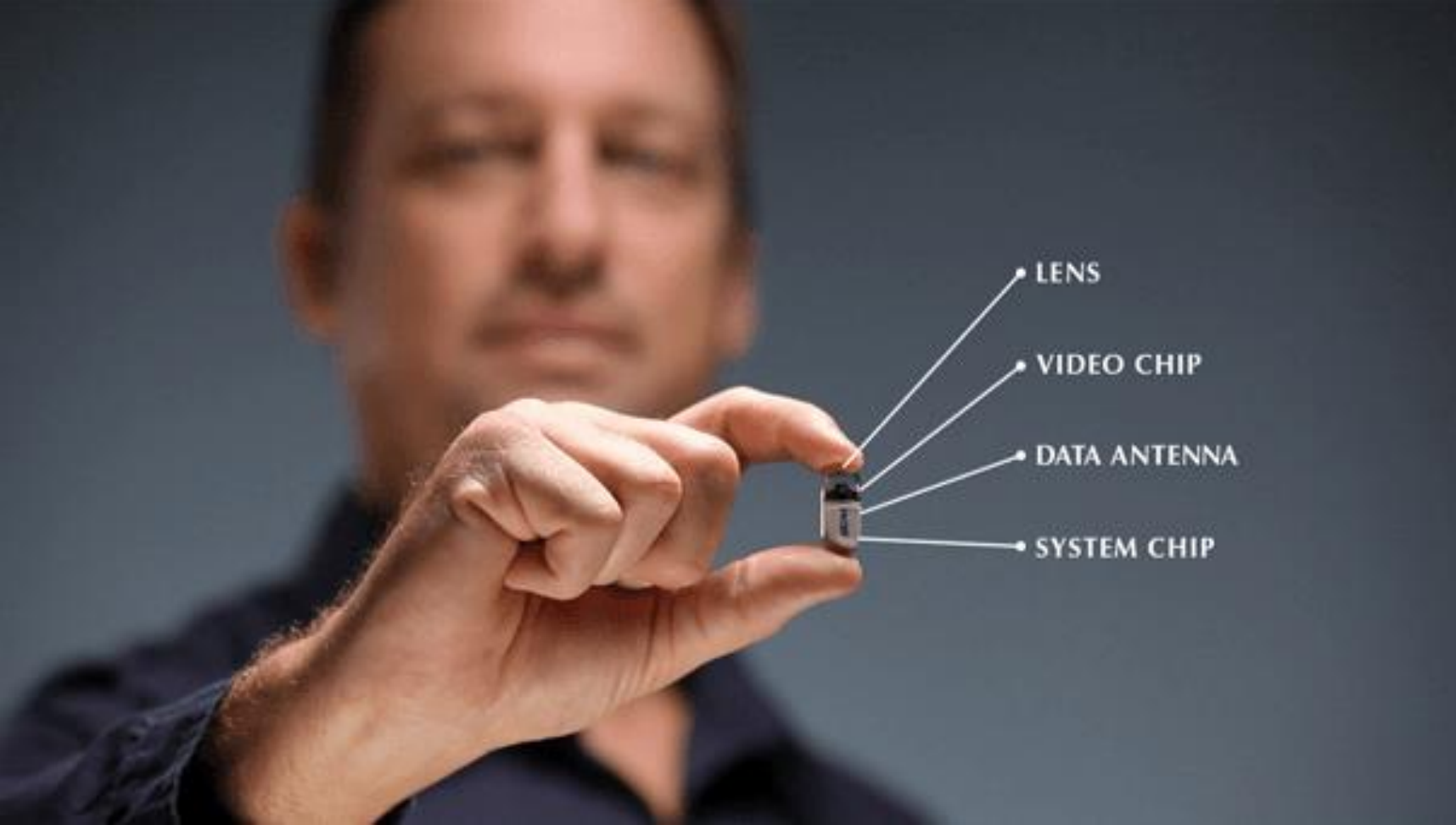
Bluetooth™

Horus
w/attachments

Direct To Consumer

TRC

Smart Pills / Ingestibles

Upon swallowing, the sensor is activated by electrolytes within the body. The pill then transmits a signal to a small, battery-powered patch worn on the user's torso and sends the data via Bluetooth to a caregiver's or family member's smartphone.

LENS
VIDEO CHIP
DATA ANTENNA
SYSTEM CHIP

Pillcam
COLON 2

Smart Pills / Ingestibles

The PillCam COLON will allow more people to get screened in an effective and convenient manner

Tele-Tech Things to consider

Provider & Patient Video Etiquette

- Camera Placement

- Microphone Quality

- Identification Verification Protocols

- Speed of Speech (speak slower due to potential delays)

- Mute yourself when typing

Room Design

- Lighting

- Background Considerations (Door closed, Window Visibility, etc.)

- Example: Specific Room dedicated to video visits vs. Transportable Tech. w/accompanying protocols?

Tech Considerations

- Wired (Ethernet) vs. Wi-fi when utilizing Video

- EHR Integration

Telehealth Use Cases

When designed with the proper goals in mind, telehealth use cases are often: Effective, Innovative, & truly Unique; Here are some of our favorites.

TeleWow!

Eastern Maine Medical Center:

- WOW! Program: Way to Optimal Weight - tiered program for children and adolescents (age 4-19), with body mass index (BMI) at or above 85th

  percentile designed for children who are at higher

  risk for weight related health problems

Weight loss program for kids at EMMC works to boost confidence, teach healthy lifestyles

Courtesy of EMMC Community Relations

Program Description and Outcomes:

- Multidisciplinary visits via live videoconferencing
  - MSW, clinician, and nutritionist take turns
- Benefits Include:
  - Provides program access and health benefits to patients in some of Maine's most rural communities
  - High Patient and family satisfaction – decreased travel time/cost
  - High satisfaction among provider team

Primary Care by Boat!

Maine Seacoast Mission (ME):

- 110 years old with history of spiritual and medical care provided by nurses visiting the islands.

Program Description:

- Telemedicine started 14 years ago to four islands visited by Sunbeam - going off island for a medical appointment can be a 2- 3 day trip.

- Primary Care provided on 5 islands, 3 by Sunbeam and two land-based units operated by trained medical assistants.

Speech Telepractice

Waldo County General Hospital

Michael Towey, MA, CCC-SLP

Manager Speech-Language Pathology Department

Fellow of the American Speech-Language-Hearing Association

National TRC Webinar – Innovation and Impact with Speech Language Pathology Telepractice

School-based Telepsychiatry

Athol Hospital/Heywood Healthcare (MA):

- Critical access, non-profit acute care hospital serving 9 Communities in North Quabbin Region.

Program Description and Outcomes:

- Collaborative program between hospital, school district, and behavioral health, initially supported by grant funds

- Benefits Include:
  - Increased access to vital child psychiatric services
  - Improved medication management
  - High student, family and provider satisfaction
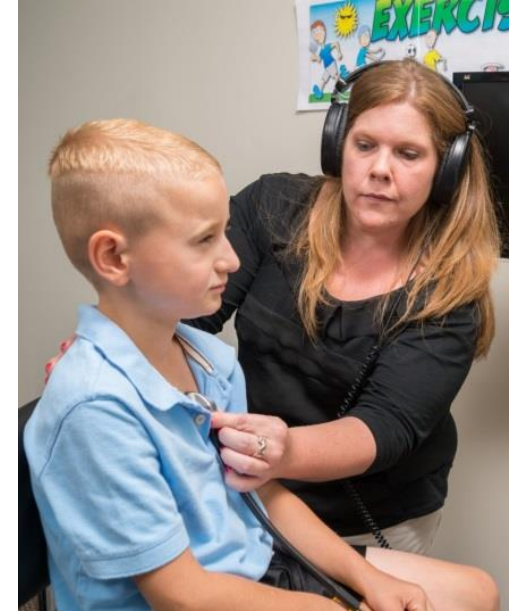 - Anticipated outcomes: Decreased ED utilization and improved academic achievement

Photo courtesy of AMD Global Telemedicine

Launched 1st school in 2016 – funding from MA HPC and HRSA to expand to four more!
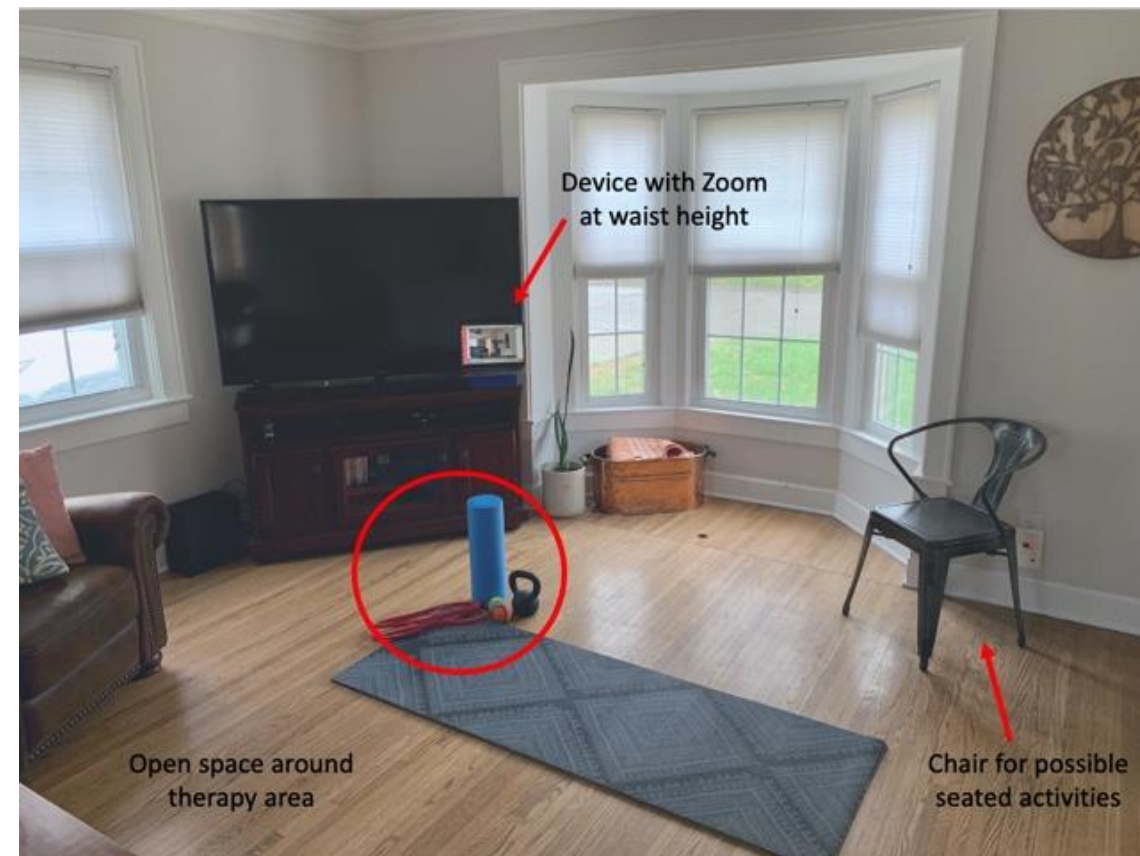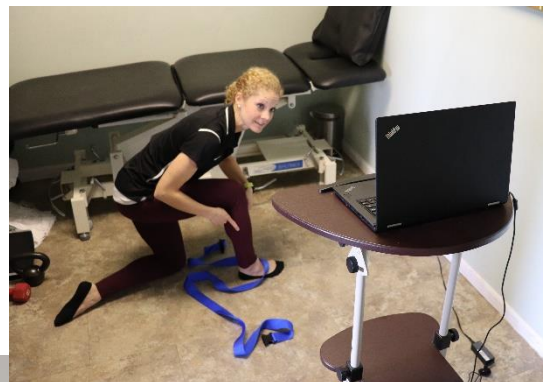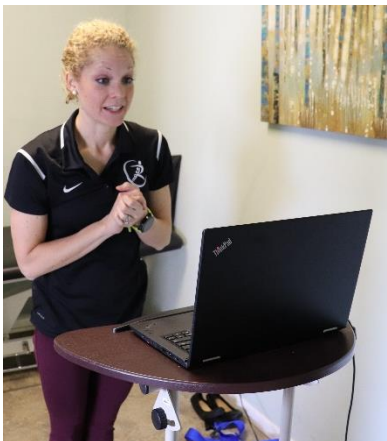
Tele-Tech and COVID-19

University of Vermont Health Network & University of Vermont Medical Center

- **Placed in all COVID-19 patients and Nursing stations & includes:**
  - **IPad**
    - **Equipped w/Zoom (Connected to Nursing Stations & unique ID's for Patient->Family Connection)**
  - **"Clamp Stands"**
- **Allows for Patient-> Provider Connection while saving PPE and mitigates potential exposure**

Tele-PT in the Time of COVID-19

Device with Zoom at waist height

Open space around therapy area

Chair for possible seated activities

Tips to Get Started

- Find a **champion!**

- Think **big**, Start small

- Focus time, effort and $ on **program development and a sustainable business model**, _then_ choose technology that fits your plan

- **Keep technology simple** when possible – what fits your needs and budget?

- **Reach out** to folks who have already done this! (And your Regional TRC!)

- **Lead advocacy efforts** for program development and policy growth

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Practice! Practice! Practice!

Make sure to do several telemedicine test runs so you can identify potential problems with the service

- How was your connection?
    - Did you have any dropped packets or calls?
- How did it work for you?
    - Did you have good telepresence?
- How did it work for the distant site?
    - Did you have good telepresence?
    - Did key personnel at the distant site identify any problems?
        - Take all comments seriously and act on them!

What We've Learned:
A Summary of A Decade+ in Telehealth Assistance

If you act like telemedicine works, it will work!	• If you apologize criticize, or in some other way suggest that telemedicine is inferior, you guarantee that it will be seen as inferior
Make sure to acknowledge and appreciate the hard work done by all of your colleagues to optimize the telemedicine encounter	• Technical staff, nurses, social workers, family, patients, colleagues, administration
Be accessible	• You know how!
Learn to roll with the punches	• You are bound to encounter some technical difficulties • Chill!

BUT, Most importantly…

NORTHEAST
TELEHEALTH
RESOURCE CENTER

Look at the Camera!

Resources

- **National Telehealth Resource Centers**

  www.telehealthresourcecenters.org

- **Northeast Telehealth Resource Center**
  - www.netrc.org
- **Center for Connected Health Policy**

  www.cchpca.org

- **Telehealth Technology Assessment Center**

  www.telehealthtechnology.org

- **American Telemedicine Association**

  www.americantelemed.org

- **Center for Telehealth & e-Health Law**

  www.ctel.org

- *And many great regional programs willing to share!*

Learning More

The NCTRC website houses fact sheets on telehealth policy, reimbursement, business development, FDA approved technology and more.

Various guides and research resources are also available to help develop your telehealth program.

If you cannot find relevant resources, be sure to contact your regional TRC for expert technical assistance.

Learn more at www.telehealthresourcecenter.org .

Contact Us

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Questions?

Thanks for Listening!

www.netrc.org | 800-379-2021

Presentation Appendix & Additional Information

-More Use Cases
-Published Literature
-Examples of NETRC Tools
And More!

NORTHEAST
TELEHEALTH
RESOURCE CENTER

The NCTRC Webinar Series

NCTRC Webinar Series

The NCTRC hosts an educational webinar every 3rd Thursday of the month from 11 AM – 12 PM PT.

Watch some of our videos from the previous years on our YouTube channel:

www.youtube.com/c/nctrc

Project ECHO: Northern New England Network

HRSA Rural Health Network Development Grant
- – Strengthens and expands network across ME, NH, VT
- – The Project ECHO Northern New England Network was made possible by grant number D06RH31043 from the U.S. Health Resources and Services Administration, DHHS

Formal Network Partners:
- – Project Lead: Quality Counts – A Qualidigm Company
- – Quality improvement organizations in Maine, New Hampshire and Vermont
- – Northeast Telehealth Resource Center (NETRC);
- – Area Health Education Centers (AHECs) in ME, NH, and VT; and academic centers for medical and health education in the three states, including the University of New England (UNE); UNH; Dartmouth-Hitchcock Medical Center; and University of Vermont (UVM) Medical Center.

The Collaborative serves a broad network of healthcare stakeholders across the three states.

Select Project ECHO Resources

Articles and Other Resources:

- [ECHO Replication: Next Steps, Secrets for Success and ECHO Value](#) – ECHO Institute
- [Project ECHO® Evaluation 101: A Practical Guide For Evaluating Your Program](#) – NYS Health Foundation
- [Making the Business Case for Project ECHO in New York State](#) – Starr, Byrd, Hasselberg, Doelger
- Search the [NETRC Resource Library](#) for many more Project ECHO resources!

Training Resources
ECHO Institute:

- [ECHO Introduction Events](#) – monthly webinars
- [ECHO Immersion Training](#) – on-site 3-day in-depth training

ECHO Superhubs: American Academy of Pediatrics, MD Anderson, Missouri Telehealth Network, Oklahoma State Univ., Univ. of Chicago, Univ. of Wyoming

Questions & Feedback

Please plan to join us for upcoming webinars

Topics

- COVID-19 Medicare Billing & Coding
- Telehealth in Ambulatory Care
- A Patient's Experience
- And more!

Next session

- August 11, 1-2PM

Thank you for attending today's webinar!

Webinar materials will be available at
https://qi.ipro.org/2020/07/21/telehealth-qin-series/

For More Information

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