

“Driving” Care Redesign

How Henry Ford Transformed Care Delivery Through Virtual Care

*Vidyo Healthcare Summit
December 4, 2018*



Objectives

- Demonstrate development and alignment of virtual care within an integrated health system strategy and structure
- Understand examples of healthcare redesign through the deployment of virtual care
- Recognize obstacles, keys to success, learnings and opportunities in the deployment of virtual care

Henry Ford Health System

Core Services:

- **Five** acute med/surg hospitals
- **Two** behavioral health hospitals
- Henry Ford Medical Group
 - 27 Medical Centers
 - 1200 physicians & scientists
- Outpatient Dialysis
- Home Health Care
- Health Alliance Plan (HAP) – Insurance Provider

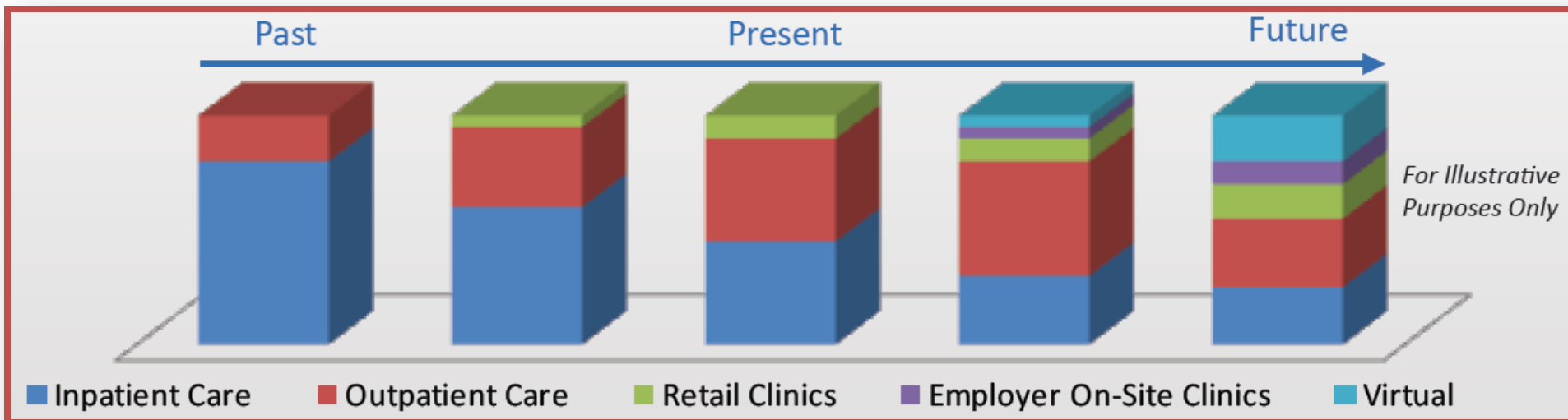


Disruption is Inevitable

+ Virtual technology has disrupted other industries



+ Virtual care will play an increasingly meaningful role in healthcare





"If you ask the customer
he would have asked for
a faster horse"
– Henry Ford

"Whether you think you can, or think you can't, you're right." ~Henry Ford

Disruptive Innovation

- **68%** of Americans own a smartphone
 - **90%** of the world's population own smartphone by 2020
- **77%** of consumers start their search for health care services online
 - **64%** of patients are willing to see a doctor via video
- Telehealth utilization to increase from **250,000** patients in 2013 to estimated **3.2 M** patients in 2018

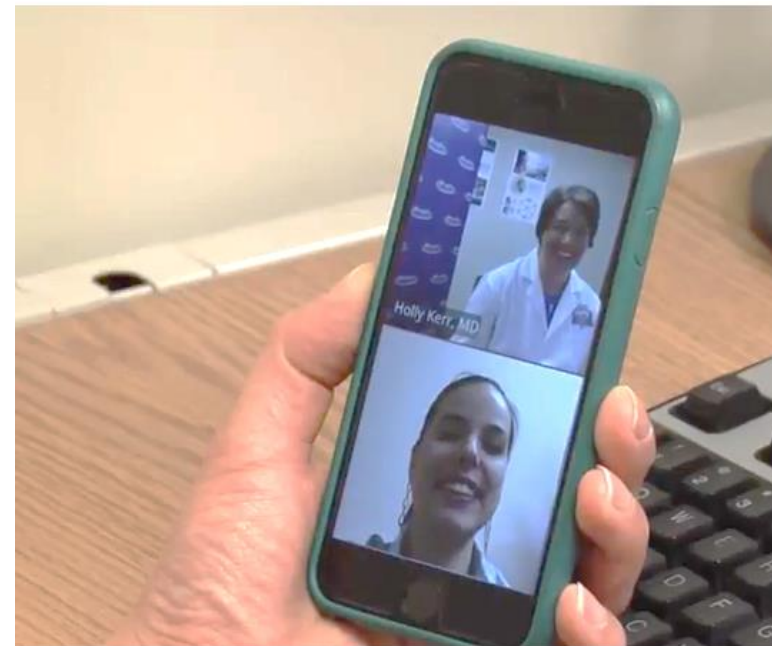
What is Virtual Care?

Then - 1962



Doctor's visits by videophone in the Jetson home (1962)

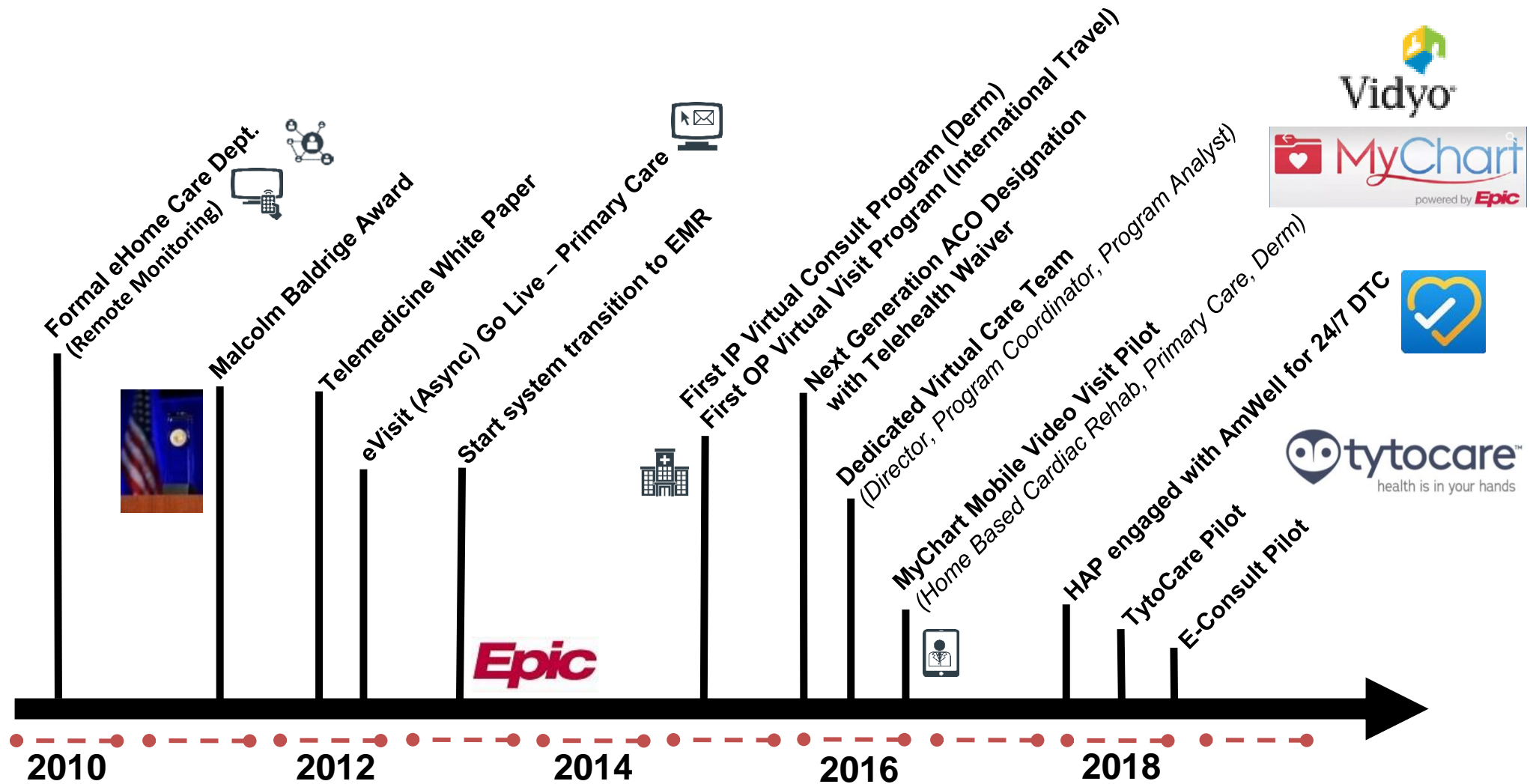
Now - 2018



Innovation and Transformation

- Providers/Administrators
 - Reach patients with barriers to obtaining care
 - Patient compliance
 - Increase access/growth
 - Increase footprint of organization
- Patients/Caregiver
 - Access to care
 - Radical convenience
 - Reduce time off work & eliminate travel barriers
 - Forgo the waiting room full of sick people

HFHS Virtual Care Journey Time Line



HFHS Virtual Care *by the numbers*

4,700+



Virtual patient encounters in 2017

- **5,786+** in 2018 YTD
 - 3,110 Video
 - 2,676 Store and forward

32+



Specialty services and growing

379+



HFHS available specialists

11,127 (50+ Clinic Days)

Provider Miles Saved in 2017

67,636 (86+ Days)

Patient Miles Saved in 2017

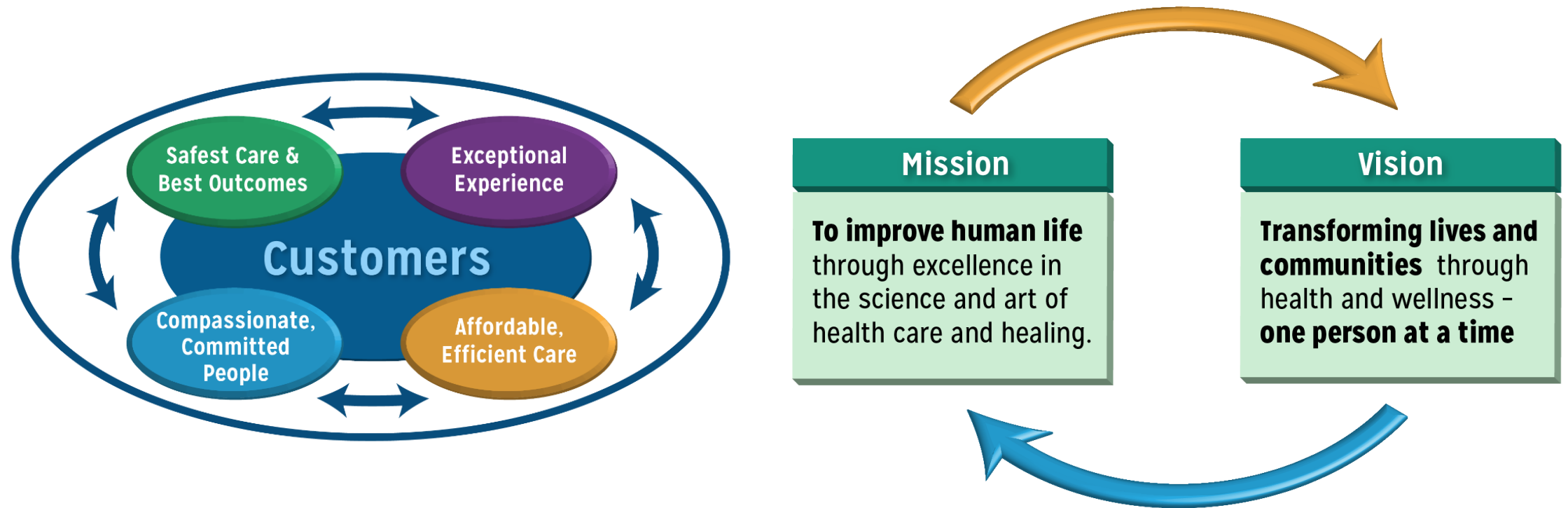
2,066+



Remotely Monitored Lives in 2017
(eHome Care)

- **+ 2,198** in 2018 YTD

Alignment with Mission & Vision



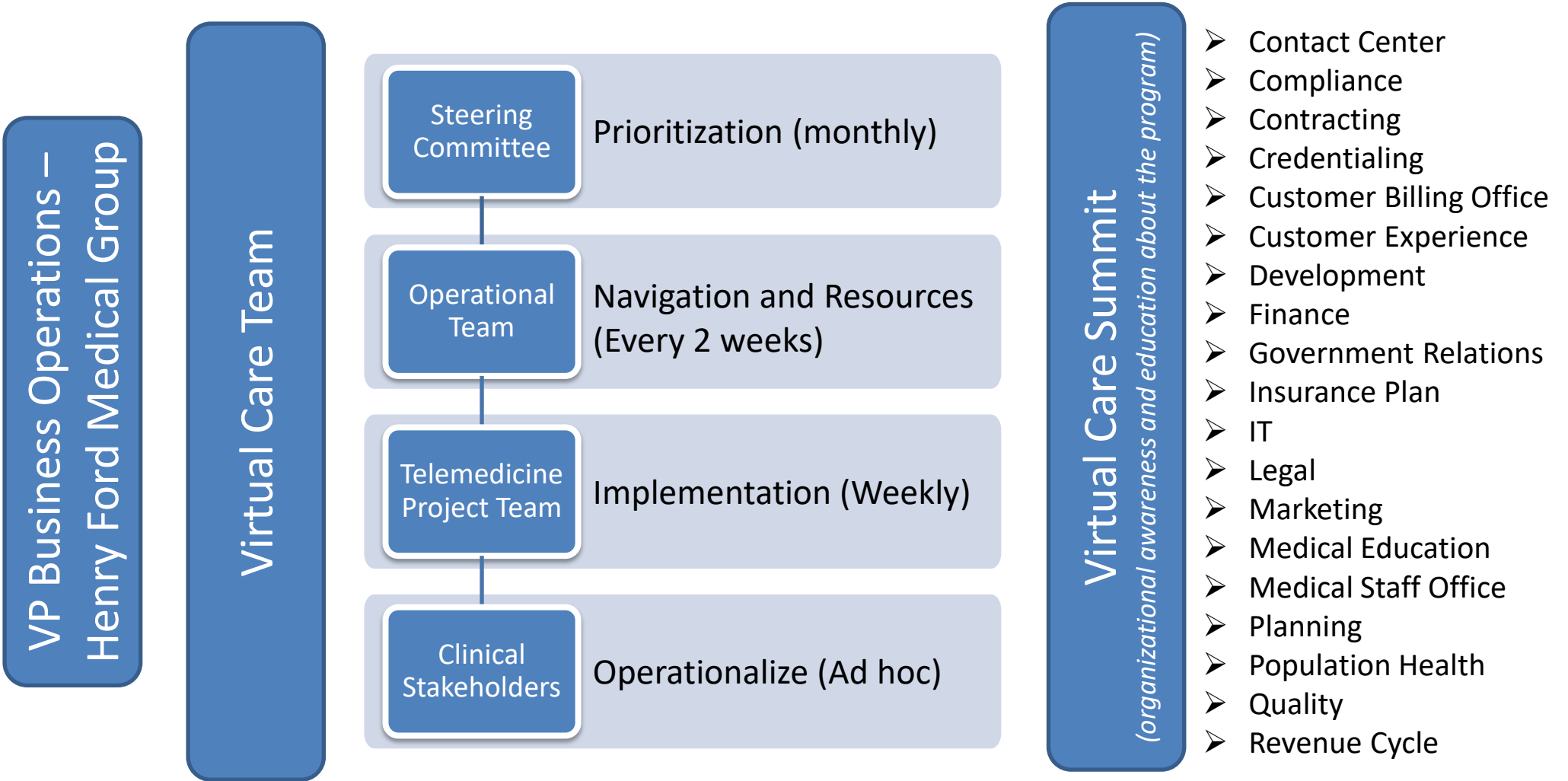
True North Framework:
The trusted partner in health,
leading the nation in superior care and value

HFHS Virtual Care Mission

To improve the value of healthcare by leveraging virtual care to impact the customer experience, access, cost reduction, efficiency, and clinical quality.

Technology + Doctor \neq Virtual Care

***Experience * (Technology + Operations + Build + Engagement)
= Virtual Care***



Role of Virtual Care Team



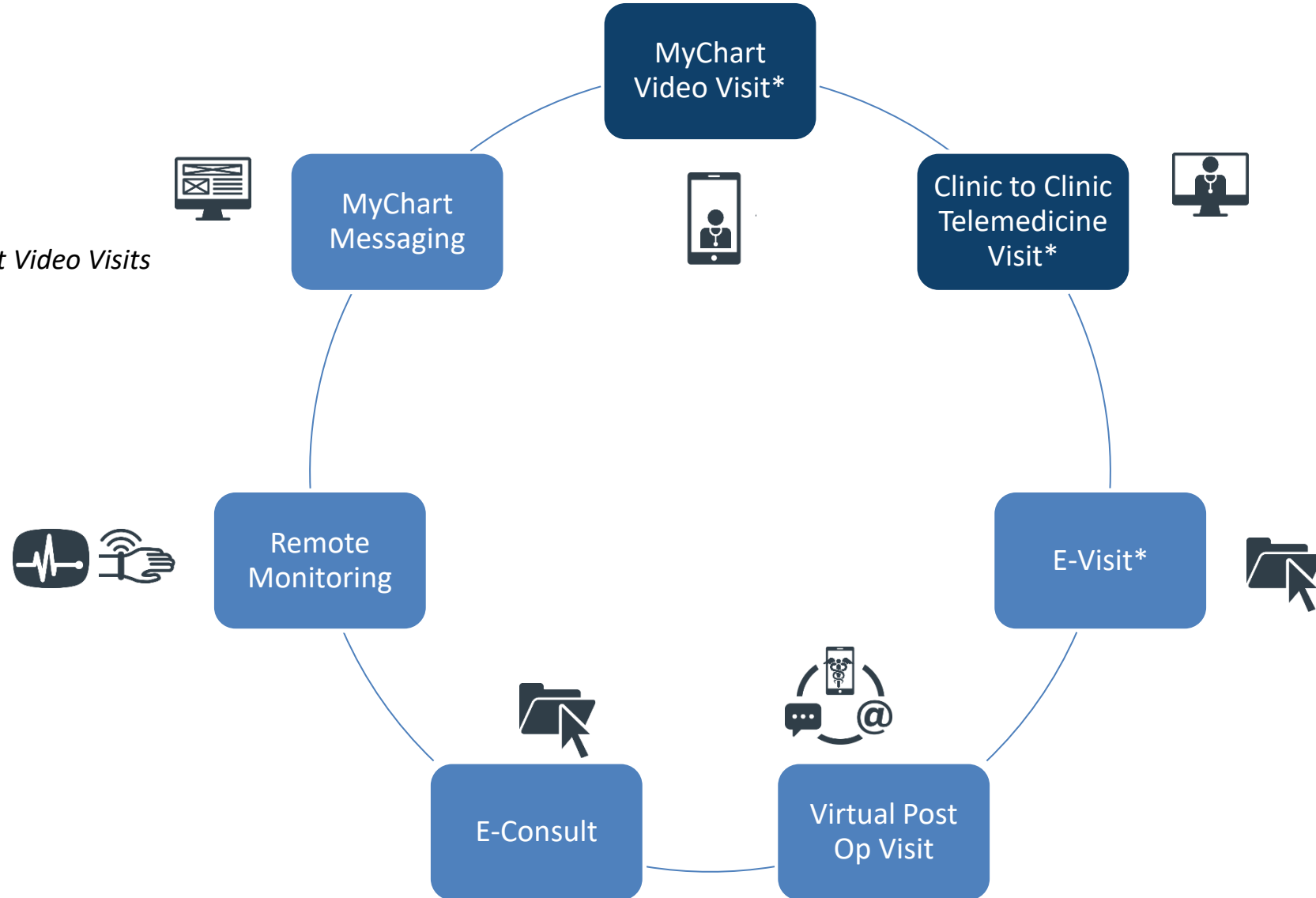
Virtual Visit Capabilities

Synchronous

Asynchronous

In Planning:

❖ *On Demand MyChart Video Visits*



**Some insurance payers will reimburse for these services*

HFHS Virtual Care Specialties

- Allergy ^{MVV}
- Behavioral Health Services (Adult and Geriatric) ^{C2C}
- Cardiology ^{eC}
- Center for Autism and Developmental Disabilities ^{MVV}
- Dermatology ^{C2C/MVV/eV/eC}
- Dialysis ^{MVV}
- Endocrinology ^{MVV}
- ENT (Ear, Nose & Throat) ^{C2C/MVV/VPO}
- Functional Medicine ^{MVV}
- Gastroenterology (IBD) ^{C2C}
- Infectious Disease ^{MVV}
- International Travel Medicine ^{C2C}
- Nephrology ^{C2C}
- Neurology ^{MVV/eC}
- Neurosurgery ^{VPO}
- Oncology ^{C2C/MVV}
- Orthopedics ^{C2C/VPO}
- Pharmacy (Medication Therapy Mgmt) ^{MVV}
- Preventive Cardiology (Cardiac Rehab) ^{MVV}
- Primary Care ^{MVV/eV}
(Pediatrics, Internal and Family Medicine)
- Reproductive Medicine (IVF) ^{C2C}
- Rheumatology ^{C2C/MVV}
- Sleep ^{C2C}
- Speech Therapy ^{MVV}
- Sports Medicine ^{C2C}
- Structural Heart Disease ^{C2C}
- Thoracic Surgery ^{C2C/MVV}
- Tobacco Treatment ^{MVV}
- Transplant (Liver & Kidney) ^{C2C}
- Urology ^{C2C/MVV}
- Vascular Surgery ^{C2C/MVV}
- Women's Health/OB ^{MVV}

eV = eVisit

eC = eConsult

MVV = MyChart Video Visits

C2C = Clinic to Clinic Telemedicine

VPO = Virtual Post Op

Virtual Visit Patient Satisfaction



- ❖ **100%** of respondents said they are likely to recommend a virtual visit to a friend or colleague.
- ❖ **100%** of respondents indicated they found virtual visits more convenient.
- ❖ **100%** of respondents indicated that they were provided clear information about any questions they had pertaining to their health.

What patients had to say about their virtual visit experience:

- “It’s **very convenient** to be able to come to Fairlane to have sessions instead of battling the traffic downtown!!!”
- “This was a **very good experience** for me and **very happy** with the exam.”
- “I **really liked** this. It was different but in a **good way**.”

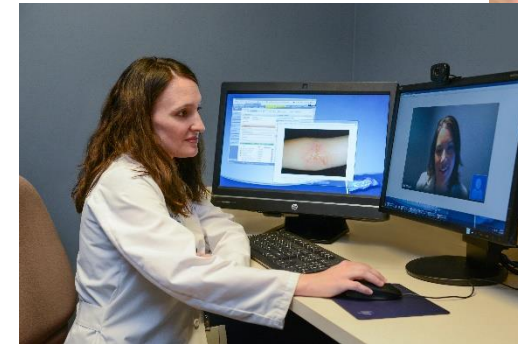
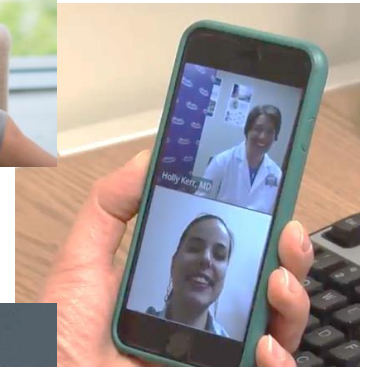
Cost of a Visit

Visit Type	HFHS			Patient		
	Time	Cost	Savings	Time	Cost	Savings
In Office Visit (Primary Care)	50 min	\$39.86	n/a	130 min / 10 miles	\$55.78	n/a
In Office Visit (Specialty)	75 min	\$114.00	n/a	245 min / 110 miles	\$110.29	n/a
MyChart Video Visit (Primary Care)	30 min	\$34.93	\$4.93	30 min / 0 miles	\$11.61	\$44.17
Clinic to Clinic Visit (Specialty)	85 min	\$107.46	\$6.54	135 min / 10 miles	\$58.16	\$52.13
eVisit	7 min	\$11.41	\$28.45	15 min / 0 min	\$5.80	\$49.98

Note: Analysis includes time and travel only.
Does not include facility cost or patient cost share component,
charges may vary by insurance and modality

Care Redesign Examples

- “Drive” into the Patient’s Home
 - Asynchronous
 - eVisits (Primary Care & Derm)
 - Virtual Post Op Follow Ups (Ortho, ENT)
 - Mobile Video Visits
 - Primary Care Video Visits
 - OB Prenatal Care
 - Home Based Cardiac Rehabilitation
- “Drive” outside existing walls
 - External Virtual Consults
 - Behavioral Integration with Primary Care
 - Urology & Gastroenterology (IBD) Pre-Surgical Consults
 - Transplant Surgery Follow-up



Keys to Success - Operational

- Executive Leadership Support
- Engage right Provider, Staff, and Administrator
- Dedicate resources/SME to support implementation for stakeholders
- Standardize processes and use consistently
- Keep it simple and close to current clinical workflow
 - Start small and focus on quick wins
- Promote utilization of HFHS providers and continuity of care delivery

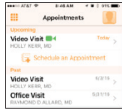
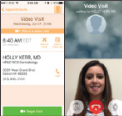
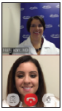
Keys to Success - Implementation

- Ensure technology works seamlessly for **patient and provider**
- Provide education and support resources, in various ways, to **patients and providers** to ensure exceptional experience and comfort with technology
- People skills are essential for maintaining the **provider-patient experience**, even through use of technology

Support Examples

- Patient Support
 - YouTube Video (*included in text reminders and visit instructions*)
 - Orientation Card/Pamphlet
 - FAQ Document for Clinic
 - On Site Support in Clinic Waiting Room
- Provider Support
 - Chairside Hands-on Training
 - eLearning Module
 - Tip Sheets & Primer Document
 - Reminder Emails & Test Connections
 - Provider Testimonials

How does the MyChart Video Visit work?

1. Open the appointment icon in the MyChart app. Click on the green video icon.
2. 10 minutes prior to your visit time the "Begin Visit" button will appear, and you will be placed in a virtual waiting room.
3. Once the doctor joins the visit they will appear in the top box, while you appear in the lower box.
4. To disconnect from the video visit, hang up and you will be prompted to leave the video visit.

Note: If you get disconnected from the video visit, return to the appointment icon or screen to re-connect.

If you need assistance or have questions see our FAQ's on MyChart at www.Henryford.com/MyChart or if you have additional questions call 1-800-HENRYFORD (436-7936)

Roadblocks/Opportunities

- System Awareness (tools and capabilities)
- Beyond pilot to widespread adoption & scale
 - Provider Buy-in/Engagement/Drive
- Reimbursement/Insurance Coverage process
 - Claim requirements
 - Inconsistency of payers
- Patient Education & Awareness
 - Awareness of the value proposition
 - Confidence that telehealth is good medicine
 - Evolution as telehealth becomes more visible part of the healthcare system

How to get started

- Leadership
 - Executive leadership commitment
 - Virtual health leadership/resources
 - Champions (clinical and operational)
- Understand strengths and weaknesses of organization
 - Goals
 - Value/ROI (\$\$, Volume, Population health, reduce readmissions, differentiate in market, etc.)
 - **You can do anything, but you can not do everything!**
 - Guiding principles
- Tools/Capabilities
- GO!

Virtual Care Enables Us To:

- Increase/improve access and reach
- Offer alternate access to healthcare
- Meet patient expectations for online service
- Reduce costs (time, travel, convenience, etc.)
- Increase clinician productivity/efficiency

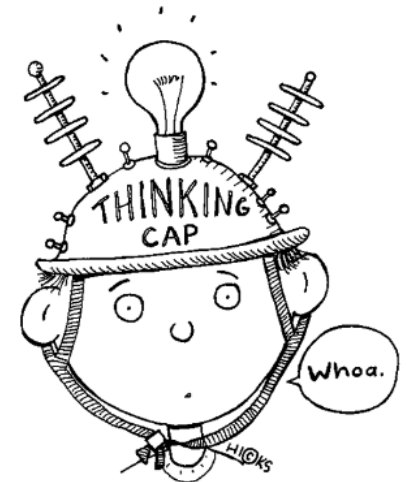
Connecting with customers **where**, **when**, and **how** they want to be reached...

All For You!

Contact Information

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<https://www.henryford.com/services/virtual-care>



- *Henry Ford Health System Fact Sheet, 2018*
- *Harris Interactive Telehealth Index, 2015 consumer survey*
- <https://youtu.be/l-aifTdwob4>
- <https://www.youtube.com/watch?v=OV3xXjetql4>