



As technology provided greater communication mobility and flexibility in our culture at large, patients started to push the idea of a video-assisted virtual physician visit. The convenience, speed and flexibility potential were highly compelling.

While many within the healthcare delivery system were open to the concept, there were many obstacles to overcome. Even if patient demand was there, would providers be comfortable with this type of non-face-to-face visit? Would rapport and genuine interaction still be possible? How would outcomes be affected?

There were also a whole slew of logistical issues to work out. First was creating a technology platform to support this type of encounter. There were also legal and compliance questions, insurance coverage, coding and billing, changes, impacts

on workflow, privacy and security. And most importantly, what would be the financial impact? Would this truly represent a lower cost method of healthcare delivery?

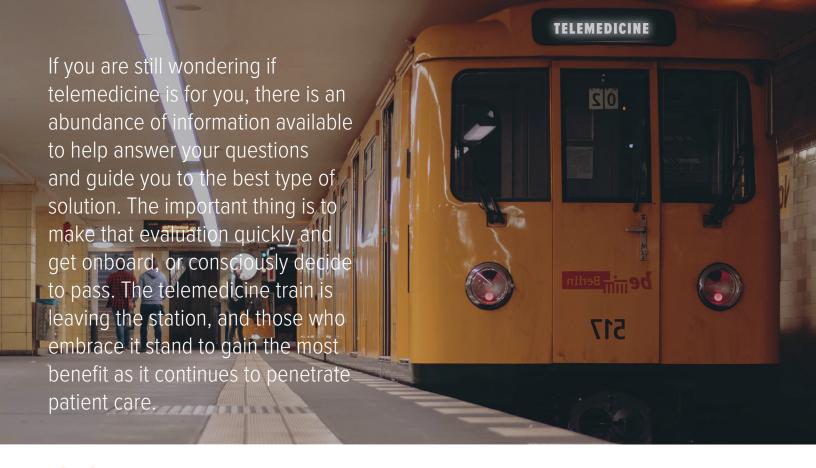
THE TRAIN IS LEAVING THE STATION

Over more than a decade of development, telemedicine has matured into a viable & fast-growing avenue for healthcare delivery in its own right.

After some early growing pains, all of the major issues have been addressed with solid solutions. Nearly all states in the U.S. have updated their laws to accommodate this type of healthcare delivery, and payors – including CMS – provide reimbursement for qualifying encounters.

Despite some early glitches, technology platforms now are extremely solid and increasingly intuitive for both patient and provider. And best of all, the outcomes data coming back shows results on-par with face-to-face visits. Providers are comfortably and reliably providing service to a willing patient population who love the convenience of at-home or on-the-go visits with their physician.

Let's not forget the bottom line. Financial data now available is confirming early estimates that telemedicine is an economical alternative to in-office visits.



SO, WHAT'S NEXT?

With telemedicine going mainstream, what's the most important consideration in making it a successful part of your practice?

If you are already utilizing telemedicine, or are moving that direction, the next most important thing for you is to ensure that it is tightly integrated in your approach for smooth, seamless interactions with patients and efficient workflow and delivery capability for providers.

In terms of systems and workflow, we refer to removing the friction points – usually manual processes or gaps in workflow or systems that disrupt efficient care delivery and cause unnecessary slowdowns or frustration with the experience. These friction points are often the result of a telemedicine solution being brought in as an add-on type solution rather than part of the integrated automation environment.

We've identified five key friction points to consider in making your telemedicine solution seamless for both patients & providers.

Overcoming Telemedicine FRICTION POINTS

- 1. Seamless Scheduling
- 2. Integrated Charting & Rx
- 3. Integrated Coding & Billing
- 4. Communication, Compliance & Education
- 5. Reporting

Seamless Scheduling

Patients who want the convenience of a telemedicine visit also want the ease of scheduling and managing that visit electronically, most often from their mobile device. Telemedicine appointments should be an integrated part of your scheduling system, accessible through the patient portal.

Simple Scheduling

Easily self-schedule from the patient portal interface or a website link, including mobile access.

One-click Access

Reminder notifications should include a one-click link to access the telemedicine video encounter system so the patient can easily get on and be ready for the visit. The provider's schedule should also include a one-click access link to start the visit at the appointed time.

Automated Reminders

The system should send automated reminders in the format and language preferred by the patient (such as test, email or voice).

Confirmation and Changes

Patients can confirm the appointment, or request rescheduling from their device. Requests are automated and included in staff workflow.



Integrated Charting & Rx

Telemedicine visit charting should be a native part of the automated charting & health records (EHR) system. Key features include:

NATIVE CHARTING

The encounter should be captured in the charting system with no limitations. Templates, specialty-specific customization (e.g. for family medicine, mental health, pediatrics, etc.) should all be available.

NOTES & IMAGES

All notes and images, particularly those used and evaluated during the visit, should all go directly into the patient chart.

PRESCRIPTIONS

ePrescribing is a given, and all scripts and orders should be included in the chart without need for manual intervention.

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For greatest efficiency, coding and billing for office visits should already be seamlessly flowing from the EHR to the billing system. Telemedicine visits need to follow this same pattern. At the conclusion of the visit, codes and other requisite billing information from the encounter should flow automatically into the billing system for processing.

Also, ensure that the billing system is updated on the unique coding and reimbursement requirements for telemedicine visits. A robust billing system will be able to track all of the unique features and exceptions by insurance carrier, state, etc. to ensure high first-pass acceptance. Lack of attention in this area can create a lot of manual intervention and inefficiency.

Communication, Compliance & Education This is a prime area for automation and efficiency, since to lowed in the property and to be more electronically.

This is a prime area for automation and efficiency, since telemedicine patients tend to be more electronically connected and responsive. Here are some key ways to capitalize on this opportunity:

AUTOMATED ALERTS & REMINDERS

Based on the treatment plan, automated reminders can be set to go out to the patient electronically to help them with compliance and sticking with the protocols. Automated health alerts can also be included in this setup. This underscores the need to have telemedicine charting integrated with the base system to avoid the need for manually managing these functions.

REPUTATION MANAGEMENT SYSTEM

This function should automatically include telemedicine visits, as these patients are more likely to interact with social media requests. Additionally, you will want to know how patients are perceiving your telemedicine care delivery, and this can be a great channel for unbiased feedback. When applicable, patients enjoy the convenience of telemedicine, and offering it is a great way to improve your scores.

COMPLIANCE WATCH

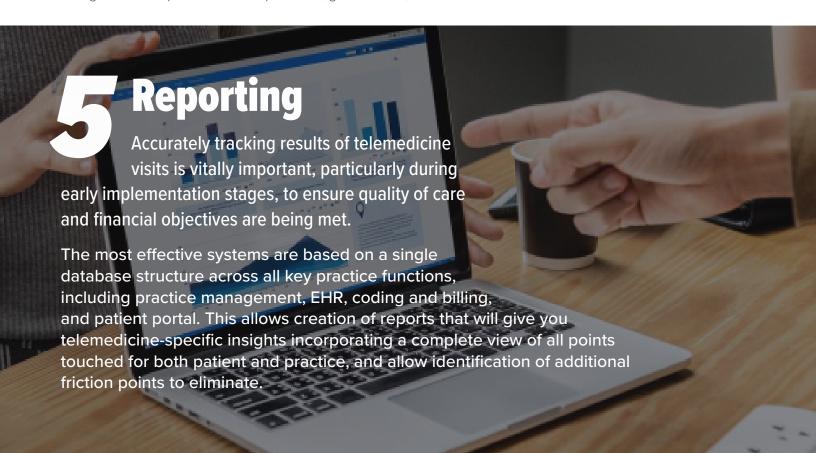
Utilize an automated system that monitors patient compliance and reports back to the practice. This can include tracking if prescriptions are filled, education materials are downloaded, etc.

EDUCATIONAL MATERIALS

Automated electronic distribution of educational materials to the patient through your patient portal or homepage should be seamless for telemedicine patients as for any other.

MESSAGING

Ensure telemedicine patients are included in the portal-based communication capability so they can securely message staff and providers with questions, get answers, etc.



SEAMLESS, FRICTIONLESS FUTURE

Regardless of where you are on the telemedicine implementation scale, it's increasingly clear that this emerging care delivery mode will be an important and growing part of our future healthcare landscape. Telemedicine is no longer an outside anomaly that must somehow be bolted onto the system.



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