

May 8, 2020

**Patients for Outreach Who May Be Appropriate for Telehealth Visits.**

These guidelines are for practices that need help in choosing patients to schedule for telehealth visits over the next few weeks to months. This prioritization is a mix of clinical and practical.

**FIRST PRIORITY:**

- Post discharge visits/TCM visits: Every patient should have follow up after hospital or SNF discharge; many of these will be suitable for telehealth.

**SECOND PRIORITY:**

- Patients with significant chronic disease severity

Disease specific	<u>OR</u>	HNHU list
<ul style="list-style-type: none"> <li>• Patients with Diabetes with HgbA1c &gt;9</li> <li>• Patients with Uncontrolled HTN</li> <li>• Patients with COPD</li> <li>• Patients with CAD or CHF</li> <li>• Patients with CKD Stage 3 or 4 or ESRD</li> </ul>		<ul style="list-style-type: none"> <li>• High needs, high utilization (HNHU) patients (Top 5-10 % of patients by cost)</li> <li>• Prioritize (sort) within this list either by:                             <ul style="list-style-type: none"> <li>– risk score      <b>OR</b></li> <li>– total \$PMPM</li> </ul> </li> </ul>
<ul style="list-style-type: none"> <li>• <b>PLUS</b>, one or more of the following:                             <ul style="list-style-type: none"> <li>– Comorbid behavioral health disorder(s)</li> <li>– History of highly variable control of disease activity</li> <li>– Multiple chronic conditions</li> </ul> </li> </ul>		

**THIRD PRIORITY**

- Patients already scheduled for visits, if that visit can be suitably converted to telehealth
- Patient due for Medicare Annual Wellness visit, which is an opportunity for GOC conversation, review of medical issues, capture conditions for risk adjustment (if audio/video) and refer to specialists as needed