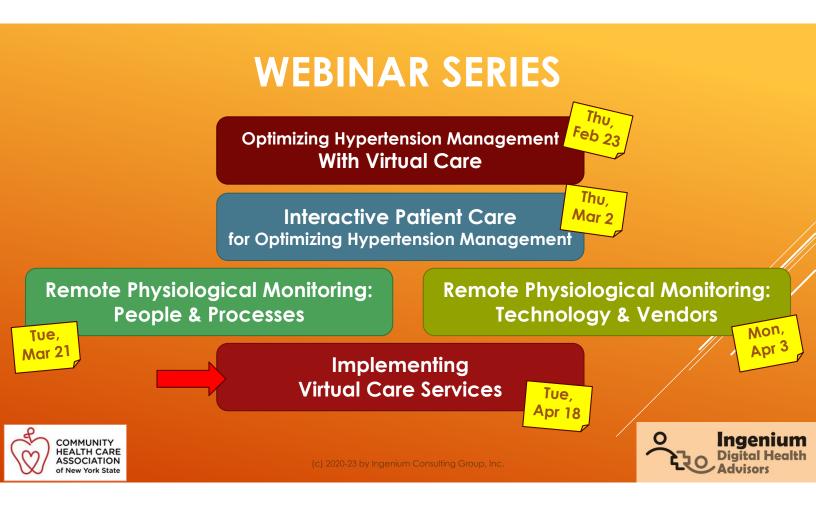
OPTIMIZING HYPERTENSION MANAGEMENT IMPLEMENTING VIRTUAL CARE SERVICES



COMMUNITY HEALTH CARE ASSOCIATION of New York State

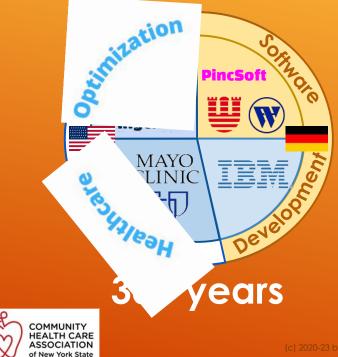
April 18, 2023 | presented by Christian Milaster







ABOUT CHRISTIAN







MY OBJECTIVES FOR TODAY

"Bringing it all Together" "Making it Real"



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YOUR PERSONAL ARCHIVE



Please find below the webinar recordings and links to the presentation slides (click on the image to open the PDF).

You will also find instructions on how to schedule your organization's consulting session as well as additional resources.

For any questions contact Christian at christian.milaster@ingeniumadvisors.net or (657) 464-3648.

Optimizing Hypertension Management With Virtual Care

Optimizing Hypertension Management With Virtual Care



 \heartsuit

COMMUNITY HEALTH CARL ASSOCIATION of New York State



OPTIMIZING HYPERTENSION MANAGEMENT password chcanys Ingenium

Lo Digital Health Advisors

VIRTUAL CARE

Telehealth Telemedicine Video Visits RPM

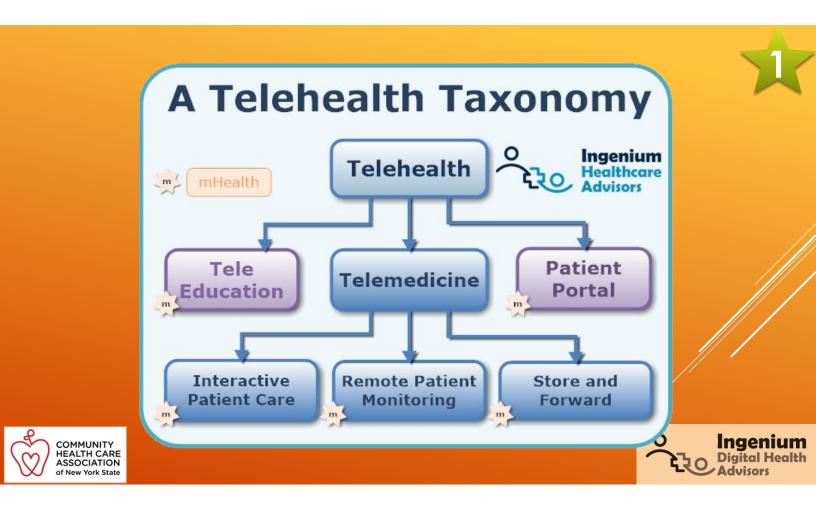


Telemedicine Practicing Medicine at a Distance





7



VIRTUAL CARE MODALITIES Simple **More Complex** Synchronous Remote **Telephonic** Audio/video audio/video **TeleVisits** Care tele exams Periodic Continuous **Patient-generated** Remote Remote health data **Physiologic Physiologic** (PGHD) **Monitoring (RPM) Monitoring (RPM)** Asynchronous Store & forward **Digital** Secure photos, audio, **Therapeutics** Texting video, or data (DTx)

HYPERTENSION MANAGEMENT

Controlled Blood Pressure in a patient population.

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New Definition of Hypertension

Systolic BP greater than or equal to 130 mmHg, and diastolic BP greater or equal to 80 mmHg, or currently taking medications.

130:80

For an adult 45 years of age without hypertension, the 40-year risk for developing hypertension is 93% for African Americans, 92% for Hispanics, 86% for whites, and 84% _______ for Chinese adults. _______

J Am Coll Cardiol 2018;71:e127-e248.

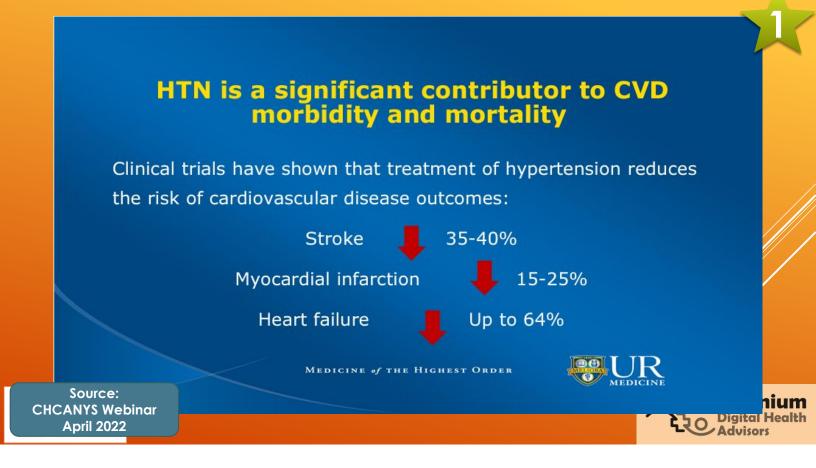
MEDICINE of THE HIGHEST ORDER



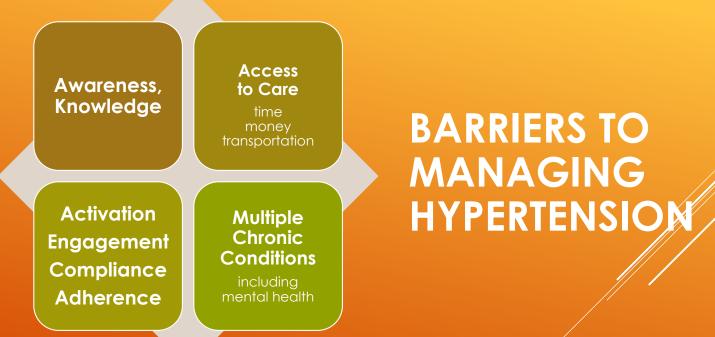
Digital Health

Advisors

Source: CHCANYS Webinar April 2022



Limited or Lack of





WHY LEVERAGE VIRTUAL CARE FOR HYPERTENSION MANAGEMENT?

Integrate virtual care modalities to transform your care model to

- improve access to care
- activate patients to actively participate in their care
- increase patients' awareness and knowledge
- improve patient and provider engagement and satisfaction
- improve HTN management efficiency and outcomes
- enhance competitiveness in a modern care delivery landscape
- meet patients' needs and expectations





IMPLEMENTING VIRTUAL CARE SERVICES FOR OPTIMIZED HYPERTENSION MANAGEMENT





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CHANGE MANAGEMENT

Change Management

- Biggest Breakdown in Innovation Adoption is not managing the Change
- Resistance to Change is part of Human Survival
- Need to appeal to Emotions, to Logic and to Social Acceptance/Herd





ADKAR[®] FRAMEWORK

Raise WARENESS

• Define the Vision, promote the Solution

Create DESIRE

• Demonstrate the Benefits

Supply KNOWLEDGE

- Use experienced advisors & train adequately Build ABILITY
- Provide opportunities for Learning

Supply REINFORCEMENT

• Ensure Accountability, Continuity, Support

Change Management



WITHOUT CHANGE MANAGEMENT...

Change Management

Ingenium Digital Health Advisors



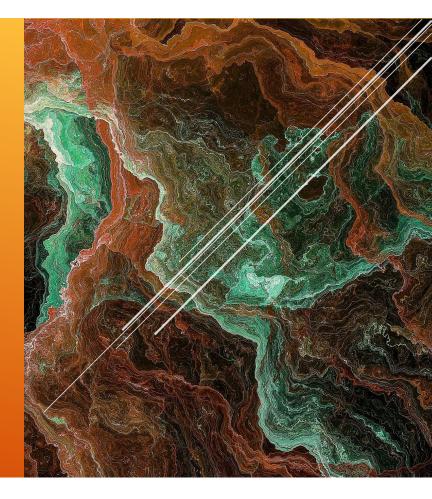
- confused
- embarrassed
 - frustrated
 - reluctant
- resistant



ADKAR MODEL FOR 1 SUCCESSFUL, SUSTAINABLE CHANGE 1 Awareness Desire Knowledge

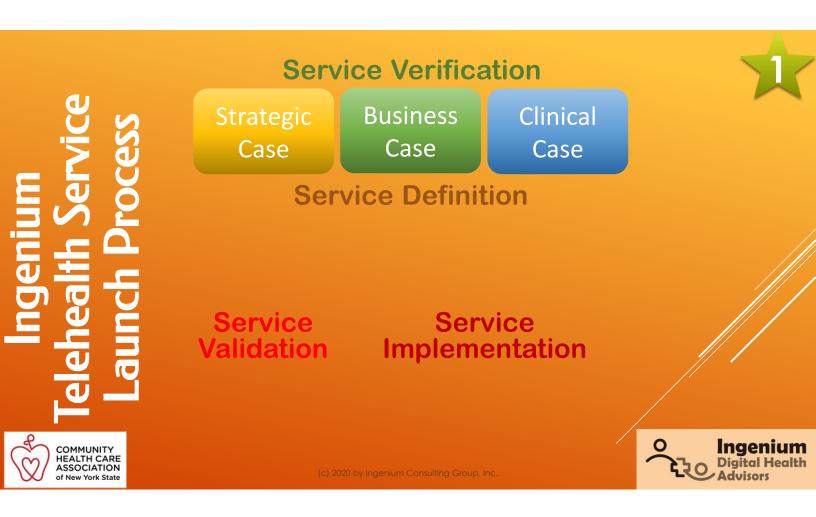
Awareness	Desire	Knowledge	Ability	Reinforcement	Confusion
Awareness	Desire	Knowledge	Ability	Reinforcement	Resistance
Awareness	Desire	Knowledge	Ability	Reinforcement	Reluctance
Awareness	Desire	Knowledge	Ability	Reinforcement	Frustration
Awareness Association of New York State	Desire	Knowledge	Ability	Reinforcement	Backsliding Digital Health Advisors

LAUNCHING VIRTUAL CARE SERVICES



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STRATEGIC CASE



Defines the alignment with strategic objectives For HTN Management:

 Defines efficacy and impact on hypertension mgmt., including patient activation





BUSINESS CASE

- Defines the business model and/or financial return-on-investment calculation
- For HTN Management:
 - Tie outcomes to quality measures or grant success criteria



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Ingeni

Digital Health

Business

Case

Defines the clinical efficacy of the intervention

For HTN Management:

 Describe impact on patient activation/adherence, impact on health status







WORKFLOW



- Prior to selecting the technology, define the desired experience for patients, providers, and staff:
 - Become an Informed Buyer
- Look at all 7 elements
- Focus on Happy Day Scenario first





TECHNOLOGY

Technology

- Armed with a set of expectations, evaluate existing technology or review new technologies/vendors
- Adjust Workflows according to the Vendors' capabilities
- Incorporate new ideas from innovative vendors



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OPERATIONALIZATION

Operatio- 2 nalization

Digital Health

Define how this new telehealth service (e.g., video visits with patients in the HTN Mgmt. RPM Pgm.) will be operationally and technically supported. Identify legal barriers, financial constraints, staffing challenges, awareness building, etc.







NO MORE PILOTS! USE PROOF OF CONCEPTS.

Proof-of-Concept







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VALIDATE ASSUMPTIONS

Proof-of-Concept

Diaital Health

The purpose of a Proof-of-Concept is to Validate Assumptions

- 1. Identify all Assumptions (incl. hidden ones)
- 2. Define Metrics to validate Assumptions
- 3. Establish Measurement Systems
- 4. Launch PoC on a small scale
- 5. Tweak workflows, technology, training, etc.
- 6. Conduct PoC until confidence in validation



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RECAP: RPM PEOPLE & PROCESSES

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Remote Patient Monitoring Remote Physiological Monitoring

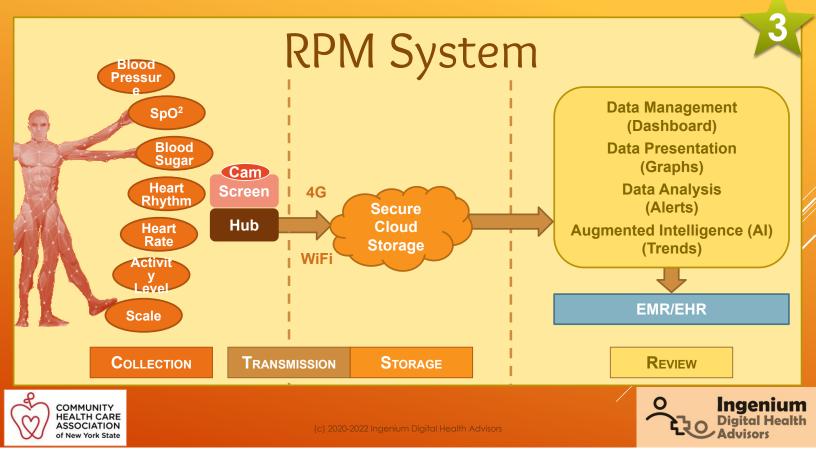
The continuous or periodic collection, transmission and review of physiological data to inform care decisions.

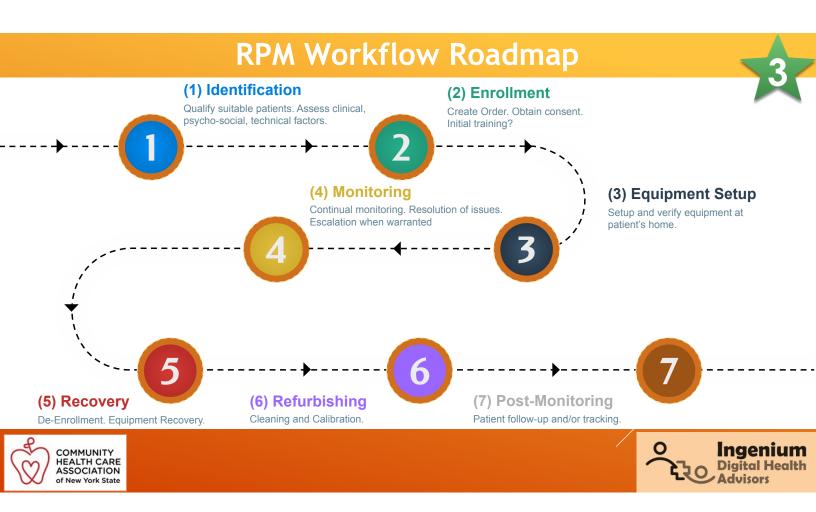




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RPM TECHNOLOGY OPTIONS

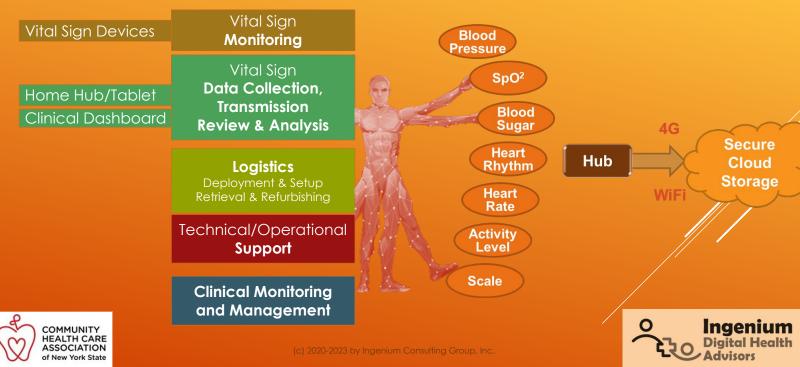


WORKFLOW DRIVES TECHNOLOGY

Don't put the horse behind the cart







RPM VENDOR OPTIONS



- Vital Sign Monitors (Bluetooth, Cellular)
- **RPM Platforms (Dashboards, Analytics)**

CareSimple

() mmHg Reconnect 4 Health accuhealth.

ONE HEALTHCARE

O Athelas



phys iQ

Caregility

-

2-in-1 Monitor

COMMUNITY HEALTH CARE ASSOCIATION

of New York State

ASSOCIATION

of New York State

ECG



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Digital Health

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RPM SYSTEM OPTIONS

Life365°.health

welldoc biobeat

😭 wellbox'

Eko

C CADENCE

Vital Sign Devices	Vital Sign Monitoring		BYOD		Purchased		Leased	
	Vital Sign Data Collection, Transmission Review & Analysis		BYOD		RPN		A Vendor	
Home Hub/Tablet Clinical Dashboard			Call	Wireless (Bluetooth)		Automated		
			In		os on Hub		Tablet	
	Logistics Deployment & Setup Retrieval & Refurbishing		DIY		RPM Technology		RPM Service Provider	
	Technical/Operational Support			V		ndor		
			Internal (RNs) External (RNs)					
	Clinical Management			-	iternal (Physicians)		. ,	
COMMUNITY HEALTH CARE								O Ingenium

CASE STUDY #1



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AdvantageCare Health Centers

- RPM Program Overview
 Clinical Aims
 Equipment
- RPM Program Challenges
 Discussion







CASE STUDY #2



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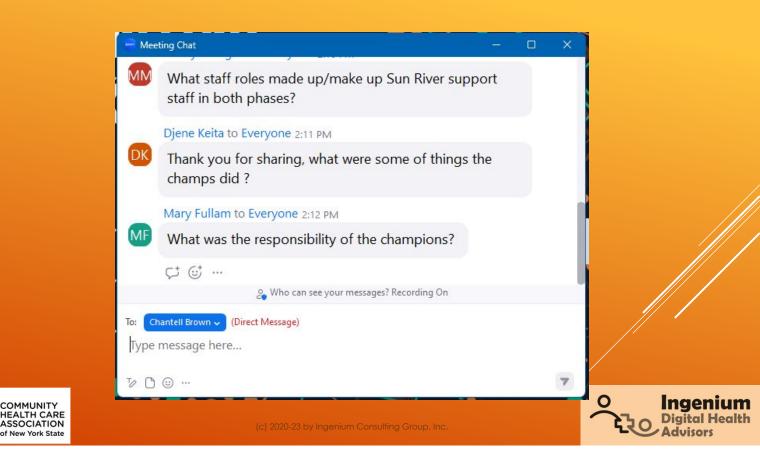
Sun River Health

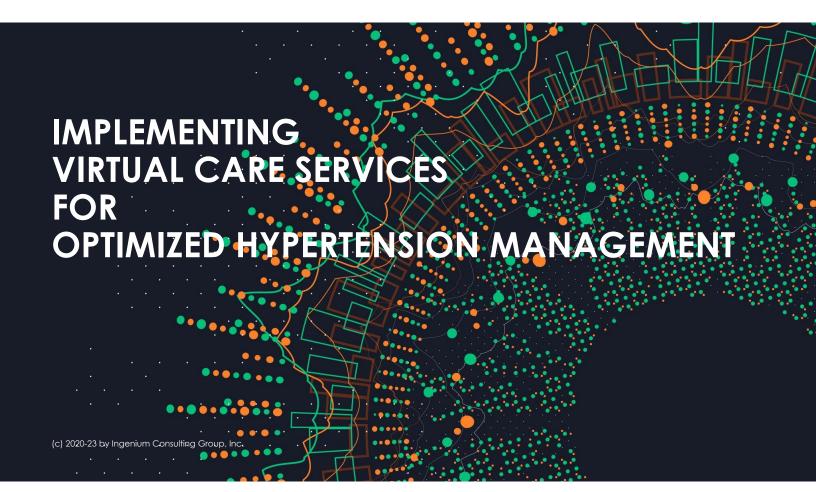
- RPM Program Overview
 - History & Previous Phases
 - Current Clinical Design
 - Technology & Processes
- RPM Program Challenges
 Discussion











IMPLEMENTING INNOVATION: A MULTI-DISCIPLINARY APPROACH



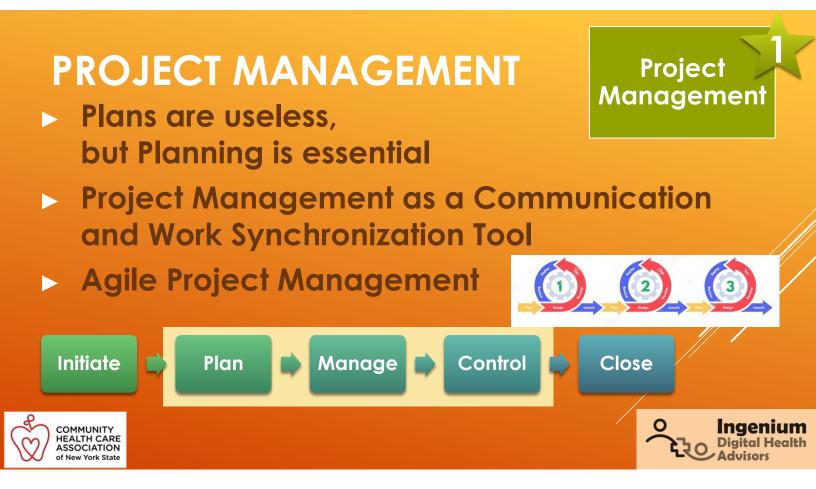
LEADERSHIP

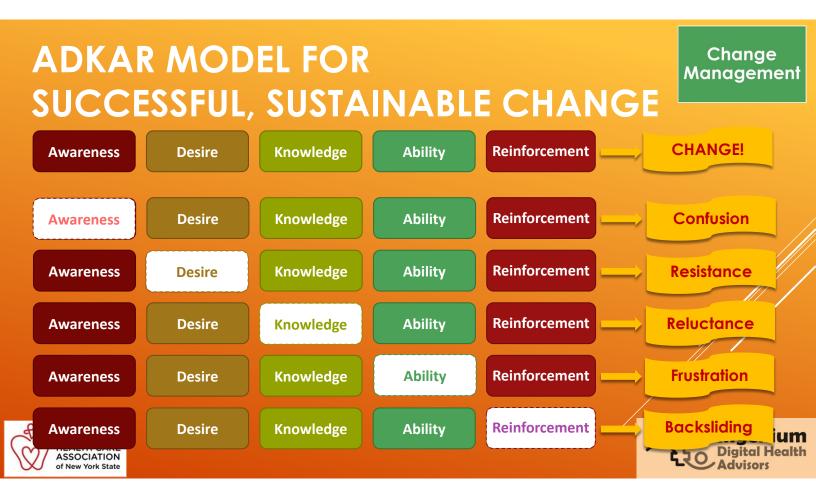
- Communicate the Vision
- Create Inspiration
- Set Expectations
- Achieve Priorities
- Provide Resources





Leadership







DESIGN THINKING

- Focused on User Experience: Patients, Clinicians, Staff
- **Focused on Observations**
- Think Outside the Box

Empathize Design Ideate Prototype Validate















Advisors

Design

Thinking





Exception Scenario

possible breakdowns

WORKFLOW DESIGN BY SCENARIO

Telehealth Scheduling Alternate Scenarios

Exception

Alternate



IMPLEMENTING INNOVATION: A MULTI-DISCIPLINARY APPROACH



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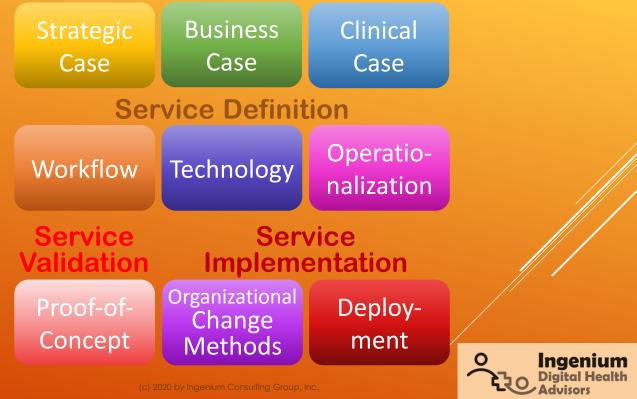


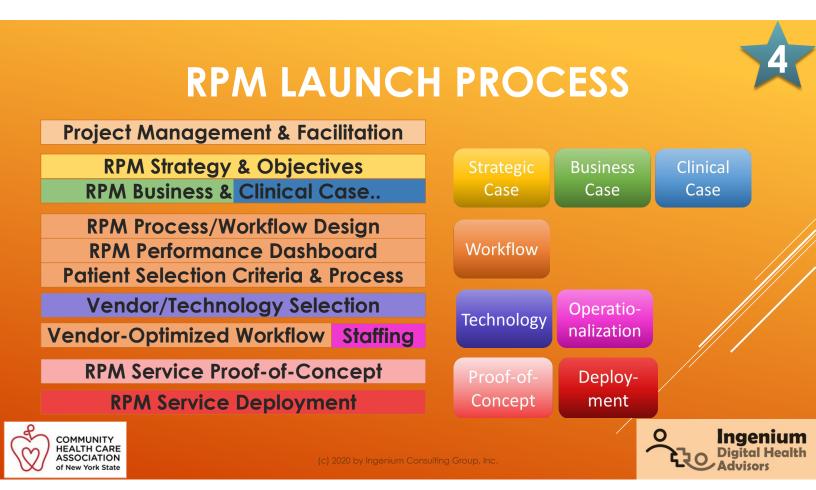
LAUNCHING REMOTE PHYSIOLOGICAL MONITORING

Service Verification

Telehealth Service Launch Process

of New York State







4 TECHNOLOGY SELECTION

- Don't put the Horse behind the Car Define workflows & requirements first, then select a solution.
- Requirements include
 - User Experience: Clinicians, Patients, Staff
 - Features & Capabilities: e.g., copays, assessments, in-visit/post-visit communication, etc.
 - Integration Needs: e.g., EHR, Scheduling





After the Q&A

Key Takeaways Action Items Next Steps

Contact Info:

<u>Christian.Milaster@IngeniumAdvisors.net</u> <u>IngeniumDigitalHealth.com</u> **657-Ingenium (464-3648)**





Technology



PLEASE COMPLETE THE SURVEY!

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WHAT ARE YOU MOST INTERESTED IN LEARNING?

- How to begin implementing a virtual care program with HTN
- What does it take to implement a HTN Mgmt. Program with RPM?
 Are there external services that we could utilize if we do not have the internal capacity to manage such a program?
- Learning new strategies to expand RPM modalities
- How to achieve compliance with BP measurements
- How often is dashboard checked?
- What resources can you use to monitor vital signs remotely?
 - I) How is the equipment supplied?
 - > 2) How are technical problems dealt with?
 - 3) How does the information get inputted into ECW?
 - 4) Is this billable for nursing visits?
 - 5) How to get RPM equipment to my patients
 - 6) How to incorporate RPM into patients' care





KEY TAKEAWAYS

Put your Major Insights, Learnings into the Chat.

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- 1. Think about Implementation as an Undertaking in Change Management (ADKAR Model)
- 2. Develop a Strategic Case, Business Case, Clinical Case
- 3. Don't put the horse behind the cart: First define workflow and requirements, then evaluate & select the technology.
- 4. Success is achieved through well-documented workflows (happy day scenario & alternate scenarios)
- 5. Start with small Proof-of-Concept to Validate Assumptions
- 6. Leadership support & Clinician Leadership is critical
- 7. Performance Management from Day 1 is key to success.







ACTION ITEMS

Jot down 1-3 Action Items you will take on now! Share in the Chat, if you'd like.

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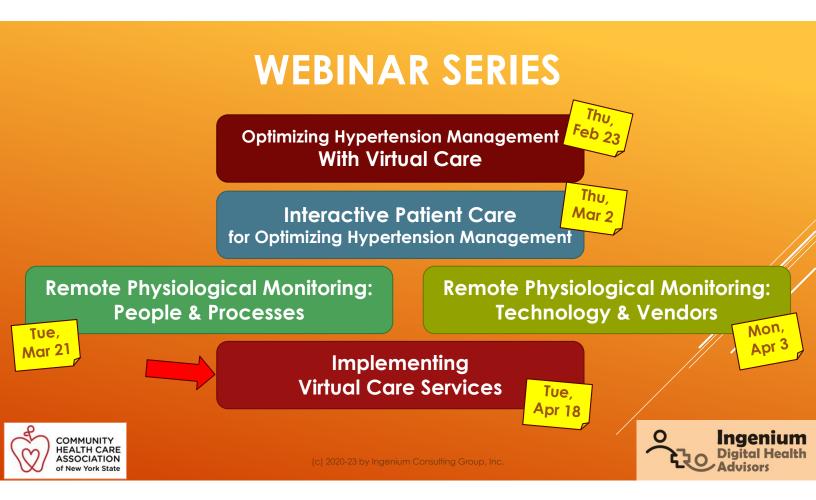
SUGGESTED ACTIONS

E.g.,

- Discuss how to apply ADKAR to the rollout or improvement of your program
- Develop your Strategic, Business & Clinical Case
- Define your key Workflows
- Develop success metrics and implement a measurement system and accountability







NEXT STEPS

- Reach out to CHCANYS to explore
 - additional education options
 - Forming cohorts / facilitated community
 - sponsored coaching/advisory/consulting
- Reach out to me for further discussion or to explore how we can help your organization.



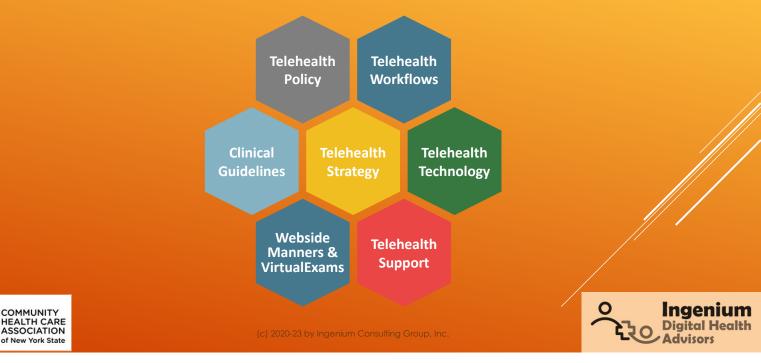


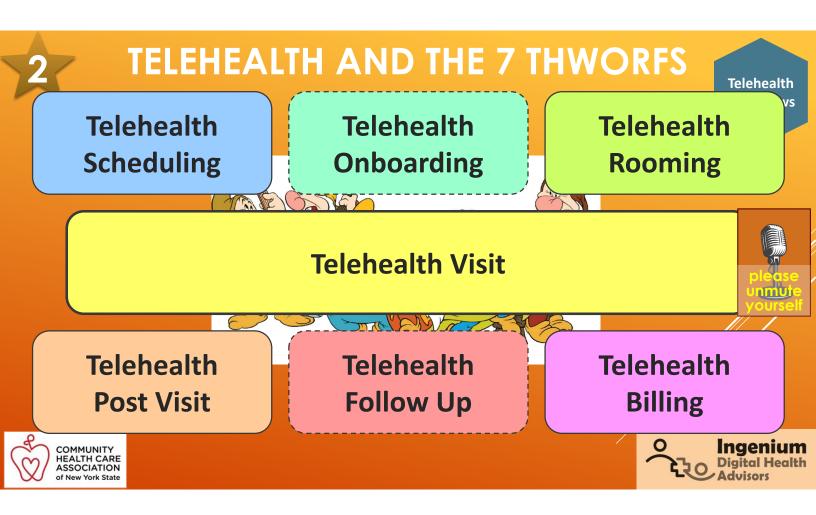
Christian.Milaster@IngeniumAdvisors.net IngeniumDigitalHealth.com 657-Ingenium (464-3648)

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7 ELEMENTS OF SUCCESSFUL VIRTUAL INTERACTIVE CARE SERVICES





Happy Day Scenario Typical, 80% of the time

Alternate Scenario Expected Variations

Exception Scenario possible breakdowns Telehealth

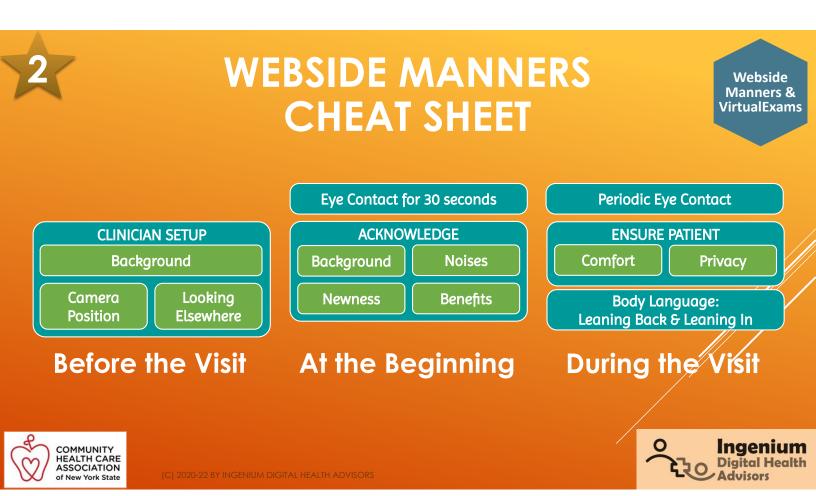
Workflows

Happy
Alternate
Exception

WORKFLOW DESIGN BY SCENARIO

Telehealth Scheduling Alternate Scenarios

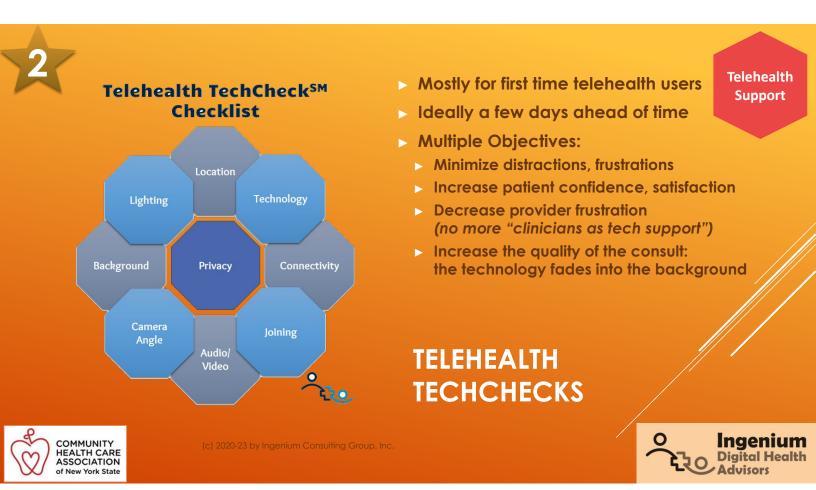
VALUE OF MASTERING Webside **"VIDEO CARE"** Manners & VirtualExams Increased Clinician Comfort & Confidence Improved Clinician **Higher Clinician Regard of Telehealth** Satisfaction with Job **Patient Privacy Patients Better Maintained** More At Ease **Higher Patient Satisfaction Higher Patient Engagement** Increased Follow-up Visits Improved Health Outcomes Ingenium OMMUNITY HEALTH CARE **Digital Health** ASSOCIATION Advisors of New York State













WHY USE A TELEHEALTH STRATEGY? Telehealth Strategy Raise

Focus

Allocate Resources Provide Clarity Use a Telehealth Strategy to Prioritize Projects Establish



²7 LEVELS OF TELEHEALTH TRAINING Telehealth Telehealth Policy Workflows Clinical Telehealth Guidelines Technology Webside Telehealth Manners & **Support** VirtualExams Ingenium COMMUNITY HEALTH CARE ASSOCIATION **Digital Health** Advisors of New York State

