

# Webinar Background

- Webinar title:  
**Resilient Primary Care: Optimize Virtual Chronic Disease Care**
- Date & time: Thursday, August 6, 11:00am PDT
- Target Audience:
  - Front line providers and care teams, IPA leaders and staff
  - Health plans and other technical assistance partners were encouraged to join, listen and share
- Participants
  - 28 unique attendees



# Webinar Resources Shared

- Addressing patients' connectivity & broadband needs
  - [NEJM Catalyst](#), "Addressing Equity in Telemedicine for Chronic Disease Management During the Covid-19 Pandemic" (5/4/20)
- Understanding patients' needs and increasing engagement
  - [PFCC Partners](#) - Share methods, successes, and challenges for sustainable Patient Family engagement structures across the healthcare continuum
- Identifying opportunities for telehealth improvement
  - [New York Times](#), "Is Telemedicine Here to Stay?" (8/3/20)

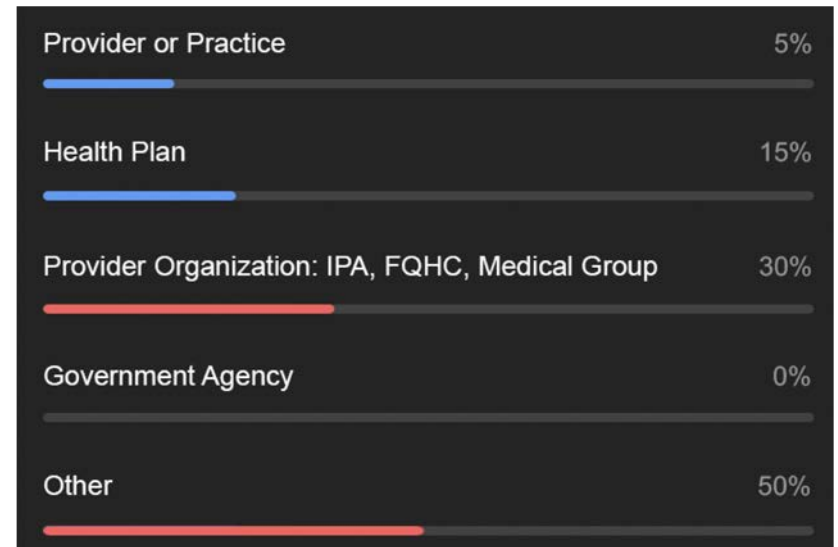
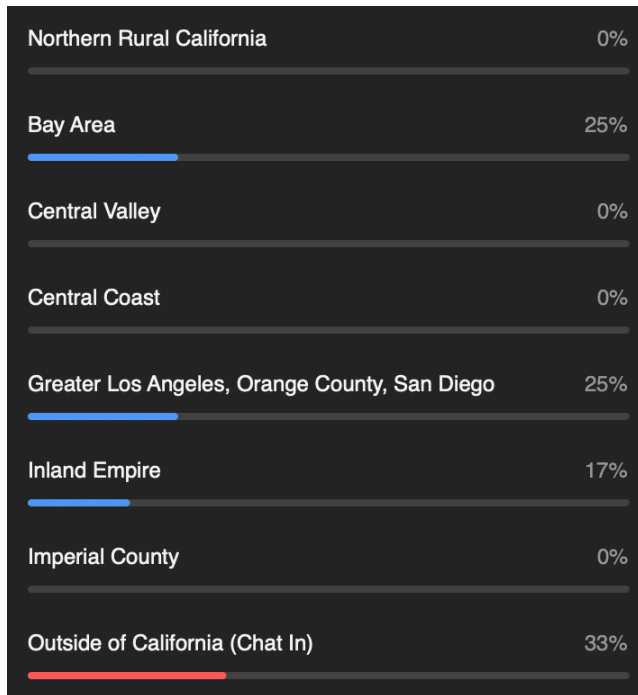


# Poll: Who's in the (virtual) room?



From where are you dialing?

What type of organization do you represent?



# Resilient Primary Care

- CQC's "Resilient Primary Care" series supports high quality, patient-centered primary care through the impacts of COVID-19 and beyond
- Build and strengthen your internal capacity through:



Peer sharing



Building blocks of high-performing primary care



Hearing from successful practices

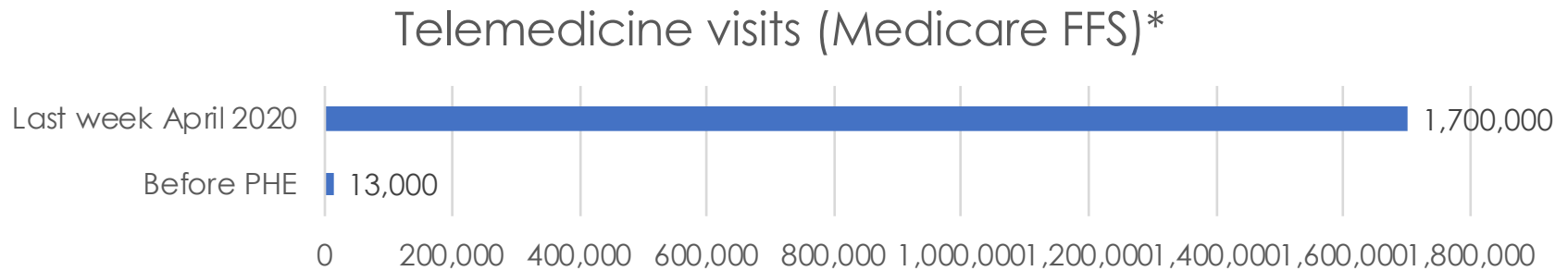


Health care innovations

- At the end of this this webinar, please share your ideas for future topics



# Current State



During these unprecedented times, telemedicine has proven to be a lifeline for health care providers and patients. The rapid adoption of telemedicine among providers and patients has shown that **telehealth is here to stay**. \*

**Seema Verma**,  
Administrator,  
Centers for  
Medicare and  
Medicaid Services,  
07/15/20



\*Source: 07/15/20, Health Affairs, "Early Impact of CMS Expansion of Medicare Telehealth During COVID-19"

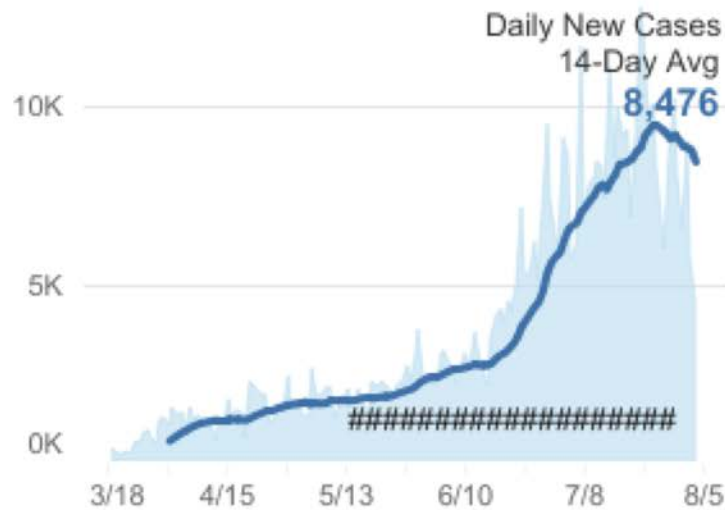


# Current State cont.

**519,427**

Positive Cases

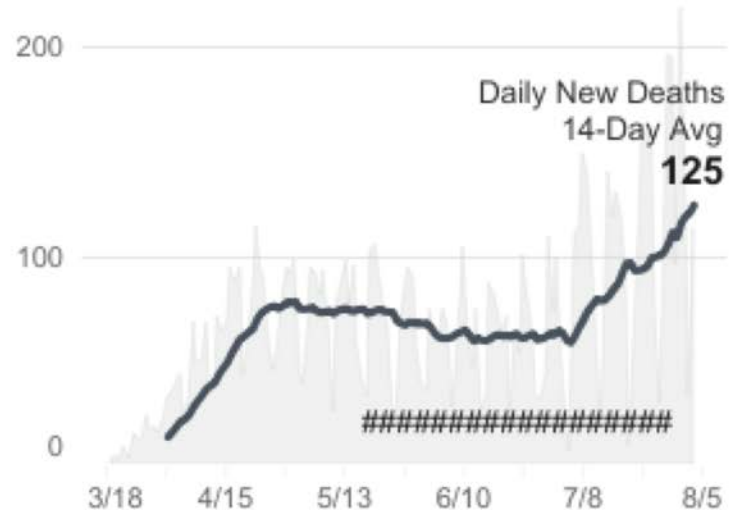
+4,526 New Cases  
+0.9% Increase



**9,501**

Total Deaths

+113 New Deaths  
+1.2% Increase



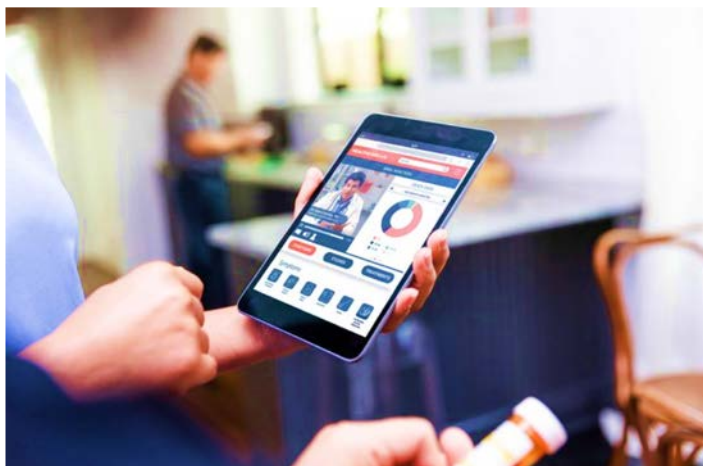
\*[Source](#): CA.GOV COVID-19 State Update, accessed 08/04/20



# Current Requirements, Future Possibilities

## What's necessary today

- Address backlog of deferred patient needs
- Keep COVID-19 high-risk patients with chronic conditions healthy
- Ensure safety for staff and patients



## The opportunity

- Maintain gains in telehealth and increase use for most impact (e.g., chronic care)
- Pilot and spread new virtual modalities (e.g., group visits)
- Improve access, lower costs, support better health



# Poll:

## Is Virtual Care a Strategic Priority?



**To what degree is virtual care for chronic disease integrated in your organization's strategy?**





# Lessons from an (Emerging) Field

Spotlight on:

Tera Practice (presented on [04/30/20 CQC](#) webinar)

- Virtual First, Full Service Primary Care launched 2018
- 95% care virtual (secure messaging, telephone, video); in-person
- Chronic conditions with health coaching
- Panel management using frontline developed data reports
- Virtual mental health integration



# Lessons: Building Virtual Care

- **Lesson 1:**  
A lot of care & high-risk care is amenable to virtual management
- **Lesson 2:**  
Patients adopt technology when they understand the value - convenience
  - An acute visit can provide the right motivation
- **Lesson 3:**  
98% of care is around a good history
  - Video is not always needed
  - Can build initial rapport



# Lessons: Building Virtual Care

- **Lesson 4:**  
It takes a (virtual) team
  - Can increase access to specialists and behavioral health providers
- **Lesson 5:**  
Engage caregivers (virtually)
  - Ensure caregivers have proxy access & follow-up information
- **Lesson 6:**  
Be creative and flexible in utilizing virtual tools
  - Ideas: virtual pill counts



# Lessons: Optimizing Virtual Chronic Care



- Early access → improved chronic condition management
  - If you lower barriers to accessing care, patients will present earlier and more often, preventing downstream complications



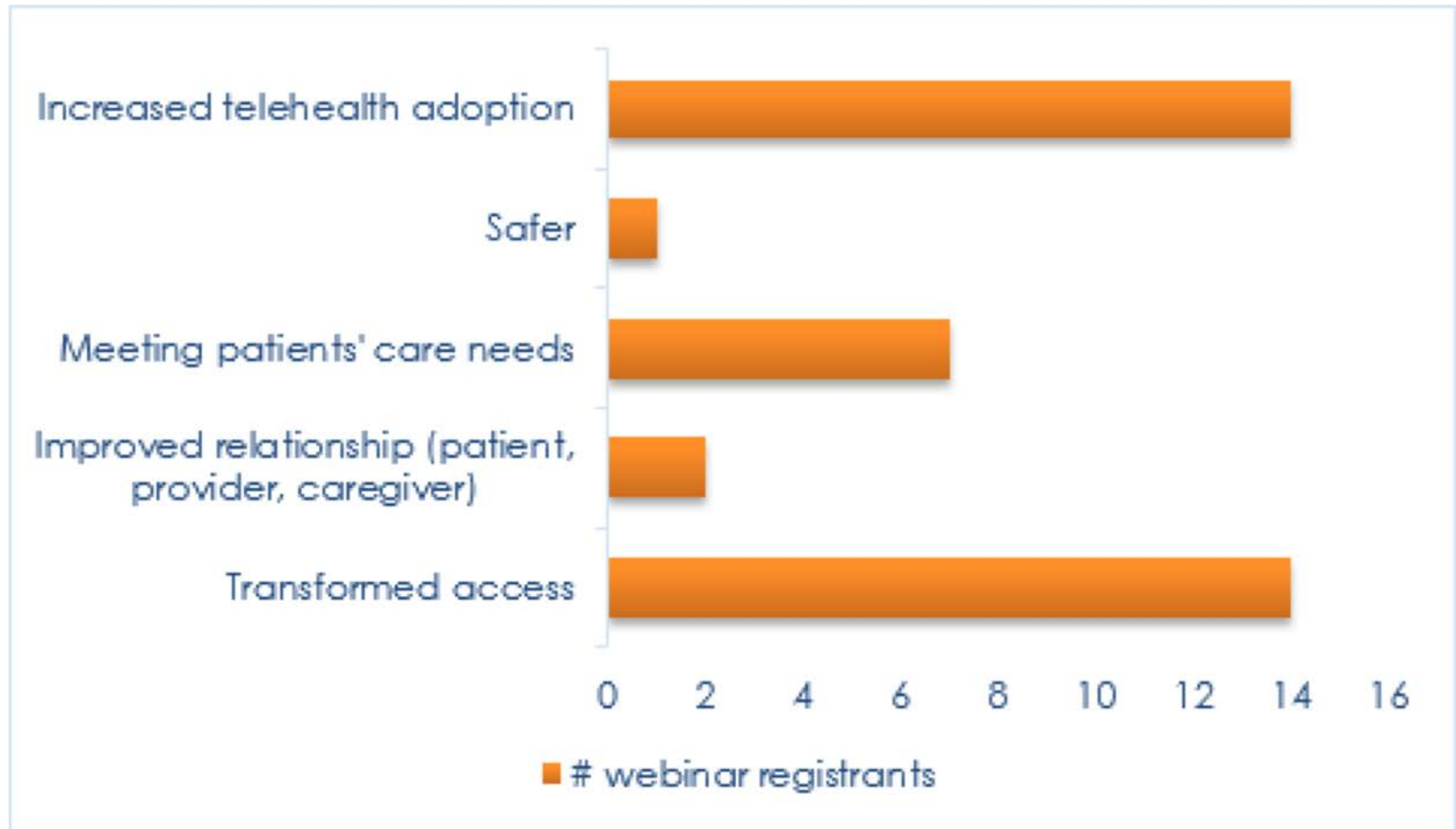
- Build in time proactively to support patients testing and using technology



- Leverage the entire care team
  - Re-visit virtual workflows to ensure entire team is supporting virtual visit (technical testing, pre-visit screening and rooming follow-up)



# What's Working for You: Virtual Chronic Care



# What's Necessary?

## Engaged Leadership

- Quality improvement focus: use of aim statement
- Strong change management approach

## Telehealth Operations

- Telehealth is as strategic priority
- High quality documentation & reimbursement
- Successful technology
- Seamless operational support

## Patient Engagement

- Collect real-time feedback, especially on telehealth experience
- Shared Decision-Making

## Data Driven Improvement

- Strong data systems to collect information related measures
- Data shared widely and transparently
- Actionable data displays

## Team Based Care and Virtual Workflows

- High-functioning virtual care team roles for hybrid clinical settings
- Use of standing orders
- Effective virtual workflows, including virtual/in-person clinical decision analysis

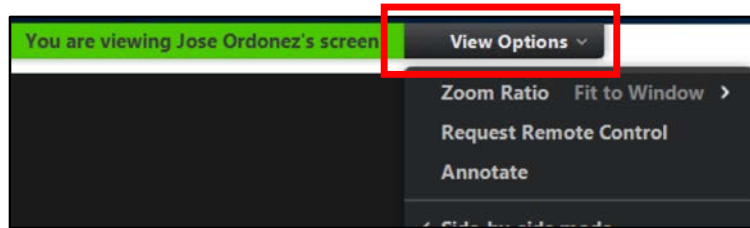
## Population Management for Chronic Disease

Successful virtual use of:

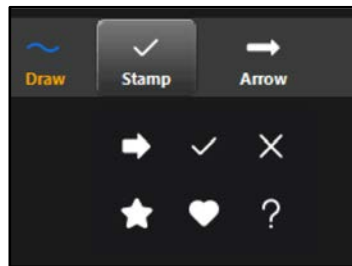
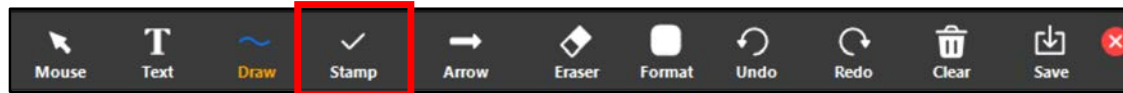
- Empanelment
- Continuity of Care
- Population Management
- Care coordination & Transitions of care
- Behavioral Health Integration



# Virtual Dot Voting!

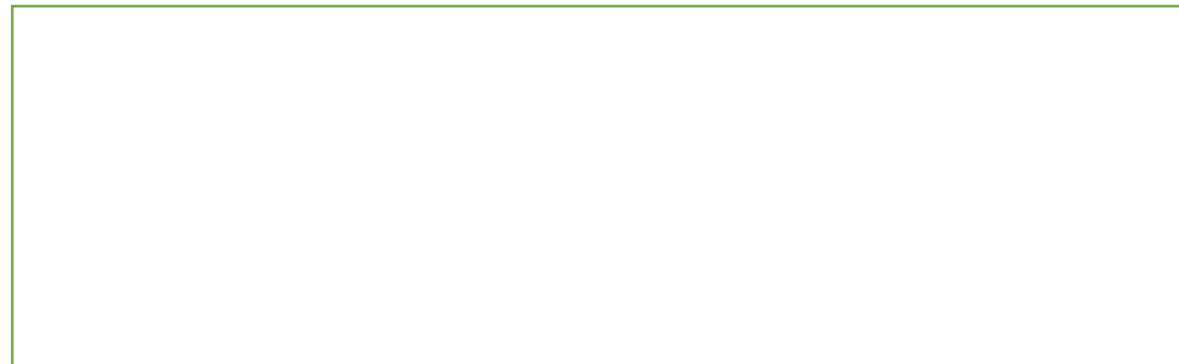


At the top of your screen, select **View Options**, then click on **Annotate**. The following toolbar will appear.

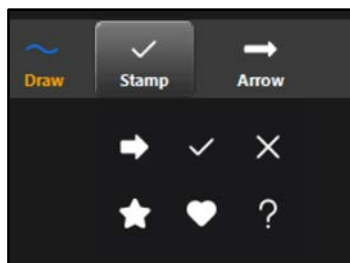
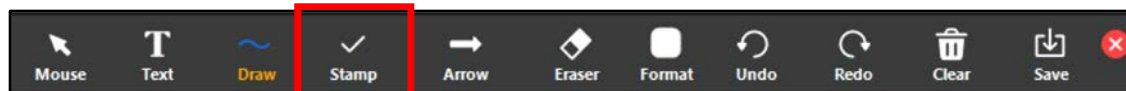
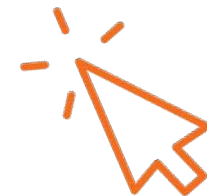


Select **Stamps** to change your shape to place within the voting area

**Let's try it!**  
Place one stamp of your choice in box to right



# Virtual Dot Voting! Activity



→ Select Stamps to change your shape to place within the voting area



## Activity Instructions

- We will go through three rounds of voting on 3 topics
- Each round, you get three votes

## Topics are:

1. Where you are **doing well in** virtual chronic care as an organization
2. Where **you could use improvement** in virtual chronic care as an organization
3. Where you need **outside assistance** in virtual chronic care







# Round 1 (Each round, you get three votes)

## 1. Where you are **doing well in** virtual chronic care as an organization

<b>Engaged Leadership</b>	
<ul style="list-style-type: none"><li>• Quality improvement focus: use of aim statement</li><li>• Strong change management approach</li></ul>	

<b>Data Driven Improvement</b>	
<ul style="list-style-type: none"><li>• Strong data systems to collect information related measures</li><li>• Data shared widely and transparently</li><li>• Actionable data displays</li></ul>	

<b>Telehealth Operations</b>	
<ul style="list-style-type: none"><li>• Telehealth is as strategic priority</li><li>• High quality documentation &amp; reimbursement</li><li>• Successful technology</li><li>• Seamless operational support</li></ul>	

<b>Team Based Care and Virtual Workflows</b>	
<ul style="list-style-type: none"><li>• High-functioning virtual care team roles for hybrid clinical settings</li><li>• Use of standing orders</li><li>• Effective virtual workflows, including virtual/ in-person clinical decision analysis</li></ul>	

<b>Patient Engagement</b>	
<ul style="list-style-type: none"><li>• Collect real-time feedback, especially on telehealth experience</li><li>• Shared Decision-Making</li></ul>	

<b>Population Management for Chronic Disease</b>	
Successful virtual use of: <ul style="list-style-type: none"><li>• Empanelment</li><li>• Continuity of Care</li><li>• Population Management</li><li>• Care coordination &amp; Transitions of care</li><li>• Behavioral Health Integration</li></ul>	





## Round 2 (Each round, you get three votes)

### 2. Where **you could use improvement** in virtual chronic care as an org

Engaged Leadership	
<ul style="list-style-type: none"> <li>Quality improvement focus: use of aim statement</li> <li>Strong change management approach</li> </ul>	

Data Driven Improvement	
<ul style="list-style-type: none"> <li>Strong data systems to collect information related measures</li> <li>Data shared widely and transparently</li> <li>Actionable data displays</li> </ul>	

Telehealth Operations	
<ul style="list-style-type: none"> <li>Telehealth is as strategic priority</li> <li>High quality documentation &amp; reimbursement</li> <li>Successful technology</li> <li>Seamless operational support</li> </ul>	

Team Based Care and Virtual Workflows	
<ul style="list-style-type: none"> <li>High-functioning virtual care team roles for hybrid clinical settings</li> <li>Use of standing orders</li> <li>Effective virtual workflows, including virtual/in-person clinical decision analysis</li> </ul>	

Patient Engagement	
<ul style="list-style-type: none"> <li>Collect real-time feedback, especially on telehealth experience</li> <li>Shared Decision-Making</li> </ul>	

Population Management for Chronic Disease	
Successful virtual use of: <ul style="list-style-type: none"> <li>Empanelment</li> <li>Continuity of Care</li> <li>Population Management</li> <li>Care coordination &amp; Transitions of care</li> <li>Behavioral Health Integration</li> </ul>	





## Round 3 (Each round, you get three votes)

### 3. Where you need **outside assistance** in virtual chronic care

Engaged Leadership	
<ul style="list-style-type: none"> <li>• Quality improvement focus: use of aim statement</li> <li>• Strong change management approach</li> </ul>	

Data Driven Improvement	
<ul style="list-style-type: none"> <li>• Strong data systems to collect information related measures</li> <li>• Data shared widely and transparently</li> <li>• Actionable data displays</li> </ul>	

Telehealth Operations	
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Team Based Care and Virtual Workflows	
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# Summary of Responses: Dot Voting

<p><b>Engaged Leadership</b></p> <ul style="list-style-type: none"> <li>• Quality improvement focus: use of aim statement</li> <li>• Strong change management approach</li> </ul>	<p> Doing well</p>
<p><b>Data Driven Improvement</b></p> <ul style="list-style-type: none"> <li>• Strong data systems to collect information related measures</li> <li>• Data shared widely and transparently</li> <li>• Actionable data displays</li> </ul>	<p> Needs improvement</p>
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# Webinar Key Take-Aways: Dot Voting

- Participants felt their leaders
  - Are engaged
  - Can leverage internal momentum to improve even further how they engage patients, strengthen telehealth operations, and use data to drive improvement
- Participants need external assistance to:
  - Guide the use of virtual tools for more impactful population management and team-based care
  - Allow them to sustain effective tele-health beyond the current emergency



# Sharing and Learning: Discussion Questions

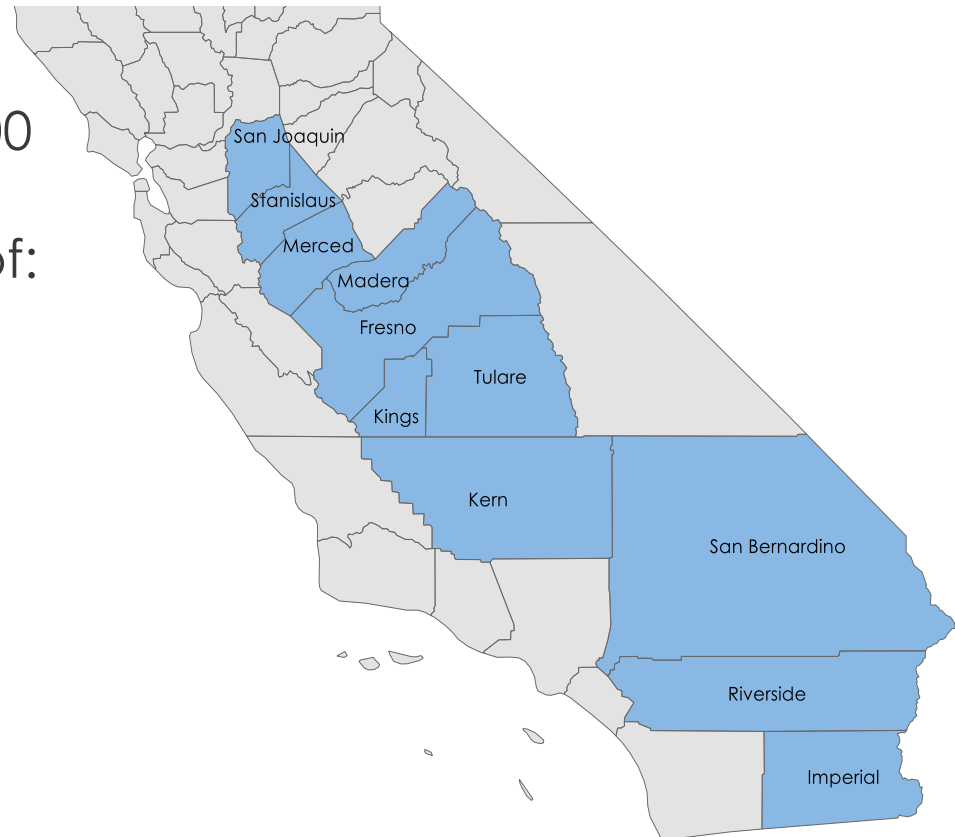


- What is your organization doing currently to improve in these areas?
- How are you understanding and tracking patients' barriers to virtual care?
- How are your organizations providing resources to patients needing broadband or access to digital tools?
- How are you supporting patients around behavioral change virtually?



# What is the CalHIVE Network?

- **CalHIVE (Health. Impact. Value. Engagement.) Network**, is an improvement collaborative and technical assistance program designed to improve clinical outcomes for patients with chronic conditions by fully optimizing the tools of virtual health care.
- CalHIVE will engage 1,500 primary care clinicians focused on the regions of:
  - The Central Valley
  - The Inland Empire
  - Imperial County
- 2-year program to begin October 2020



# Why Participate?

Our aim for this initiative is to:

- Improve clinical outcomes and reduce variation within participating organizations for patients with diabetes & asthma
- Maximize telehealth operations to support sustainable management of chronic conditions
- Adopt a measurement plan for telehealth quality & monitoring





# Program Offerings



## Learning Events & Activities

- Live webinars with experts and peers
- On-demand recorded videos and tools
- Program website
- Network of peers
- In person meetings (when safe to do so)



## Improvement Advising

- Coaching for teams and leaders
- Development of practice engagement plans
- Technical skill-building
- Sustainability planning



## Data Insights

- Data analysis calls/video conferences as-needed
- Identification of gaps in data systems and capabilities
- Performance analysis across network
- Education on telehealth quality measures

# Successful participation looks like...



- **Senior Leadership Support:** Participating teams must have the explicit support and engagement of their senior leadership
- **Project Resources:** A project leader who will oversee the activities of the team and is provided the time and resources to succeed
- **Improvement Team:**  
A multidisciplinary improvement team of 4 to 6 members
- **Support for Measurement and Data Infrastructure:**  
A designated data lead to tackle the challenges of securing consistent and accurate data
- **Existing Telehealth Infrastructure:** Organizations should have a telehealth product they intend to use long-term



# Interested in Participating?



- Please email Michael Au: [mau@pbgh.org](mailto:mau@pbgh.org)
- We will be finalizing participants in September to begin in October
- Visit the CalHIVE Webpage [calquality.org/programs/calhive](http://calquality.org/programs/calhive)
- Download the [CalHIVE Program Prospectus](#)
- There are no fees to participate in this collaborative, due to the generous funding provided by CVS Aetna and the California Health Care Foundation (CHCF).



# Questions/Answers

Type your questions or comments in the chat box



- What is your organization doing currently to improve in these areas?
- How are you understanding and tracking patients' barriers to virtual care?
- How are your organizations providing resources to patients needing broadband or access to digital tools?
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# Thank you!

## Stay Connected to CQC

- Visit the CalHIVE Webpage at [calquality.org/programs/calhive](https://calquality.org/programs/calhive) or contact Michael Au at [mau@pbgh.org](mailto:mau@pbgh.org)
  - Download the [CalHIVE Program Prospectus](#)
- Save the date for our next Resilient Primary Care webinar on primary and maternity care integration (Thurs. 10/22)
- If you have questions, want to register for our newsletter, or would like more information, email us at [cqcinfo@calquality.org](mailto:cqcinfo@calquality.org)

