

Telehealth FY 2020, Q4 Update

Goal Leader:

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Deputy Goal Lead:

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Overview

Goal Statement:

Improve Veterans' access to quality healthcare using digital care delivery methods. By Sept 30, 2021, the Department of Veterans Affairs will:

- Demonstrate a 50% increase to 98 in the use of dedicated medical advice and enhanced triage support from Clinical Contact Centers (CCC) assisted by Licensed Independent Practitioners (LIP) to achieve clinically meaningful first contact resolution as compared to FY2020 baseline of 65;
- Ensure at least 1% of the total incoming CCC Registered Nurse (RN) patient contacts dealing with acute episodic health concerns will include care from LIPs using virtual care modalities (telephone or video);
- Ensure all LIPs supporting CCC will have completed at least one VA Video Connect (VVC) encounter by the end of FY2021;
- Ensure minimum 95% (compared to FY2019 baseline of 63%, 62%, and 0% respectively) or more VHA outpatient Primary Care and Mental Health providers and 50% or more VHA outpatient Ambulatory/Specialty Care providers have provided care to Veterans using VA Video Connect;
- Ensure 18% (compared to FY2019 baseline of 16%) of the Veterans who received care in VA in FY2020, either assigned to a PCMM panel OR have a 'checked out' encounter in the past 24 months OR have a future pending appointment, will have sent at least one Secure Message;
- Achieve a 25% increase from the FY2019 baseline of 5,009 unique patients enrolled in VA's text messaging application.

Overview Challenges

Telehealth Challenges

- Many Veterans and their Caregivers still have difficulty accessing VA care, especially in rural
 and remote areas, even with 150 VA Medical Centers and 800 VA Clinics.
- Non-technical issues pose the biggest challenges. These challenges include the digital divide, the authority for all VA providers including trainees to deliver telehealth services across state lines, Veteran adoption, provider interest and acceptance, and provision of just-in-time training and information to support both Veterans and VA staff.

Clinical Contact Centers (CCC) Challenges

- Lack of aggregate data of total incoming call volume and call types
- Lack of robust metrics
- Inconsistent methodology for differentiating clinical versus nonclinical calls
- Lack of standardized methodology to capture CCC RN to LIP referral
- Inconsistent workload and productivity tracking for resource allocation
- Geographically variable pharmacy formularies and contracts
- Clinical/triage decision support tools not optimized for identifying virtual care opportunities
- Technology challenges for CCC professionals and Veterans, families and caregivers (i.e., VA Video Connect)
- Inconsistent operating procedures, business rules, and training as they relate to CCC processes across VISNs/Enterprise

Overview Opportunities

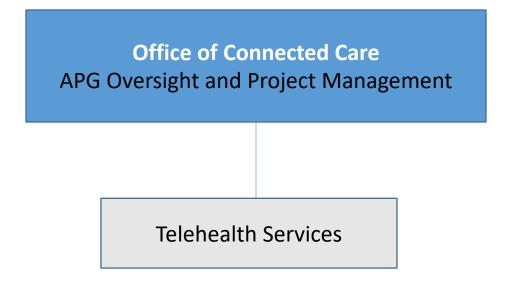
Telehealth Opportunities

- Using Digital Care delivery methods VA can be the most convenient, accessible, patientcentric, healthcare system.
- VA Clinicians will be trained and capable to offer digital care delivery to enhance the
 accessibility of VA healthcare care for Veterans, their family members, and/or their caregivers

CCC Opportunities

- Increased clinically meaningful first contact resolution
- Improved access to care for Veterans within VHA
- Improved continuity of care within VHA
- Improved Veteran and caregiver trust, satisfaction, enhanced VHA loyalty and flexible healthcare options
- Reduced or eliminated Veteran travel time and expense
- Improved Primary Care access and reduced wait times for appointments
- Improved clinic appointment availability for higher-acuity patients
- Reduced exposure to communicable diseases
- Improved resource utilization by reducing non-emergent ED visits, as well as unscheduled and scheduled Primary Care visits
- Improved VA staff satisfaction
- Increased level of trust and confidence between Primary Care, CCC staff and virtual care providers

Leadership and Implementation Team: Telehealth APG



Additional contributing offices:

Office of Nursing Service

VHA Support Service Center VSSC

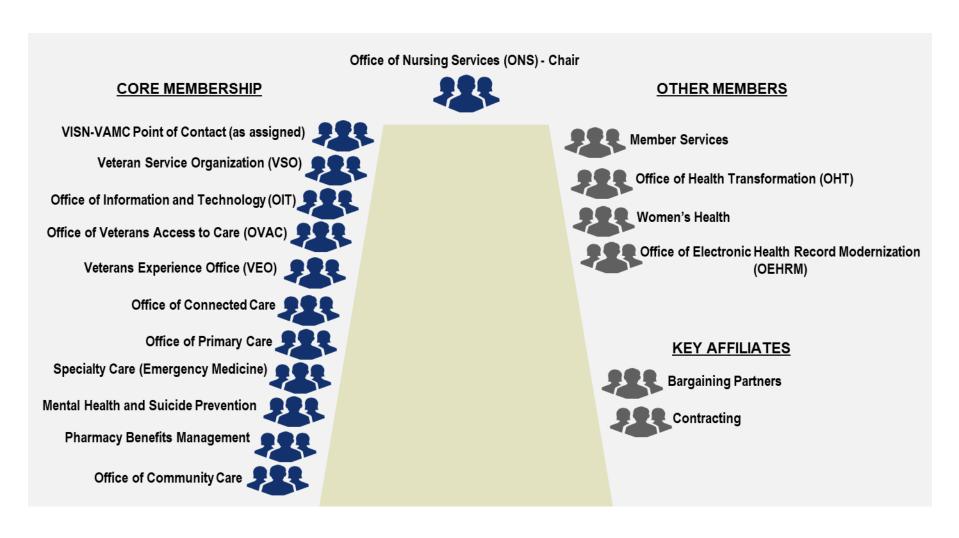
Office of Veterans Access to Care (OVAC)

App Implementation

My HealtheVet

Leadership and Implementation Team

Clinical Contact Center Governance Board



Goal Structure and Strategies

People, processes, technology and data are the focus areas guiding the Clinical Contact Center Implementation Teams efforts, ensuring an effective and holistic approach to achieving the goal









Central to a successful Clinical Contact Center operational environment, *People* defines organizational objectives through governance and resource management, and encompasses:

- Staffing resources, capabilities, and skill-level
- Training
- Organizational Structure
- Human Resources
- Labor Management
- Physical environment

Processes govern contact management within and across teams by:

- Defining types of calls appropriate for referral
- Develop business rules governing referrals
- Organize and support consistent LIP staffing
- Clarify appropriate use and scheduling of video
- Develop an effective communications strategy
- Define follow up responsibilities
- Establish evaluation methodology

Technology promotes organizational efficiency and interoperability by providing staff with common tools and standard interfaces, including:

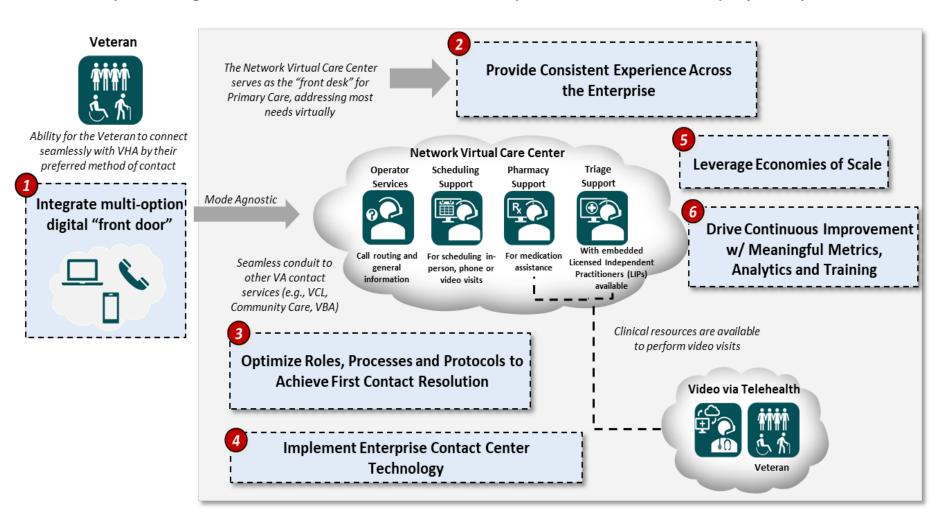
- Systems to satisfy Veteran requests and promote first contact resolution
- Tools that support crossteam coordination
- Common voice platforms
- Integration points with other systems
- Reliable video capabilities

Data provides real-time insight into Clinical Contact Center and staff performance, in addition to:

- Accurate estimate of total number of incoming calls
- Accurate tracking of LIP encounters
- Measuring clinical outcomes, quality, and customer satisfaction

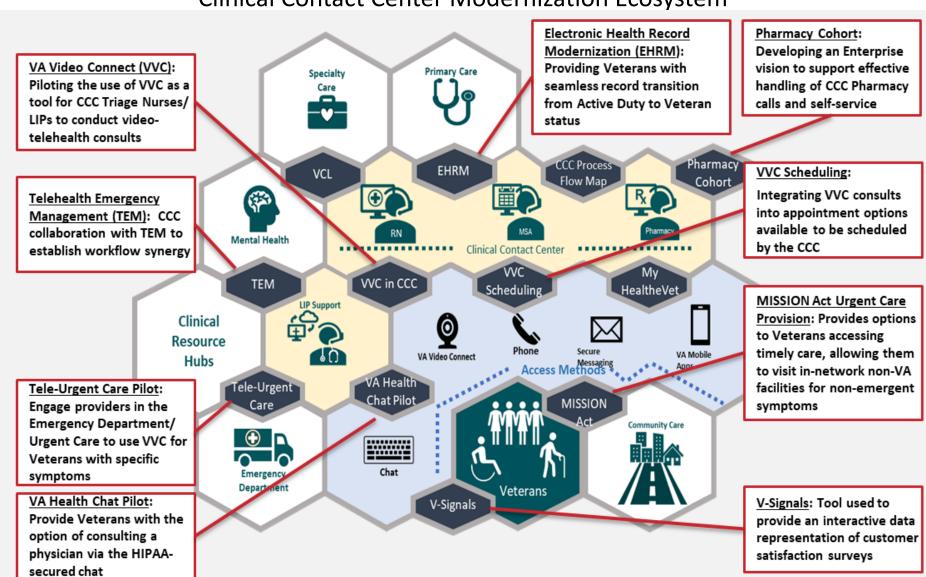
Goal Structure and Strategies

The ideal future state of Clinical Contact Centers serves as the foundation for delivering clinically meaningful first contact resolution and an improved Veteran and employee experience



Goal Structure and Strategies

Clinical Contact Center Modernization Ecosystem



Summary of Progress for FY 2020 Q4

Key Achievements and Milestones - CCC

- ONS in collaboration with OVAC and OHT hosted a "State of the Art" meeting in April 2020, with representation from all VHA VISNs, focused on reviewing the current state of Clinical Contact Centers (CCC)
- A Clinical Contact Center Modernization (CCCM) Integrated Project Team (IPT) was formed in May 2020 under OVAC/OHT guidance with multiple workstreams to support comprehensive CCCM activities
- Network Directors and senior VA Leadership approved an Executive Decision Memo (EDM) to transition to VISN-level CCCs with four core services including Clinical Triage, Pharmacy Support, Scheduling and Administration, and Virtual Care Visits (i.e., LIP support)
- In June 2020, VISNs assigned administrative and clinical leads to support the CCCM objective of VISNlevel (or higher) centralization of CCCs by December 2021
- Current State / Future State Assessment Tool was developed to support VISN self-assessments with a focus on informing leadership to the current operational environments and guiding CCCs toward the future state
- CCCM policy and guidebook development was initiated to assist VISNs with "must-dos" and "how-tos" for modernization
- Continued facilitation of a monthly CCC Affiliated Provider (LIP) Peer Group, a forum focused on sharing CCC Provider resources, best practices, challenges and solutions
- As of FY 2020 Q3, enterprise-wide APRN Full Practice Authority implementation is 100% complete

Summary of Progress for FY 2020 Q4

Key Achievements and Milestones - Telehealth

- Substantial increase toward the minimum 95% target for VHA Outpatient Primary Care (90.7%) and Mental Health (94%) providers to have provided care to Veterans using VA Video Connect;
- Exceeded the 50% or more target for VHA outpatient Ambulatory/Specialty Care providers to have provided care to Veterans using VA Video Connect;
- Exceeded the 18% target for Veterans who received care in VA in FY2020, either assigned to a PCMM panel OR have a 'checked out' encounter in the past 24 months OR have a future pending appointment, will have sent at least one Secure Message;
- Achieved > 25% increase above the FY2019 baseline of 5,009 unique patients enrolled in VA's text messaging app;

Key Milestones – Licensed Independent Practitioners (LIP)

Milestone Summary							
Key Milestone	Milestone Due Date	Milestone Status	Change from last quarter	Owner	Comments		
Develop business rules for denominator for overall report	Q1, FY2020	Complete					
Develop business rules for denominator for overall report	Q1, FY2020	Complete					
Establish standardized LIP processes/business rules	Q2, FY 2020	Complete					
Establish communications and education to support new processes (e.g., CCC LIP peer group)	Q3, FY 2020	Complete					
Enterprise-wide APRN FPA* implementation	Q4, FY 2020	Complete					
Establish and implement metrics for benchmarking and evaluation	Q4, FY 2020	Complete			This milestone has dependencies with the enterprise Electronic Health Record (EHR) implementation		
Complete Telecare Record Manager (TRM) migration	Q2, FY 2021	In progress			This milestone has vendor dependencies for data collection and VISN/VAMC dependence on use of TRM platform		
Initiate quarterly report on progress to goal	Q1, FY 2021						

Key Milestones – Digital Care Indicators

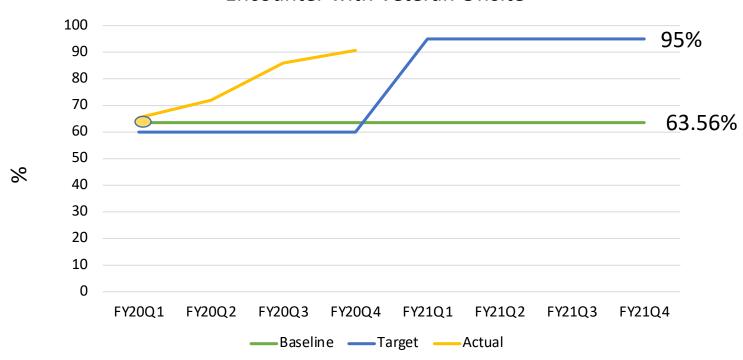
Milestone Summary						
Key Milestone	Milestone Due Date	Milestone Status	Change from last quarter	Owner	Comments	
Develop business rules for denominator of the CVT to Home/NonVA site by specialty Care Provider report (Tele14)	FY20 Q2	Complete				
Publish CVT to Home/NonVA site by Specialty Care Provider report (Tele14) in VSSC and reported in electronic technical manual and SHREDS	FY20 Q2	Complete				
95% of Mental Health Clinicians with at least one Video Encounter with Veteran Offsite from FY19 Baseline	FY21 Q4	In-Progress				
95% of Primary Care Clinicians with at least one Video Encounter with Veteran Offsite	FY21 Q4	In-Progress				
50% of Specialty Care Clinicians with at least one Video Encounter with Veteran Offsite from FY19 Baseline	FY21 Q4	Complete				
18% of 6.3M VA Patients Sending VA Secure Message from FY19 Baseline.	FY21 Q4	Complete				
25% Increase from FY19 Baseline for Veterans enrolled in Annie Application	FY21 Q4	Complete				

% of Mental Health Clinicians with at least one Video Encounter with Veteran Offsite



Notes: FY20Q1 result 8,123 providers or 66.5% FY20Q2 result 9,739 providers or 76.5% FY20Q3 result 11,707 providers or 89.7% FY20Q4 result 12,615 providers or 94.8%

% of Primary Care Clinicians with at least one Video Encounter with Veteran Offsite



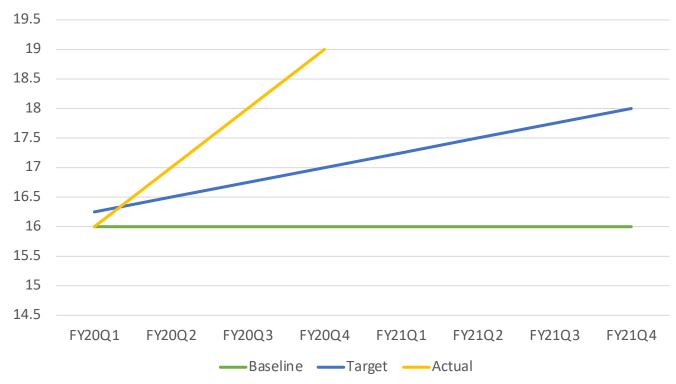
Notes: FY20Q1 result 10,342 Providers or 65.4% FY20Q2 result 11,430 Providers or 72% FY20Q3 result 13,622 Providers or 86% FY20Q4 result 14,567 Providers or 90.7%

% of Specialty Care Clinicians with at least one Video Encounter with Veteran Offsite



Notes: FY20 Q1 Report not Developed FY20 Q2 3,310 Providers or 23% FY20Q3 7,466 Providers or 45.9% FY20Q4 8,764 Providers or 58.5%

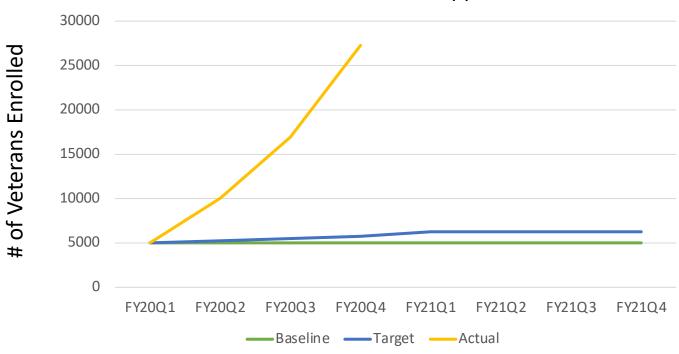
% of 6.3M VA Patients Sending VA Secure Message



Notes:

FY20Q1 result: ~1M VA Patients or 16% sent a VA Secure Message. FY20Q2 result: ~1.1M VA Patients or 17% sent a VA Secure Message. FY20Q3 result: ~1.1M VA Patients or 18% sent a VA Secure Message. FY20Q4 result: ~1.1M VA Patients or 19% sent a VA Secure Message

% Increase from FY20 Baseline for Veterans enrolled in Annie App



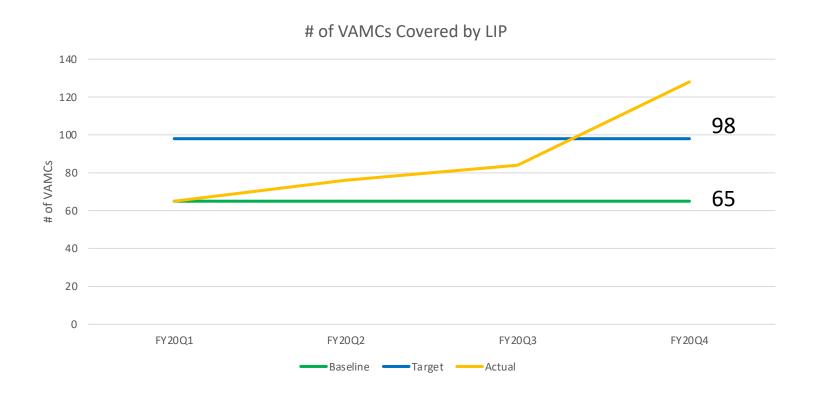
Notes: FY20 Q1 Result \sim 5,009 Veterans Enrolled

FY20 Q2 Results 10,026 Veterans Enrolled

FY20 Q3 Results 16,942 Veterans Enrolled

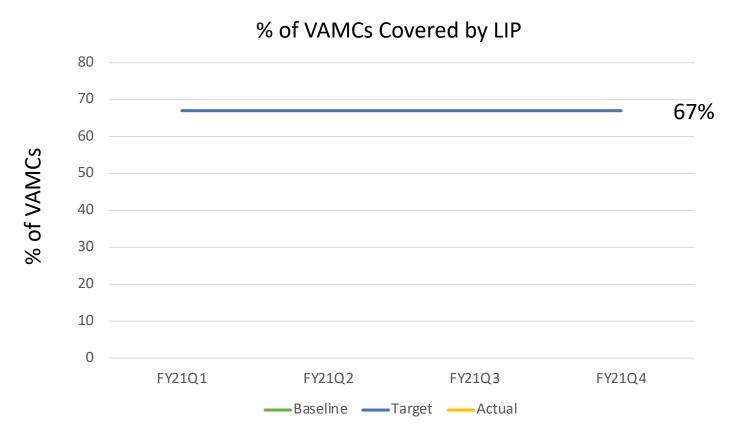
FY20 Q4 Results 27,275 Veterans Enrolled

The below chart demonstrates progress against the goal of a 50% increase in the use of dedicated medical advice and enhanced triage support from CCCs assisted by LIPs.



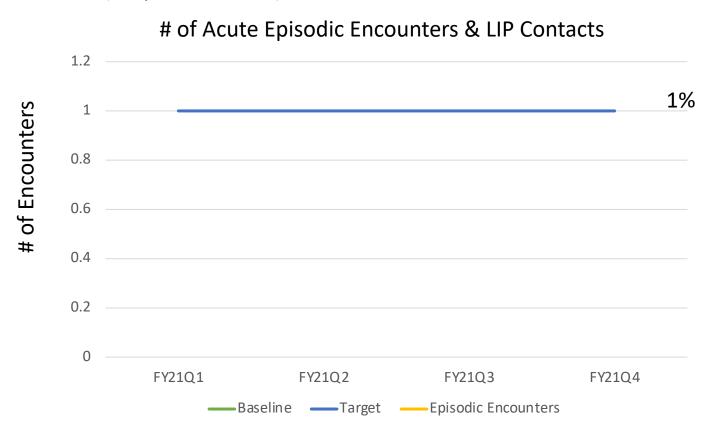
Notes: FY20 Q1: 65 VAMCs covered by LIP FY20 Q2: 76 VAMCs Covered by LIP FY20 Q3: 84 VAMCs Covered by LIP FY20 Q4: 128 VAMCs Covered by LIP

The below chart demonstrates progress against the goal of a 50% increase in the use of dedicated medical advice and enhanced triage support from CCCs assisted by LIPs. <u>Note: Data capture for each reporting period is from the preceding quarter</u>



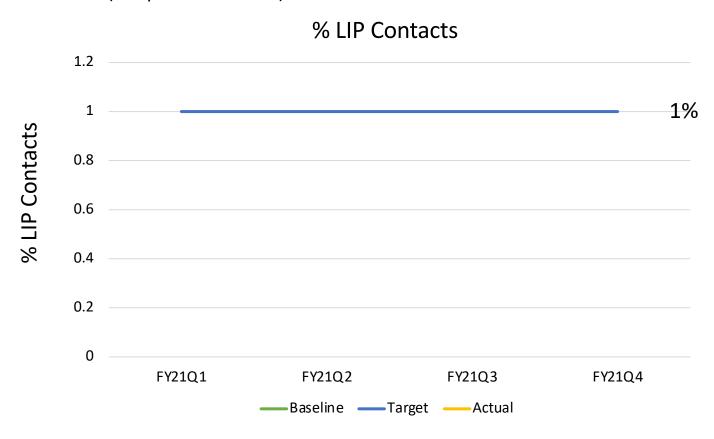
Notes: No Update until FY21 Q1 for Baseline

The below chart demonstrates progress against the goal of at least 1% of total incoming CCC RN call volume dealing with acute episodic health concerns will include care from LIPs using virtual care modalities (telephone or video)



Notes: No update until FY21 Q1 for baseline

The below chart demonstrates progress against the goal of at least 1% of total incoming CCC RN call volume dealing with acute episodic health concerns will include care from LIPs using virtual care modalities (telephone or video)



Notes: No update until FY21 Q1 for baseline

Digital Care: Data Accuracy and Reliability

Current state:

The Primary Care VVC Provider data (and Data Definitions) available at VSSC site https://reports.vssc.med.va.gov/ReportServer/Pages/ReportViewer.aspx?%2fTelehealth%2fProvToHomeUsingCurrent&rs:Command=Render

The Mental Health VVC Provider data (and Data Definitions) available at VSSC site https://reports.vssc.med.va.gov/ReportServer/Pages/ReportViewer.aspx?%2fTelehealth%2fMHProvToHome2&rs:Command=Render

Plan:

The Ambulatory/Specialty Care VVC Provider data (and Data Definitions) are being finalized and not yet available online but will look like those above for PC and MH

LIP Utilization: Data Accuracy, Validity, and Reliability

Current state:

- Data capture methods across the CCC space are inconsistent and rely heavily on self-reporting methods.
- Consequently, data accuracy and reliability is subject to accuracy and reliability issues.

Plan:

- CCC Implementation Team will define, develop, and implement a standardized data capture methodology to measure progress toward the goal of 1% increase in LIP utilization
- Multiple data sources will be used to mitigate inherent reliability and validity constraints

Definitions for Reference

DEFINITIONS				
Acute Episodic	Wherein a patient receives an evaluation and, if clinically indicated, treatment for an episode of illness, injury or exposure			
Clinical Contact Center(s)	Clinical Contact Center(s), or CCC, offer a range of virtual modalities, such as telephone, video, and chat			
Digital Care Delivery	Includes virtual care delivery methods such as secure messaging, VA Video Connect (VVC), and Annie text messaging app.			
First Contact Resolution	First contact resolution, or FCR, aims to connect Veterans with the services they desire, in a seamless process that resolves the issue, during the Veteran's first attempt at contacting Veteran Affairs			
LIP	Licensed Independent Practitioner			
My HealtheVet	VA's Patient Portal to include digital tools, transactions, services, tracking, and monitoring (e.g., Secure Messaging, Prescription Refill and Tracking, Health Records, Appointments, Veterans Health Library, HealtheLiving Assessment, Self-entered modules, Health Content.			
Telehealth	The use of electronic information or telecommunications technologies to support clinical health care, patient and professional health-related education, public health, and health administration at a distance.			
VVC	VA Video Connect app enables private encrypted video telehealth services between VA staff, Veterans, and Caregivers using computers or mobile devices (e.g., smartphones, tablets, laptops, etc.)			