

Elion

Buyer Review Transcript

Product Reviewed	Tellescope
Integrations Reviewed	Elation, Photon
Other Products Mentioned	Twilio, Healthie, Welkin, Capable, Zoho, Awell
Date	July 19, 2023
Expert Role	VP, Product Development
Specialty	Virtual-first Orthopedic Care
Payment Model	Value-Based Care

Today we're going to be talking about Tellescope and how you use it at your company. Could you give a brief overview of your company and role?

We are a virtual-first orthopedic clinic. Our patients and members connect with an orthopedic physician assistant (PA) for a full telehealth visit on the front end, and then that PA and their care team works with the patient throughout their entire care journey. We sell that product in a number of different markets. We have a model that's tailored for self-funded employers, and also for payers, and we work very closely with risk-bearing primary care organizations. We also take risk, so we're also a risk-bearing, value-based care entity. I lead product.

When did you start using Tellescope, and how long has it been?

We encountered them in the fall of 2021 and formally engaged at the start of 2022.

How are you using Tellescope at your company? How does it work with the rest of your tech stack?

When we went through the first couple of iterations of our tech stack, we felt very acutely that EHRs are really designed for brick-and-mortar clinics and facilities. They're really oriented towards those four walls. They are not designed for doing longitudinal care management. When we think about care management, we're talking about events that take place across a number of different provider types. But as a provider, you can't sit within an EHR and pull out the relevant information at the surface level – applying our lens of the types of things we care about – from other providers that you need. There's no summary of what happened at the provider upstream that's relevant to you, and no way for you to communicate that downstream.

Thankfully, there are more platforms that are being built in this space that are like EHRs but with a care management lens. However, they're typically built for the health and wellness types of solutions. Healthie and Capable come to mind. Some of the things they were doing were oriented around the concept of a care plan that was very wellness-specific – you could build SMS-based flows and daily check-in reminders and so on. You can put a lot of structure into a very plug-and-play health and wellness routine that requires regular engagement over a long period of time.

Specialty care management, specifically orthopedics, is a lot more bumpy. It's not like the cardiometabolic care space, for example – it's not long timescales with very light engagement. You need to be very hands-on with a patient over a short period of time. They move between a lot of different providers. It's relatively time-crunched and you're not concerned with their checking in with a smiley or face likert scale or doing a weigh-in on a daily basis. It's much more action oriented and transactional: What's the outcome of the visit that you just had? What questions do you need to answer quickly from the provider or patient so everyone can move to the next step? That type of information that we were storing was just not well suited for health and wellness type care management platforms.

So, we started looking at solutions that were focused more on the core functionality that we needed. One, we needed multimodal communication with patients – we use primarily use SMS, phone, and email for engagement. And we start with a telemed visit, so we had to have video conferencing available. Two, we needed it to be a place to store and communicate two different types of information. The first was really detailed long-form clinical education and content materials. The second was summary-level communication forms, feedback, surveys, visit notes, etc. That's a lot more dynamic between the provider and the patient as opposed to a resource library. Additionally, we needed really robust reporting capabilities and good APIs – good connectivity, the ability to whitelabel, etc.. Beyond all of this, we wanted some automations, internal care team communication. You get these in a standard care management platform, but we wanted it to not be so specifically structured for health and wellness.

Were there particular areas where your EHR, Elation, wasn't meeting your needs? What drove the need to layer something on top of your EHR?

Elation is great for documentation, billing, storing lots of information about a patient--classic EHR functions. It's also a value-based care-focused EMR and it's really designed for primary care, which is part of the reason we bought it to use in conjunction with Tellescope. We work a lot in spaces where we care about population health data and activities like risk adjustment.

It's not good at combining care management with patient communication. Most EHRs do have a portal, but you're very restricted in how you can customize that portal for patients. Everything we do is focused on the concept of a treatment plan that's executed over a period of very high-touch engagement. We have a very clear vision around how we want that to look and be communicated to patients. You can do SMS-based communication with Elation but they do not have the concept of a patient journey which is critical for us from a capability and scalability

perspective. You can have someone log into a portal, but there's no way to push that content into the most accessible portion of someone's phone. The portal is designed to protect PHI, but a lot of the content that you communicate with a patient during a care management focused engagement is procedural--scheduling, document transfer, visit prep, etc. It's the same thing on the provider side. There's no way of summarizing critical information from multiple different events within a patient's care pathway from multiple different providers. And you can probably build some workaround in Elation, but we were really looking for something that combined great patient experience with the types of activities that our care managers are going to be doing.

The other piece we were also thinking about was the types of users within our organization who were going to be interacting with those platforms. We have a model that combines clinicians with care coordinators. So we have a team of non-clinical care coordinators who support our PAs and really care about things like appointment scheduling, documentation communication, sharing a specific set of resources with patients at a specific point in their care pathway, etc. Having a system where they can do that and really focus on the logistical management of a care pathway without getting too bogged down in the clinical portions was really important. So what we really use Elation for is clinical documentation and billing.

It sounds like your non-clinical team members or care coordinators are primarily using Telescope as their system of work to manage care plans. Are your clinicians also using Telescope? More broadly, which platforms are different users using?

Currently, our clinicians use both Elation and Telescope. Our care coordinators are focused on Telescope, although they go into Elation. That's mostly a limitation of how we've set up some of the automations in our tech stack. We would love to use Elation in a more fully headless way. It's semi-headless right now, and that's something that we're working on changing.

So your clinicians are charting in Elation but then maybe also use Telescope to some degree. How do you manage source of truth?

There's no information that's being double-documented. Elation is our source of truth for things like patient demographics. All clinical documentation is done on that platform and then bills are pushed out. What we would like to have is for clinical documentation to be pulled into Telescope as well. We have an initial API integration in place such that all patients and appointments are captured in Elation and pushed to Telescope and we are actively expanding that integration.

Our clinicians use Telescope to do initial video visits because it's a platform that supports tele-visits, and they set up the initial care plans there. Some of the background ticketing and automations and intra-care-team work is also done there. So they start steering the ship. They set up the initial set of instructions, and then basically our care coordinators fill out that set of tasks. We have appointments mirroring between those two platforms right now.

What are the key features that you use within Telescope? Are there features that you chose not to use?

There's the patient communication bucket, which includes tele-visits, phone calls, SMS. We pull a lot of metadata out of the platform and it's fully time-stamped and easily reportable.

There's a patient portal function and within that, there's a communication tab, a care plan tab which is closely related to an events tab, forms, and documents. Forms is for surveys and feedback. That's the functionality of the patient portal.

On the internal user side, there's an internal communication function. You can set up care teams, with complex permissioning around how to give access to relevant team members for relevant patients. There is a scheduling and an event function. The documentation functionality is not as robust as in a typical EHR which has a lot of dropdowns and autocompletes and connects to a prescribing tool. Although, I think they have an integration with Photon, now. There's also a ticketing function internally.

And there's a whole automations layer which is like Aweel but smaller and embedded within the platform. They have two different categories of automations. The first is journeys, which are more responsive and in which you can map much more complex chains of logic. The second are automations tied to fixed events, like reminder chains or triggers. They're all pretty flexible in that you can use webhooks in any of them. So, you can do much more complex tasking and add automations or logic changes that come off of that.

We decided to not use the communities feature, through which you can create social groups among your patients. Communities can be fraught spaces and you have to usually moderate them, so we did not want to get into that. It was also not the most relevant for orthopedics.

Are there features that you really like or any that still need some improvement?

I think Telescope has found a very well defined niche within the healthcare software vendor ecosystem. Capable and Welkin are in the same category. They've figured out that in this day and age, care management is really critical. Value-based care is reliant on very effective longitudinal care management. It's much more of an event-based care paradigm than any sort of single, four-walled program, focused on longitudinal care and many different care providers. It's also designed for virtual-first and digital health platforms, which is a rapidly growing market segment. That they've picked up on both of those things is great.

They have a very approachable platform. It's very customizable. It's not a no-code or low-code type of modular tool. So you really are buying something that's functional off-the-shelf day one. They have really thought through the right set of features, in my opinion, for virtual-first care management platforms and again, found the right niche within that ecosystem. You've got your no-code, low code platforms; you have your heavy, expensive, fully featured platforms that might have low customizability. But there wasn't a light white-labeled platform with off-the-shelf functionality from day one. Telescope fills that niche.

Many of their features work well – their reporting, calendar and scheduling, patient communications (messaging, inboxes), team communications, forms, and tickets are all good.

The team is fantastic to work with. That's huge, for me, as a product lead. It can be make or break. And I think they are running the business well – they haven't got dragged down in a lot of commitments and had to deal with an unsustainable burn rate. They turn around new features unbelievably quickly. Their sophistication, from an execution standpoint, is really impressive. They have a really small team so they can be very nimble and responsive.

A lot of their features are good, but not perfect. I think that comes with them being young and rapidly iterating. Their UI is fine, but there is opportunity for improvement and the Telescope team has been very accommodating and responsive to feedback . It is somewhat white-labelable. Nobody buying Telescope should put a lot of weight on their ability to drive brand recognition through the platform. So if what you're looking for is something that's really going to carry your brand to your customer base, that's not what you're getting here. You can get your color scheme or your logo on here, but that's about it.

They have some room for improvement on batching, navigating, grouping, and more broadly creating automations to deal with larger cohorts of patients at once. They could create more filters and increase searchability. To their credit, they are bringing in more of the CRM functionality of being able to manage patient lists into different subgroups and campaigns and, and cohorts.

This could be us and our lack of sophistication of understanding how they want the platform to be used, but we connect with the team there fairly regularly and I think there's still some a little bit of friction between some of their more structured automations. For example, how you attach reminders to a specific event versus more complex logic flows. The journeys function is a very sophisticated feature--really an entire product-- that they just built overnight into their platform. I'll continue to repeat that that is one of the amazing things about the team. Their sophistication from an execution standpoint and their speed is just unparalleled. But they usually get to about 80% and then that last refinement is missing.

And the last thing is that they have a light CMS built into the platform. The way that content renders sometimes leaves a little bit to be desired. But again, I would say the only things that I would really be somewhat critical on are the UI. That's the only area where they really have obvious room for improvement. It's a really solid, very thoughtfully featured platform.

How do you map out this space? You mentioned there's no-code platforms that exist alongside fully featured heavier platforms, and Telescope sits in the middle of those.

When I was first building our stack, I started to group features and functionality based on the types of things that I saw in the market. It starts with a way to get people in on the front end. It's a customer data platform (CDP) essentially, but then that needs to connect to the care navigator tools, clinician tools, patient records, task management tools. We have some custom needs

around provider selection, care planning, scheduling, communication. And then there's the patient portal functionality: communication between the patient and the caregiver. There's a bunch of data sources that feed this environment and then basically out the other end, you get reporting.

There are platforms that basically let you choose different features a la carte and put them together the way that you want – no-code, low-code platforms – and then you work through the UI yourself. So that's one group and they're sometimes connected to an EHR. Some of these functions I've just listed are exclusively EHR functions; some are really more communication functions, and some are care management functions. How you draw the boundaries around those three circles of functionality is typically how the platforms shake out. Every EHR has a patient portal, but they are really bad at doing the thing that you want a patient portal to be doing for a digital health solution, which is usually driving engagement. They're good at pushing content, they're good at pushing reminders. They're good at being a space for a patient to go if they're energetic and enthusiastic and self-starter enough to walk into that thing, but they're not engagement platforms. And so then you can start thinking about building more sophisticated engagement tools. For example, Twilio is for every market, not just healthcare, but just does communication really well. You have to put together a sort of three or four dimensional map and start placing people on it but this is basically how I see the universe of features that we care about. And ultimately, I could name a platform and I can kind of draw a line around these different features and tell you where it lives.

Specifically, in the care management world, who do you think of as being in that category, like Telescope? Whom did you evaluate Telescope against?

Among the top ones, we looked at Healthie, which is a great EHR, and pretty good at engagement and at care planning. But again, it was too wellness-focused. The way that the care management tools were set up were very structured for that type of engagement. Welkin is a fantastic platform. It is fully featured, but not very customizable and an implementation and while-labeling was extremely expensive. They have the right feature set and are not too dissimilar from Telescope. It's been a while since I've looked at that platform in detail. And we really liked Capable. They were taking a little bit of a different approach by really trying to be a fully fledged EHR with care management tools on top of it. It was a much slicker product and you really could rely on them for some UI sophistication, which was appealing. We looked at others but those are the ones that stuck and that we looked at more seriously.

To follow up on Healthie, you mentioned they were geared towards the wellness space and some of your needs were different. It strikes me that a lot of the functionalities would have still been the same. Was there not enough flexibility in configuring them?

They were focused on supporting workflows for health and wellness and longitudinal low-touch. So, there wasn't any philosophical alignment between what they were trying to build and the space they were trying to build and where we were. What I'm always trying to avoid as a product lead is thinking, "Okay, this platform is good enough for now, but it's not going to grow with us,

so six months from now, we're going to feel misaligned or we will have outgrown something or there won't be enough customizability for us to grow with them.” That’s a great thing about young, fast-moving companies: they work really well with other young, fast-moving companies. Is this a company that's going to work really well with our team? It's part of the constellation of things you want to consider when you're choosing a platform.

Have you built on top of Telescope much? What has building on their APIs been like?

They have a well documented Restful API that is very easy to engage with. I'm not the one who's doing the building, so I can't speak from personal experience, but I can say that our tech team has had no complaints about that. Sometimes we get to a point where it would be great if there were more components or more endpoints in this API, or we were getting slightly more granular data that we could pull off of. But when we give that feedback, or when we make those requests, the turnaround time is basically instantaneous. And so we've had no complaints with their API functionality.

We have built our own onboarding and registration workflow. They have one; it has recently been updated and we're in the process of evaluating that as a way to update our own tooling. What we're mostly doing from an API standpoint is pulling data out of the platform. And we are also in the process of building a much more sophisticated reporting suite. So far, so good, as far as I've heard. Sometimes in the past, we have run into things where minor things like a date-stamp need to be changed. So it's not perfect, but everything has been easy to work with.

Are there any integrations that were either out-of-the-box or that you had to integrate yourselves? How did those go?

We have built an integration with Elation. We would love them to build an out-of-the-box integration with Elation. They have an integration with DrChrono and I think one other EHR. They build them really quickly, so I think someone the other day asked them to build a Zoho integration and they did. They are constantly spinning up new out-of-the-box integrations, but we've built our own pipeline and connectivity.

Was it an easy integration with Elation?

Yes, although I wasn't the one who did that personally.

What was the initial setup of Telescope like? Is there anything you'd add about their ongoing support?

It was just like a flip of a switch. I don't know if that's changed but I don't believe it has. But we've since referred them to a number of others and no one has had any complaints about the implementation.

There isn't a massive amount of configuration that needs to happen?

Barely any.

Do you anticipate continuing to use the product for the next 18 to 24 months?

Yes.

What is the general pricing structure for Telescope like?

They have a per provider cost and they have a per active patient cost. The per provider per month cost might be flat or has a small range within which it sits.

So it's both of those aggregated per month – not either or.

Yes.

How did that compare to other players? Was it competitive?

Yes.

And do you have any advice for someone going through the selection process for a solution like this?

The first is to know your organization. That's not unique to selecting care management tools. It's important to ask questions like whether you have the resources internally to be implementing, customizing, building APIs or building a front-end. Where is your organization strong? Where is your organization weak and how do you acquire external capabilities to fill those gaps? Those questions should help you pick from different corners of the landscape.

The second is to identify the type of care you are trying to manage. Do you primarily need a tool that helps your internal team, your clinicians, your care navigators, your health coaches, or are you building something whose primary user is the patient or recipient of care? For example, a lot of our end users, our patient base, have no expectation that they're going to use technology, so we're calling them and doing a lot of documentation on our side. And that's why things like the slickness of the UI don't matter as much to us. But if you are a D2C health coaching platform and you survive on ratings in the Google Play Store, then you really need to care a lot more about that patient experience.