Video Visits at UCSF

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Agenda

- History and Current State

- Structure, Governance and Policies

- Implementation Tools and Strategies

- Metrics and Reporting

- Q&A

Expanding Care Access Though Video Visits

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Definition

Video Visit: An outpatient encounter, via real-time video, while the patient is in their home, workplace or other non-medical space.
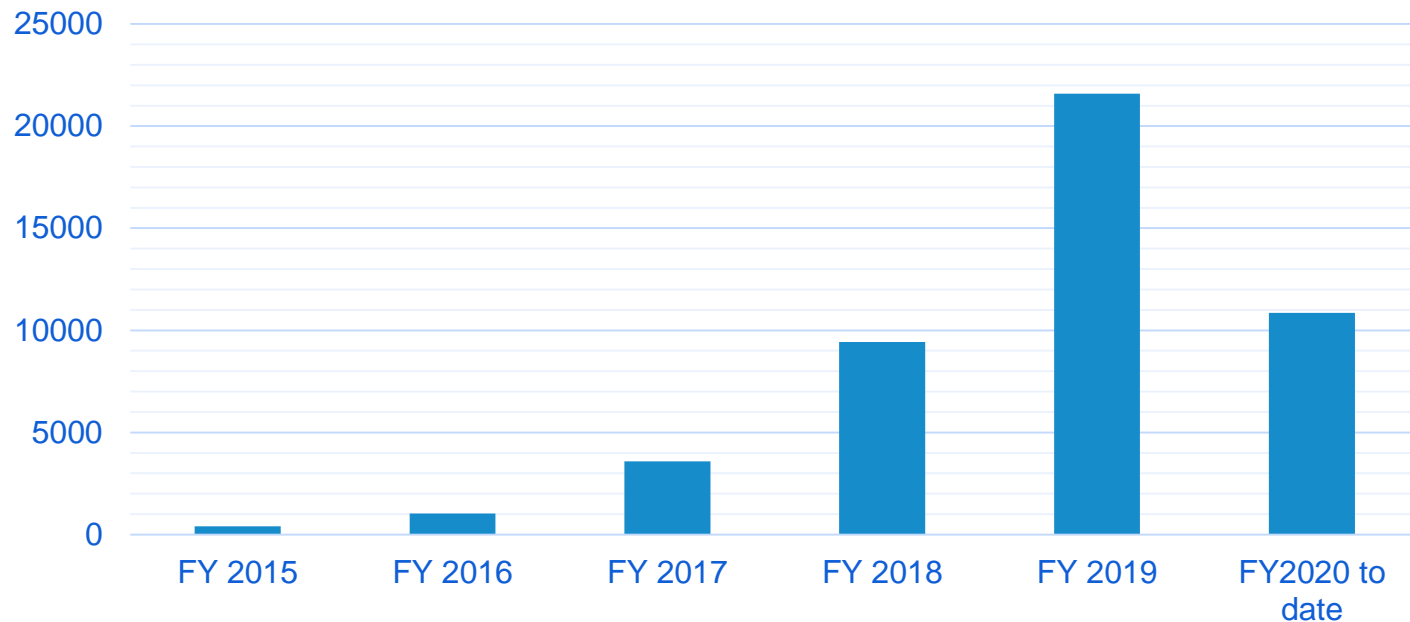
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History and Current State

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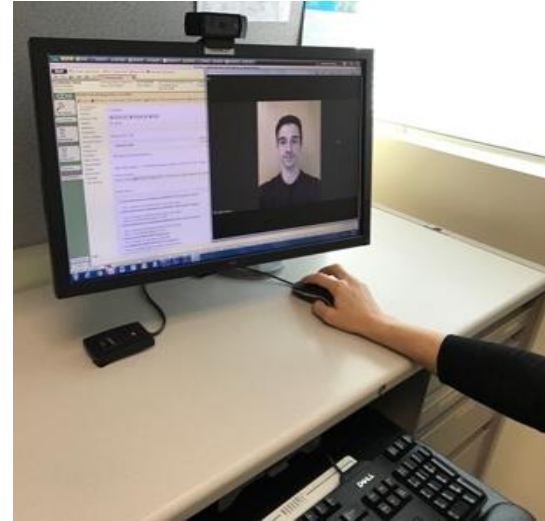
History

- Telehealth Programs office founded in late 2014
- "Dawn of time" for video visits is January 1, 2015
  - One department doing them earlier -- incorrectly

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Current Numbers

- ~140 completed video visits per clinic day

- 1-2% of total ambulatory volume; over 50% of visits in some clinics

- Available in over 120 clinics with over 800 participating physicians, nurse practitioners, dieticians, social workers, psychologists, speech language pathologists, others

- Have saved patients approximately

  - *8.3 million* miles of driving

  - $1.4 M in fuel costs

  - 170,000+ hours of driving

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Structure, Governance and Policies

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Resource Center Model

- Telehealth Resource Center provides tools, operational infrastructure and information so that any UCSF provider interested in delivering care via telehealth can do so effectively and compliantly

- Flagship programs get direct efforts and assistance

- Video Technology team reports through IT Operations

- Other institutions use other models

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Governance

- Flagship programs identified collaboratively with a multidisciplinary steering committee
  - C-suite and Strategy
  - Ambulatory Operations
  - Revenue Cycle
  - Health Informatics, Clinical Systems, Information Technology
  - Faculty Practice
  - Privacy, Risk, Legal and Compliance

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Staffing

- Director (1 FTE)

- Business Operations Manager (.5 FTE)

- Telehealth Trainers (2 FTE)

- Video Visit Coordinator (1 FTE)

- Administrative Assistant (.5 FTE)

- Physician Lead (.35 FTE)

- Program Manager (1 FTE)

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Telehealth Policy

Four key requirements:

- Clinical champion

- Initial clinical criteria for telehealth

- Documented workflows

- Training

One promise:

- Medicare charges will be adjusted off, RVUs still awarded

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Implementation Strategies and Tools

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Video Visit Mechanics

- Zoom is used for video
  - Providers have static, ten-digit meeting IDs
  - Zoom's waiting room feature is enabled
- Patients are given the meeting ID and an appointment time
  - Language interpreters can join as audio only
  - Family members can join from a different location
- Providers explicitly admit patients into the Zoom meeting from the waiting room to begin a visit

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Video Visit Mechanics

- Very little integration with our EMR (Epic)
  - Special visit type: VIDEO VISIT
  - *.telemed* smart phrase
    - Documents consent as required by California law
    - Alerts coding teams to apply appropriate POS and modifier
  - Modified schedule for automated reminders

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Clinic Engagement

- Education and outreach

  - Video visits now available!

  - Yes, we get paid for these!

  - Patients love them!

  - Really, we get paid for these!

- Clinics and providers self-select – *pull* rather than *push*

Implementation Process

The Telehealth Resource Center provides policies, training, documentation, assistance, support

Clinics do most of the implementation

- Establish clinical criteria for telehealth

- Modify office workflows

- Equip workstations with cameras

- Schedule and conduct telehealth appointments

Implementation Process

- **Introduction to Video Visits presentation**
  - Implementation Process
  - Roles
  - Workflows
  - Space and Equipment
  - Law, Regulation and Policy

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Implementation Process

- *Video Visits Implementation Guide*
  - What you need to *know*
  - What you need to *decide*
  - Includes a checklist
- Reach out to the Telehealth team as often as necessary

Implementing Video Visits at UCSF
A Guide for Clinics

Telehealth Resource Center
telehealthresourcecenter@ucsf.edu

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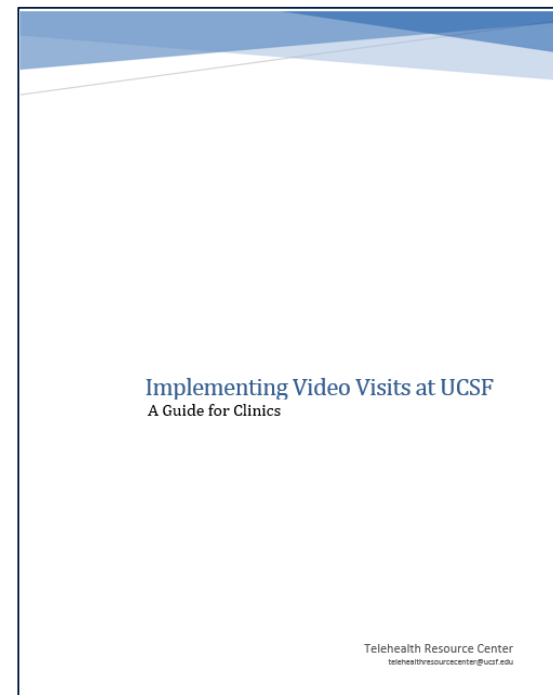
Training

- Divided by audience: schedulers, MAs, providers
- Takes many forms:
  - Instructor led, in-person
  - Online
  - Tip sheets
  - At the elbow
- Materials are customized to reflect clinic-specific workflows

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Patient Awareness

- Brochures, posters, screen images available to encourage patients to ask physicians if a video visit might be appropriate for them

- Instructional brochures to help patients set up devices/computers

- videovisit.ucsf.edu for online instructions, a test link and a 24/7 support number

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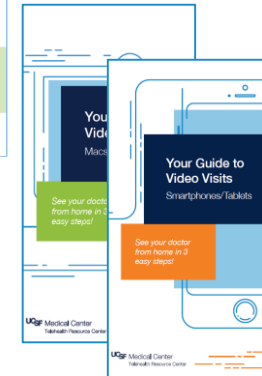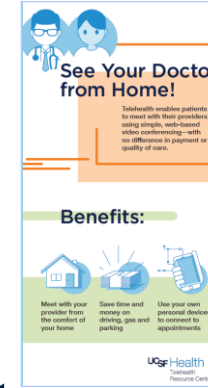
Guiding Principles

1. We don't call them pilots.

2. We provide information, decisions are made by the people actually doing the work.

3. We provide as much (or as little) help as is needed.

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Metrics and Reporting

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Patient Satisfaction

- Patients completing a video visit get a special version of our standard patient satisfaction survey (Press-Ganey/CAHPS)

- Initiated August, 2016; ~1400 surveys, 212 providers

- Data are preliminary – *n* for telehealth responses is about 10% of in-person responses, also selection bias

- Ratings for telehealth visits are consistently higher than in-person results on every comparable question

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Item	In-Person	Telehealth	Δ
Overall Doctor Rating "9-10"	87.4	90.3	+2.9
Recommend this provider office	92.1	94.1	+2.0
Did provider explain in a way you understand?	93.4	95.6	+2.2
…listen carefully to you?	94.1	96.4	+2.3
…give easy to understand instructions?	92.1	94.6	+2.5
…know important info medical history?	88.7	91.5	+2.8
…show respect for what you say?	95.3	97.3	+2.0
…spend enough time with you?	92.9	95.4	+2.5
Confidence in care provider	95.2	96.3	+1.1
Likelihood of recommending practice	94.7	96.2	+1.5

Provider-based comparisons, updated November 2018

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Patient Comments

This was **as good as** an in-person office visit.

Excellent experience!

The telehealth was a great experience. I live approximately 250 miles away. It was so important to see my specialist from the comfort of my rural home town. This **saved me money, travel time, and most of all the stress of traveling**. Thank you!

The best appointment ever! Easier to communicate with the provider.

As I travel to UCSF from the Sacramento area, the telehealth visit is **VERY VERY convenient**. Also, I completely believe that the telehealth session was fully effective for this check-in with Dr. Liu. **It was just like sitting there in the office** with her, but easier.

Telehealth is **convenient and wonderful**.

This really helps me. It is a **6 hour drive each way to UCSF** and the airfare quote was **over $1200** round trip.

The telehealth has been **a game changer in a good way**. We live four hours away, and this allows us to check in with her doctor and have monitor her without having to take an entire day off of school plus traveling time. **Thank you for offering this program**.
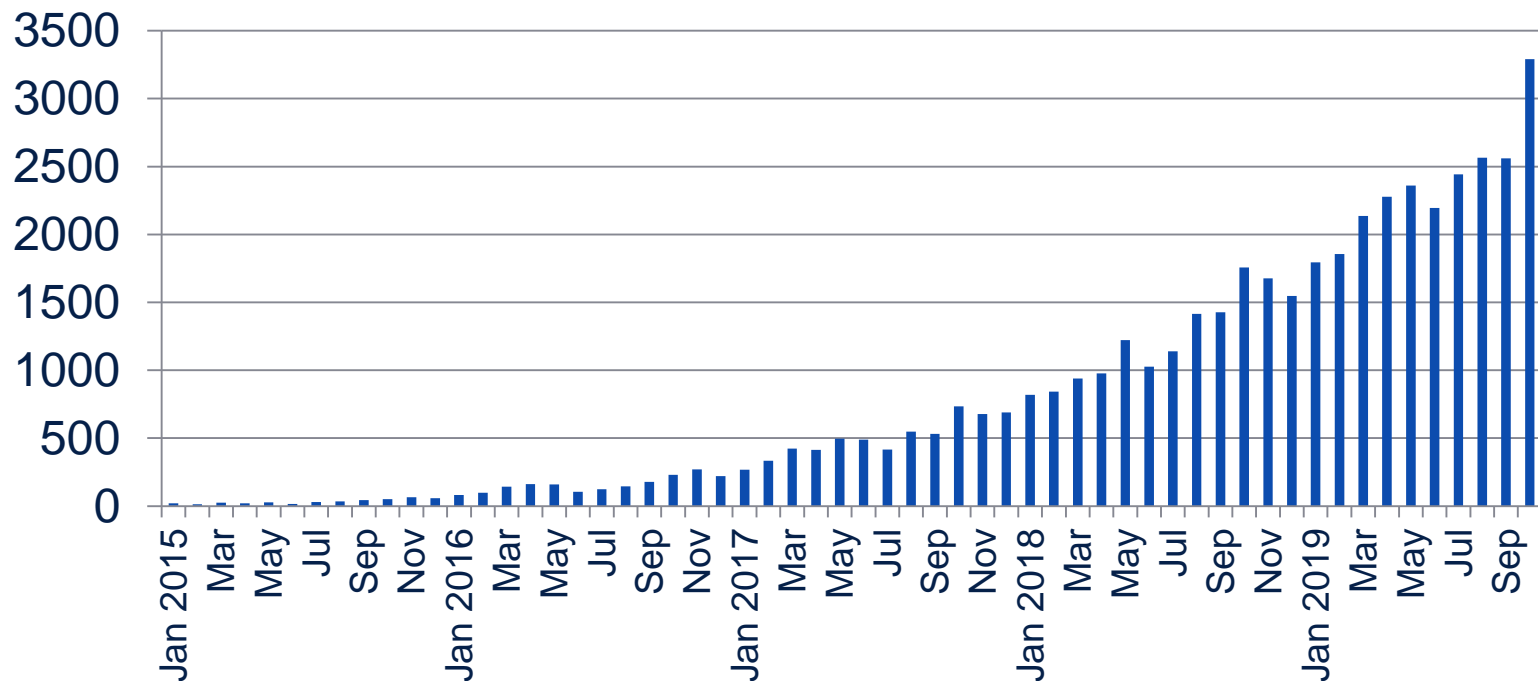
Highly informed, extremely clear and constructive discussion - could not wish for better.
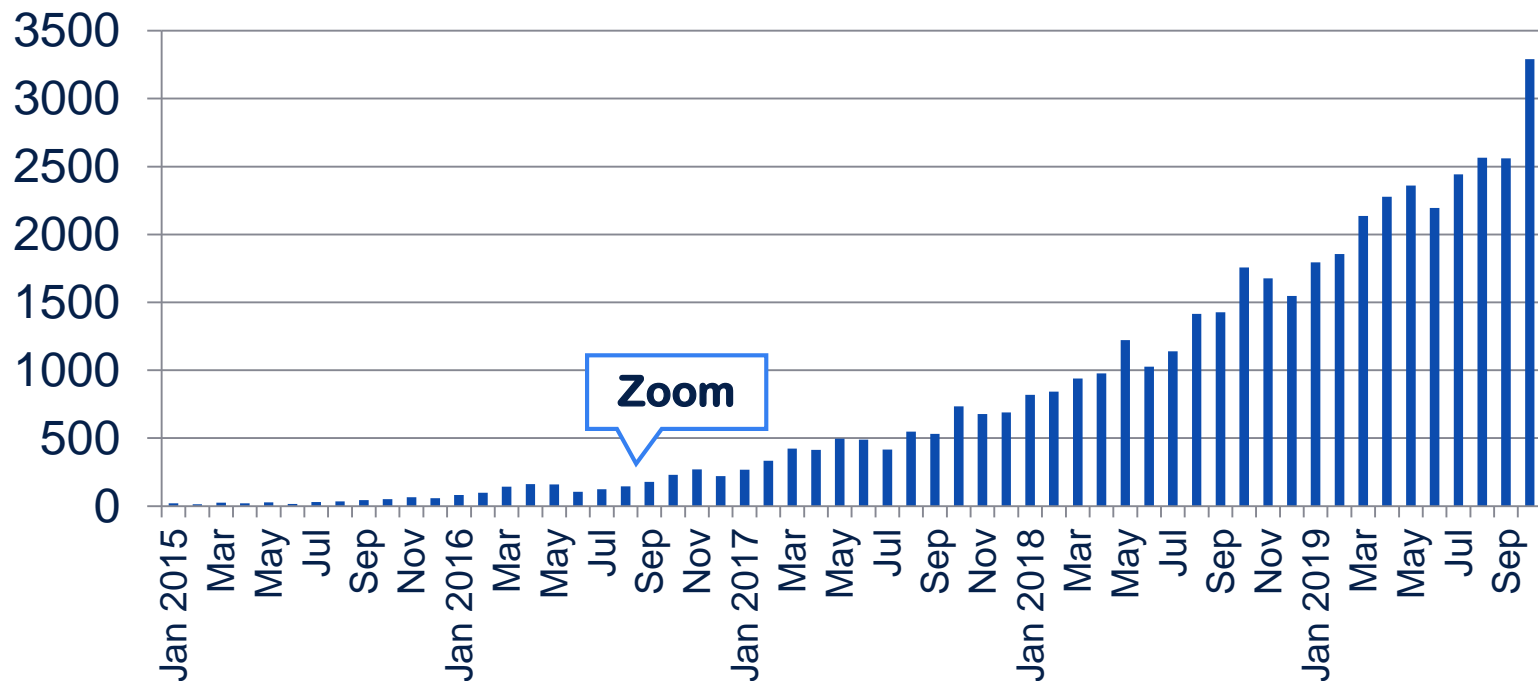
This saves me an entire day of driving and the money for gasoline. **This is a wonderful method for a doctor's appointment.**

It was the most prompt, meaningful encounter with UCSF that I have had in a long time. You should spread telehealth more widely.

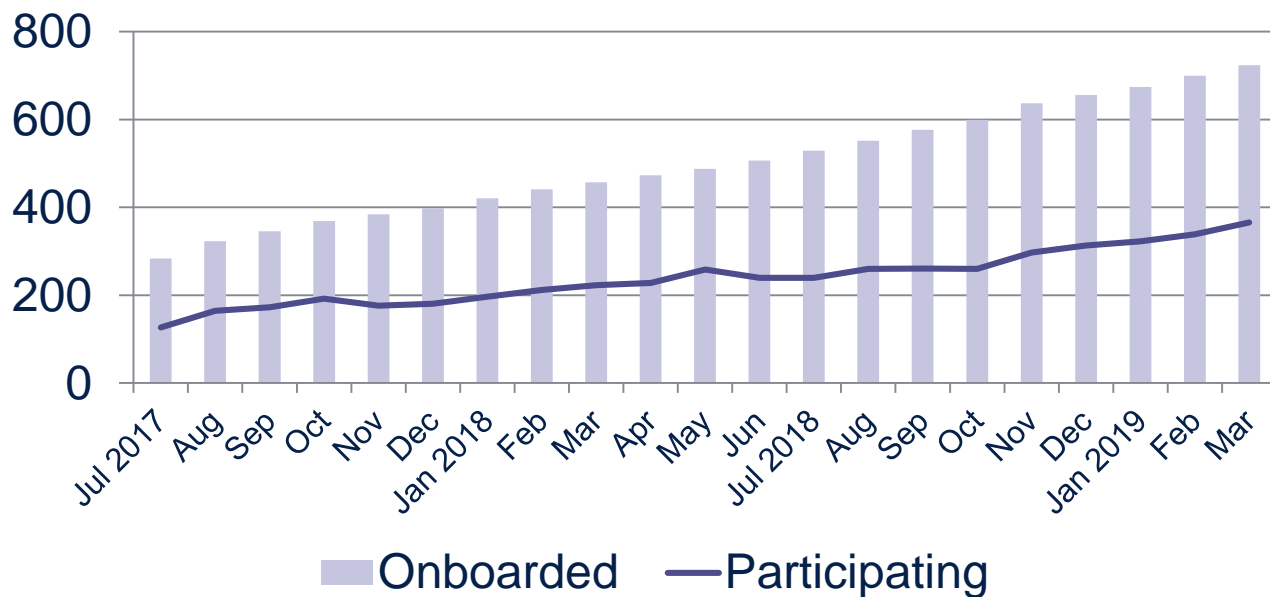The telehealth visit worked very well and it **allowed my primary neurologist to take part in the visit.**
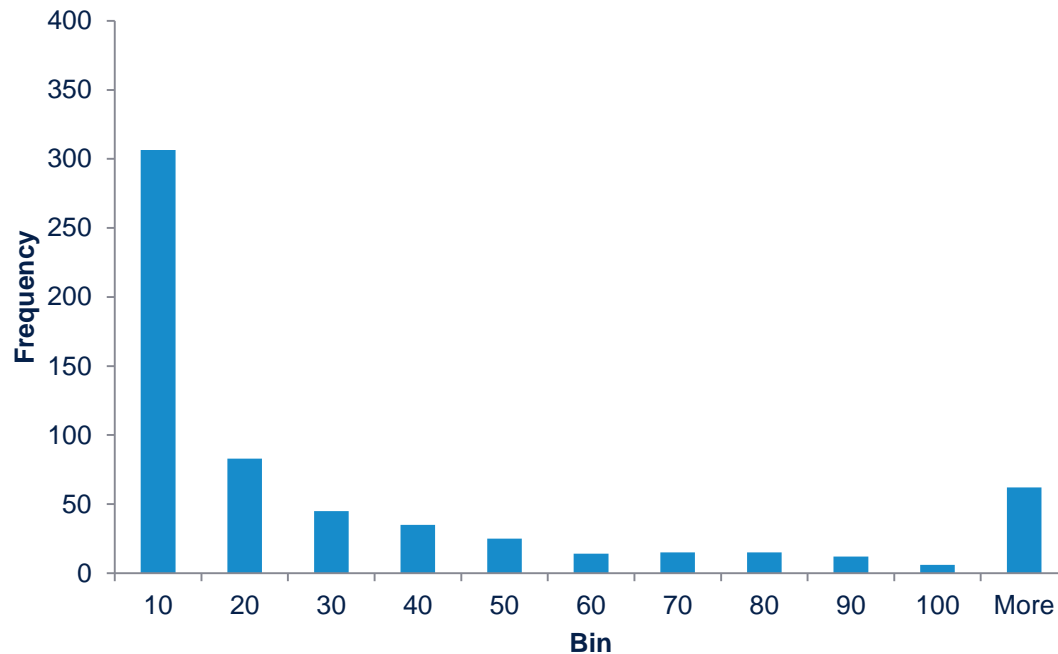
Monthly Utilization over Time

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Provider Onboarding and Participation

Frequency of Provider Utilization

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Q&A

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