Educational Webinar Series:

Telehealth Practice Innovation During the COVID-19 Pandemic

July 28 – November 3, 2020

Eight sessions: Alternating Tuesdays









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: https://qi.ipro.org/2020/07/21/telehealth-qin-series/

Today's Presentation





About the IPRO QIN-QIO

Telehealth: The Impact on Care Transition

Questions and Answers

The IPRO QIN-QIO: Who We Are





Healthcentric AdvisorsOlarant

The IPRO QIN-QIO

- A federally-funded Medicare Quality Innovation Network—Quality Improvement Organization (QIN-QIO)
- 12 regional CMS QIN-QIOs nationally

IPRO:

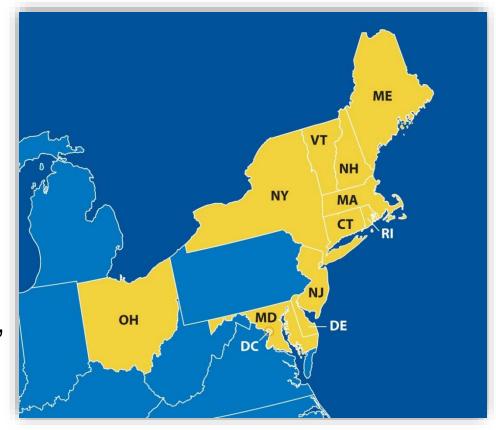
New York, New Jersey, and Ohio

Healthcentric Advisors:

Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont

Qlarant:

Maryland, Delaware, and the District of Columbia



The IPRO QIN-QIO: What We Do





Advisors Olarant

- Bring together healthcare providers, stakeholders, and Medicare beneficiaries to improve the quality of healthcare for targeted health conditions 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

- ✓ Working with more than 1,500 of the nursing homes in the region
- **Community Coalitions**
- the Medicare beneficiaries in each state
 ✓ Members collaborating to improve outcomes for the communities they serve:

✓ Communities that encompass at least 65% of

- 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



Chronic Disease Self-Management

Care Transitions

Nursing Home Quality

Creating a Telehealth Service Line for Physical Therapy: The Good, the Bad, and the Ugly Truths

IPRO Quality Innovation Network-Quality Improvement Organization (QIN-QIO)
October 20, 2020













Travis Clappa Director of Community Relations Rehabilitation & Performance Institute

THE GOOD, BAD, AND UGLY TRUTHS BEHIND CREATING A TELEHEALTH SERVICE LINE FOR PHYSICAL THERAPY

TRAVIS CLAPP

DIRECTOR OF COMMUNITY RELATIONS

REHABILITATION & PERFORMANCE INSTITUTE



WHO ARE WE?

- Independently owned
- Opened first clinic in 2016
- 6 clinics
- 3 states
- Team of 31 Rockstars



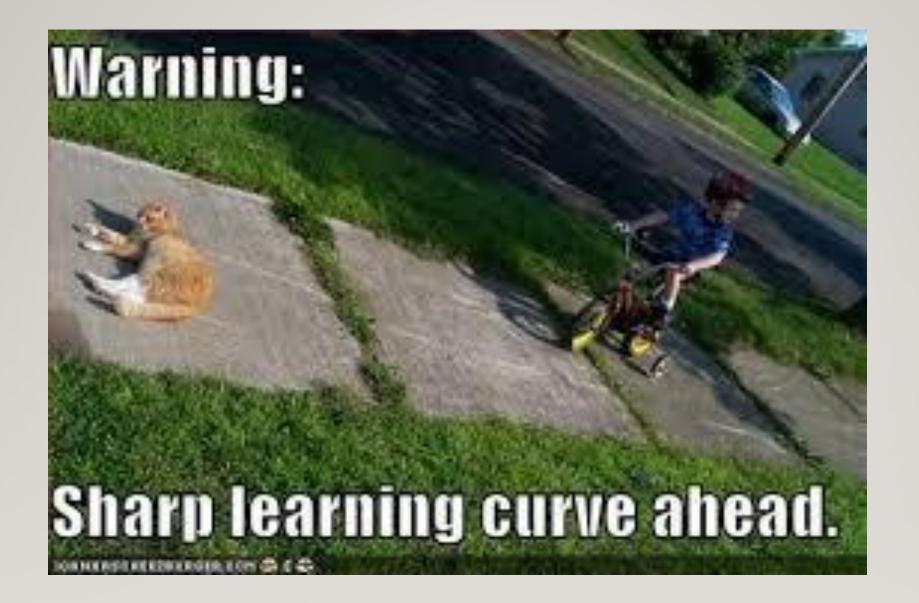
SERVICES

- Physical Therapy
- Chiropractic Care
- Athletic Training
- Performance Training
- On site industrial services
- Occupational Health Services
- Nutritional Education



GOAL: TO BETHE BEST IN THE MARKET, NOT THE FIRST





WHO'S DOING WHAT?



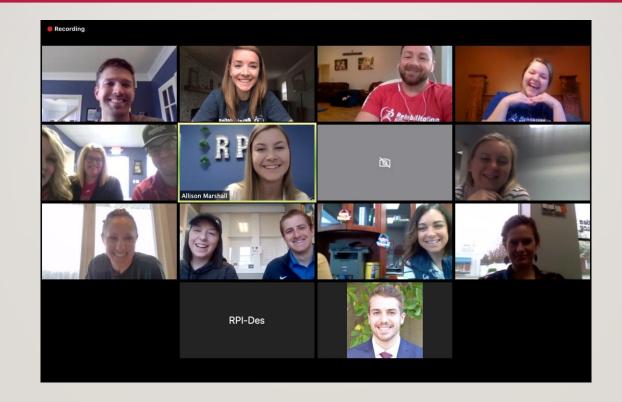
ESTABLISH TEAMS

- Platform selection
- Legal/compliance
- Payment
- Service Development
- Equipment
- Marketing



ALL HANDS ON DECK

"Alone, we can do so little; together, we can do so much" – Helen Keller





PLATFORM

- Price
- Ease of use
- HIPPA?
- Compatibility



LEGAL AND COMPLIANCE

- State by State regulations
- Scope of Practice
- HIPPA



PAYMENT

- Self Pay?
- Will Insurance Cover?
 - Who does/who doesn't?
 - What is required?
 - Auth?



SERVICE DEVELOPMENT

- How do we continue to provide the care that our patients have become accustom to receiving from us?
- How do we make this beneficial for both the provider and the patient?
- What does this look like for the provider?
- What does this look like for the patient?
- What works best for both?
- How to optimize your time?
- How long is each session?



EQUIPMENT

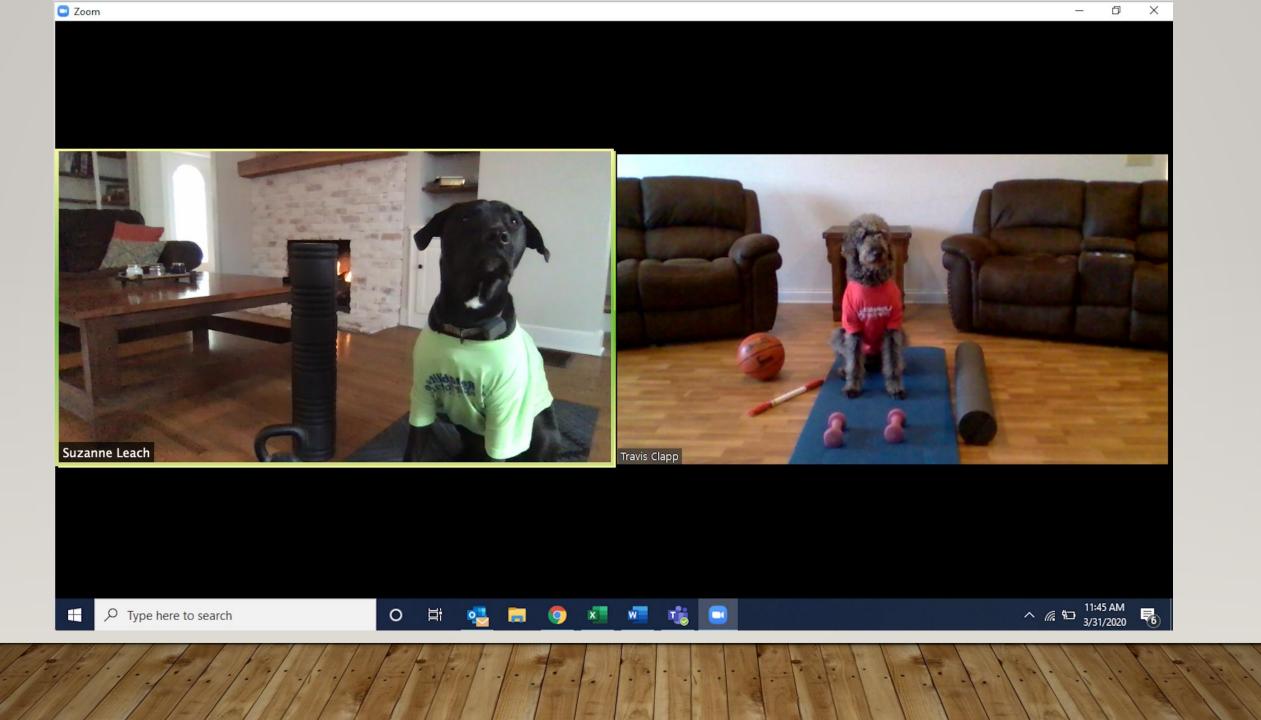
- What do providers need?
- What do patients need?
- What is realistic to think that patients have readily available to them at home?
- What is best from a technology standpoint?
 - Computer? Tablet? Cell?



HOME AND CLINIC SET UP







MARKETING

- How do we spread the word?
- Who do we target?
- How to best target?
- What do we say?
- How do we say it?



NON TRADITIONAL SETTING OPPORTUNITIES





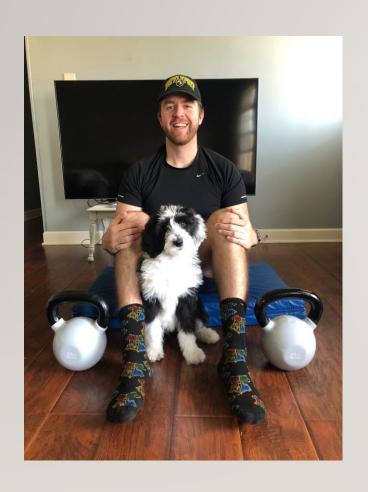


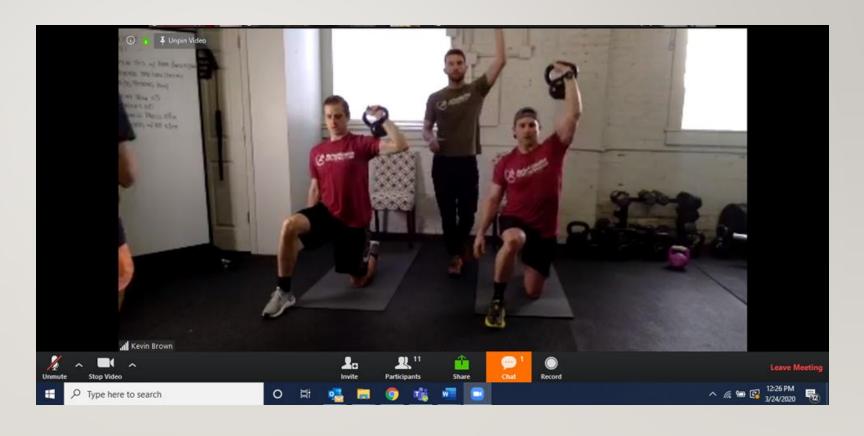
FREE FITNESS CLASSES TO STAY CONNECTED





CONTINUING TO SHOW OUR PERSONALITIES





THE GOOD

- Our team
- Ability to connect with people during a time when many people need human contact
- Continue to improve the health and wellness of people in our communities
- Created opportunities to enhance our profession outside of the traditional clinical setting
- Established service line to utilize for a multitude of situations- not just a pandemic

THE BAD

- Not face-to-face
- No better treatment then having your hands on a patient
- Harder to establish a relationship with a patient through a screen
- Technology is difficult for some

THE UGLY

- Lack of internet/cell service
- Insurance coverage
- What does reimbursement look like once we are out of a pandemic?

QUESTIONS?

TCLAPP@REHABILITATIONPERFORMANCE.COM





Please join us for upcoming webinars





The next scheduled session:

 November 3rd session – Telehealth: Moving forward (final session)







Healthcentric AdvisorsQlarant

Questions?

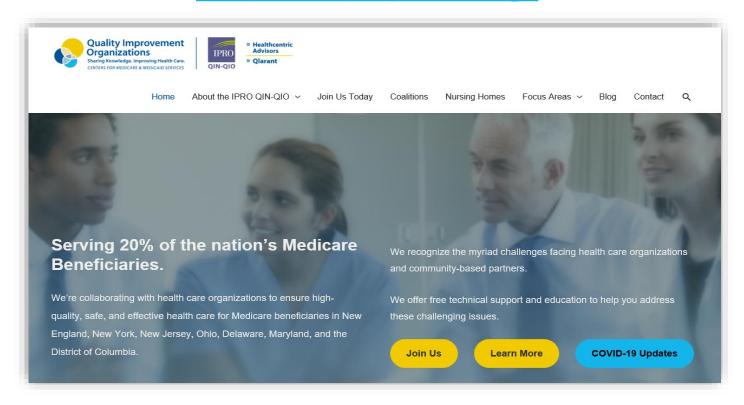
Christine Stegel: cstegel@ipro.org

Webinar materials:

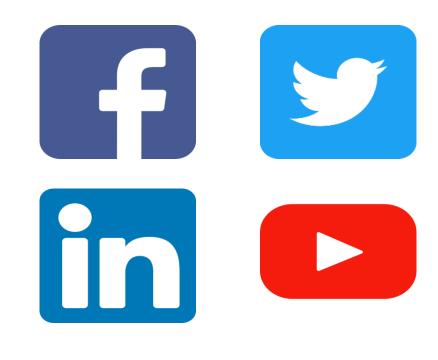
https://qi.ipro.org/2020/10/02/telehealth-webinar-oct20-physical-therapy/

Learn More & Stay Connected

https://qi.ipro.org/



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This material was prepared by the IPRO QIN-QIO, a collaboration of Healthcentric Advisors, Qlarant and IPRO, serving as the Medicare Quality Innovation Network-Quality Improvement Organization for the New England states, NY, NJ, OH, DE, MD, and the District of Columbia, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents do not necessarily reflect CMS policy. 12SOW-IPRO-QIN-T1-A4-20-214



