SOUTH CAROLINA Telehealth

Statewide Strategic Plan

Mission

Improve the Health of all South Carolinians through Telehealth

Vision

Telehealth will grow to support delivery of health care to all South Carolinians with an emphasis on underserved and rural communities. It will facilitate, coordinate, and make more accessible quality care, education, and research that are patient centered, reliable, and timely. Our state will become recognized nationally for telehealth that is uniquely collaborative, valuable, and cost-effective.

Statewide Strategic Plan

The Statewide Strategic Plan has been optimized to focus on service-oriented strategy domains with cross-cutting support tactics in the areas of telehealth education, advocacy/awareness, technology, and outcomes. This enhanced format centers around our clinical services and allows us to rethink how our tactical support efforts can improve our telehealth program infrastructure and maximize value. The strategic plan is meant as a more enduring document, outlining strategies and goals for the next 2-5 years.

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Service Extension

All citizens of South Carolina will have equitable access to ambulatory care

This strategy represents the use of core telehealth modalities in the ambulatory setting in order to extend the reach services that would otherwise be limited by travel and related barriers to care. These modalities are designed for broad use across multiple specialties and strive to provide high levels of efficiency and quality in order to support a range of providers and specialties.

Progress Metrics

Growth in percent of ambulatory care delivered virtually Reduction in geographic and population disparities in access to ambulatory care

Supporting Tactical Goals

Outcomes	Technical	Education and Training	Advocacy and Awareness
	Infrastructure		
Establish ability to track	Expand access to	Establish core	Advocate for permanent
virtual visit volumes with	ambulatory video visit	educational materials	removal of rurality
stratification by	platforms and provide	to assist dissemination	restrictions, originating site
geography and	support for efficient	of ambulatory video	restrictions, new patient
demographics	use	visit best practices	limitations and allowable
			code limitations
	Introduce e-consult		
	capabilities available		Advocate for reimbursement
	in underserved areas		of e-consults as
			interprofessional internet
			consultation allowable codes
			by all payers

2021-2022 Service Extension Tactics

Service Tactic: Maintain current champion Service Extension clinical programs, and report utilization and growth occurring within this clinical strategy area. Additionally, introduce eConsult as a telehealth modality.

2021 Milestones:

• September 2021:

- Convene utilizers of SCTA supported DTC platform to assess needs
- Identify initial participating practices and specialists for statewide eConsult initiative
- Adapt data collection and quarterly reporting structure to reflect updated strategy format

• December 2021:

- Establish clinical support goals for DTC platform users
- Complete awareness campaign for eConsult initiative
- Fully implement new data collection and quarter reporting structure

2022 Milestones:

- March 2022: Continue reporting quarterly on programs in alignment with updated strategy format
- June 2022: Continue reporting quarterly on programs in alignment with updated strategy format
- **September 2022:** Review data and heat maps to begin planning CY2023 milestones to meet need
- December 2022: Finalize CY2023 data-driven goals to intentionally address service gaps

Tactical Leads: SCTA clinical partners

Outcomes: Establish method to map baseline/existing gap in outpatient specialty care to inform future planning

2021 Milestones:

- **September 2021**: Establish data source to assess specialty care utilization by county and ambulatory telehealth utilization per capita
- **December 2021:** Obtain sample report of specialty care utilization by county and ambulatory telehealth utilization per capita

2022 Milestones:

- March 2022: Develop heat-mapping of utilization rates
- June 2022: Formulate service gap mitigation targets and identify scope of intervention needed
- September 2022: Establish expected impact based on targeted service strategies
- **December 2022:** Review early and process data of access mitigation strategies, establish adjusted targets and data revisions for CY2023

Tactical Leads: MUSC COE, USC CRPH

Technological Infrastructure: Establish scope of need for home internet capacity for safety net and rural practices

2021 Milestones:

- **September 2021:** Identify broadband service area gaps for the patients of safety net community providers
- **December 2021:** Identify approaches for community-specific patient broadband access barriers

2022 Milestones:

- March 2022: Finalize community targets for health care access-focus patient broadband access initiatives for CY2022
- **September 2022:** Continue engaging internet service providers and other stakeholders to expand access and affordability in rural communities
- December 2022: Assess CY22 progress and remaining need, finalize strategy milestones for CY2023

Tactical Leads: Palmetto Care Connections (PCC)

Education and Training: Assess patient and provider needs to support Direct-to-Consumer video visits provided by safety net and rural practices

2021 Milestones:

- **September 2021**: Identify provider, clinical, and supporting staff outpatient telehealth training needs
- **December 2021**: Establish educational and training areas of focus for outpatient practices CY2022

2022 Milestones:

- March 2022: Finalize CY2022 educational and training initiatives for outpatient practices providing DTC telehealth
- September 2022: Develop and deploy enhanced telehealth and digital literacy training and education to clinics and patients in rural and underserved communities
- **December 2022:** Assess progress and reach of education and training efforts and finalize Cy2023 strategy milestones for telehealth training and education

Tactical Leads: PCC, SCAHEC

Advocacy and Awareness: Continue ongoing advocate efforts supporting telehealth sustainability

Telehealth

A L L I A N C E

- **September 2021**: Have convened with legislative and payer partners to discuss advocacy efforts supporting telehealth sustainability
- **December 2021**: Identify and finalize CY2022 payment advocacy priorities and action plan

2022 Milestones:

- **March 2022:** Develop work plan for implementation of CY2022 payment advocacy priorities and action plan
- June 2022: Begin work plan implementation
- **September 2022:** Continue work plan implementation and review statuses on priority achievement
- December 2022: Identify and finalize CY2023 payment advocacy priorities and action plan

Tactical Leads: SCTA Sustainability Workgroup

Advocacy and Awareness: Develop and produce service-bucket-specific content defining the Service Extension bucket and highlighting cumulative achievements in South Carolina

2021 Milestones:

- September 2021: Review existing content library to identify Service Extensionspecific content
- **December 2021:** Propose plan to fill any gaps with new content and/or aggregate data points.

2022 Milestones:

- March 2022: Create plan to outline next steps in content creation, obtain needed data from partners to include
- June 2022: Implement content creation and production plan, outline dissemination plan
- September 2022: Finalize content and prepare for dissemination
- **December 2022:** Finalize CY2023 priorities and milestones

<u>Tactical Leads:</u> South Carolina Educational Television (SCETV)

Service Extension Example Services

- Ambulatory Video Visits
- Regional Telehealth Clinics
- Outpatient Telepsychiatry
- E-consults



Support Hospitals

Every community hospital in our state will have access to telehealth partnerships that enhance its services and its finances

These services represent partnerships that extend care between hospitals using telehealth with a focus of connecting resources from larger urban hospitals to community hospitals throughout the state. The services should have sustainable business models and a strong case for the benefit to the referring community hospital.

Progress Metrics

Growth in the average number of service partnerships per hospital

Outcomes	Technical	Education and	Advocacy and
	Infrastructure	Training	Awareness
Establish outcomes	As a mature	Establish core	Advocate for
assessing needs of	infrastructure,	educational materials	permanent removal
community hospitals,	optimize integrations	to assist hospital-	of rurality
ability to track	and platform	based service	restrictions, consult
utilization of	consolidation	training	frequency
hospital-based	opportunities		limitations, and
telehealth, and			allowable code
financial impact on	Improve in-hospital		limitations
hospitals.	connectivity for		
	referring sites		

Supporting Tactical Goals

2021-2022 Hospital Services Tactics

Service Tactic: Maintain current champion Hospital Support clinical programs, and report utilization and growth occurring within this clinical strategy area

- September 2021: Adapt data collection and quarterly reporting structure to reflect updated strategy format
- **December 2021:** Fully implement new data collection and quarter reporting structure

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2022 Milestones:

- March 2022: Continue reporting quarterly on programs in alignment with updated strategy format
- June 2022: Continue reporting quarterly on programs in alignment with updated strategy format
- **September 2022:** Review data and heat maps to begin planning CY2023 milestones to meet need
- December 2022: Finalize CY2023 data-driven goals to intentionally address service gaps

Tactical Leads: SCTA clinical partners

Outcomes: Establish method to identify existing/baseline gap in inpatient specialty care to inform future program expansion

2021 Milestones:

- **September 2021**: Establish data source to assess inpatient specialty care utilization and time from admission to specialty consult by county
- **December 2021:** Obtain sample report of inpatient specialty care utilization and time from admission to specialty consult by county

2022 Milestones:

- March 2022: Develop heat-mapping of utilization rates
- June 2022: Formulate service gap mitigation targets and identify scope of intervention needed
- September 2022: Establish expected impact based on targeted service strategies
- **December 2022:** Review early and process data of access mitigation strategies, establish adjusted targets and data revisions for CY2023

Tactical Leads: MUSC COE

Advocacy and Awareness: Develop and produce service-bucket-specific content defining the Hospital Services bucket and highlighting cumulative achievements in South Carolina

2021 Milestones:

- **September 2021:** Review existing content library to identify Hospital Service-specific content
- **December 2021:** Propose plan to fill any gaps with new content and/or aggregate data points.

2022 Milestones:

• March 2022: Create plan to outline next steps in content creation, obtain needed data from partners to include



- ALLIANCE
- June 2022: Implement content creation and production plan, outline dissemination plan
- September 2022: Finalize content and prepare for dissemination
- December 2022: Finalize CY2023 priorities and milestones

<u>Tactical Leads:</u> South Carolina Educational Television (SCETV)

Hospite	al Services Example Services
•	Neurosciences
•	Tele-ICU
•	Infectious Disease
•	IP Psychiatry
•	Palliative Care
•	Hospitalist
•	Cardiology
•	Pulmonology
•	IP Nutrition



Convenient Care

All citizens in South Carolina will have affordable and immediately available patientinitiated virtual urgent and other health system-entry level care from an in-state provider

Convenient Care services are designed to engage individual patients through their own available devices in order to optimize utilization and maximize healthcare engagement. The services should both meet an immediate need of the patients and be enabled to achieve patient engagement to enhance population health and preventive care.

Progress Metrics

Increase in percent of population with affordable access to rapid virtual urgent care

Outcomes	Technical	Education and	Advocacy and
	Infrastructure	Training	Awareness
Establish ability to track virtual visit volumes with stratification by geography and demographics	Expand use of virtual urgent platforms with optimized capabilities for ease of use and health system integrations to maintain continuity of care	Establish core educational materials to assist dissemination of rapid virtual care best practices	Advocate for inclusion of direct-to- patient services in payer contracts, including SC Medicaid providers

Supporting Tactical Goals

2021-2022 Convenient Care Tactics

Service Tactic: Maintain current champion Convenient Care clinical programs, and report utilization and growth occurring within this clinical strategy area

2021 Milestones:

- September 2021: Adapt data collection and quarterly reporting structure to reflect updated strategy format
- **December 2021:** Fully implement new data collection and quarter reporting structure

2022 Milestones:

• March 2022: Continue reporting quarterly on programs in alignment with updated strategy format

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- June 2022: Continue reporting quarterly on programs in alignment with updated strategy format
- September 2022: Review data and heat maps to begin planning CY2023 milestones to meet need
- December 2022: Finalize CY2023 data-driven goals to intentionally address service gaps

Tactical Leads: SCTA clinical partners

Outcomes: Establish capability and method to map gaps in convenient care access to help direct future telehealth programs

2021 Milestones:

- September 2021: Establish data source to assess virtual urgent care utilization by county
- December 2021: Obtain sample report of virtual urgent care utilization by county

2022 Milestones:

- March 2022: Develop heat-mapping of utilization rates
- June 2022: Formulate service gap mitigation targets and identify scope of intervention needed
- September 2022: Establish expected impact based on targeted service strategies
- **December 2022:** Review early and process data of access mitigation strategies, establish adjusted targets and data revisions for CY2023

<u> Tactical Leads: MUSC COE</u>

Advocacy and Awareness: Develop and produce service-bucket-specific content defining the Convenient Care bucket and highlighting cumulative achievements in South Carolina

2021 Milestones:

- September 2021: Review existing content library to identify Convenient Carespecific content
- **December 2021:** Propose plan to fill any gaps with new content and/or aggregate data points.

- March 2022: Create plan to outline next steps in content creation, obtain needed data from partners to include
- June 2022: Implement content creation and production plan, outline dissemination plan
- September 2022: Finalize content and prepare for dissemination
- **December 2022:** Finalize CY2023 priorities and milestones



<u>Tactical Leads:</u> South Carolina Educational Television (SCETV)

Convenient Care Champion Services

• Virtual Urgent Care



Support Primary Care

All primary care clinics in the state, with emphasis on Health Professional Shortage Areas (HPSAs), will have access to integrated services through telehealth partnerships

These services are designed to be integrated into the primary care setting. The services are intended to support the mission of the primary care clinic as a medical home, emphasizing the importance of local health care infrastructure while mitigating gaps in access to supporting resources. Value will be demonstrated through an increased ability for local primary care to serve their populations. Services that leverage state appropriations should preferentially target primary care shortage areas.

Progress Metrics

Increase in number of primary care practices accessing a telehealth partnership. Increase in multi-disciplinary and specialty-advised care occurring through primary care.

Outcomes	Technical	Education and	Advocacy and
	Infrastructure	Training	Awareness
Establish ability to	Coordinate cross	Establish core	Advocate for
track virtual visit	platform use to	educational materials	permanent removal
volumes delivered in	include in-clinic	to support primary	of provider type and
partnership to	consultation, direct-	clinic's ability to	originating site
practices with	to-patient video and	engage with support	restrictions
stratification for	remote monitoring	services	
Health Professional	capabilities as		Expand remote
Shortage Areas	integrated with		patient monitoring
	primary care		reimbursement to
Establish method to			include use of a
track quality metrics			distant monitoring
for integrated care			team

Supporting Tactical Goals

2021-2022 Primary Care Support Tactics

Service Tactic: Maintain current champion Primary Care Support clinical programs, and report utilization and growth occurring within this clinical strategy area

2021 Milestones:

• September 2021: Adapt data collection and quarterly reporting structure to reflect updated strategy format

• **December 2021:** Fully implement new data collection and quarter reporting structure

2022 Milestones:

- March 2022: Continue reporting quarterly on programs in alignment with updated strategy format
- June 2022: Continue reporting quarterly on programs in alignment with updated strategy format
- September 2022: Review data and heat maps to begin planning CY2023 milestones to meet need
- December 2022: Finalize CY2023 data-driven goals to intentionally address service gaps

Tactical Leads: SCTA clinical partners

Outcomes: Establish capability and method to map gaps to help direct future telehealth program expansion

2021 Milestones:

- **September 2021**: Establish data source to assess outpatient psychiatry, nutrition counseling and diabetes remote patient monitoring utilization by county
- **December 2021:** Obtain sample report of outpatient psychiatry, nutrition counseling and diabetes remote patient monitoring utilization by county

2022 Milestones:

- March 2022: Develop heat-mapping of utilization rates
- June 2022: Formulate service gap mitigation targets and identify scope of intervention needed
- September 2022: Establish expected impact based on targeted service strategies
- **December 2022:** Review early and process data of access mitigation strategies, establish adjusted targets and data revisions for CY2023

Tactical Leads: MUSC COE, USC CRPH

Advocacy and Awareness: Track and advocate for state and federal legislative activities 2021 Milestones:

- September 2021: Submit request to payers to include registered dietician, psychologist and licensed master's mental health counseling as eligible providers for telehealth, adoption of remote patient monitoring CMS coding and adoption of interprofessional internet consultation CMS coding
- **December 2021:** Identify CY2022 payment advocacy priorities and create CY2022 advocacy action plan



2022 Milestones:

- March 2022: Finalize and implement CY2022 Advocacy Action Plan
- June 2022: Develop prioritized list of payment and coverage requests to bring to SC payers
- September 2022: Engage with SC payers to discuss priorities and feasibility for coverage and payment
- **December 2022:** Report out progress in discussions with payers and prepare for 2023 legislative session

Tactical Leads: SCTA Sustainability Workgroup

Advocacy and Awareness: Develop and produce service-bucket-specific content defining the Primary Care Support bucket and highlighting cumulative achievements in South Carolina

2021 Milestones:

- September 2021: Review existing content library to identify Primary Care Support-specific content
- **December 2021:** Propose plan to fill any gaps with new content and/or aggregate data points.

2022 Milestones:

- March 2022: Create plan to outline next steps in content creation, obtain needed data from partners to include
- June 2022: Implement content creation and production plan, outline dissemination plan
- September 2022: Finalize content and prepare for dissemination
- **December 2022:** Finalize CY2023 priorities and milestones

<u>Tactical Leads:</u> South Carolina Educational Television (SCETV)

Primary Care Support Example Services

- Project ECHO/Telementoring
- Nutrition Counseling
- Diabetes Remote Patient Monitoring
- Diabetic Retinopathy Screening



Health Equity

Targeted, novel initiatives will close the gap in access to health care services for high priority health disparities

These are services whose primary intent is to reduce a health disparity and make progress toward achievement of health equity across the state. The value metric should be a measure of health disparity or related process measure. The service should plan for sustainability, though a diversity of funding sources is often required to achieve this goal.

Progress Metrics

Decrease in access to care inequities for target populations

Outcomes	Technical Infrastructure	Education and Training	Advocacy and Awareness
Establish program- based metrics that account for the scope of specific health care disparities and the progress towards mitigation	Optimize technologies that balance maximum utilization of underserved patients and cost effectiveness	Establish program- based educational materials that incorporate community engagement	Advocate for permanent removal of originating site, provider type and code limitations that are barriers to access Optimize a diversity of funding opportunities to advance the reach champion services
			Advocate for exclusion of TeleMAT from Ryan Haight Act

Supporting Tactical Goals

2021-2022 Health Equity Tactics

Service Tactic: Maintain current champion Health Equity clinical programs, and report utilization and growth occurring within this clinical strategy area

Telehealth

A L L I A N C E

- September 2021: Adapt data collection and quarterly reporting structure to reflect updated strategy format
- **December 2021:** Fully implement new data collection and quarter reporting structure

2022 Milestones:

- March 2022: Continue reporting quarterly on programs in alignment with updated strategy format
- June 2022: Continue reporting quarterly on programs in alignment with updated strategy format
- September 2022: Review data and heat maps to begin planning CY2023 milestones to meet need
- December 2022: Finalize CY2023 data-driven goals to intentionally address service gaps

Tactical Leads: SCTA clinical partners

Outcomes Tactic:

2021 Milestones:

- **September 2021**: Establish data sources to assess utilization of key health equity programs by county, beginning with pediatric and maternal behavioral health services
- **December 2021:** Obtain sample report of key health equity services utilization by county

2022 Milestones:

- March 2022: Develop heat-mapping of utilization rates
- June 2022: Formulate service gap mitigation targets and identify scope of intervention needed
- September 2022: Establish expected impact based on targeted service strategies
- **December 2022:** Review early and process data of access mitigation strategies, establish adjusted targets and data revisions for CY2023

Tactical Leads: MUSC COE, USC CRPH

Advocacy and Awareness: Develop and produce service-bucket-specific content defining the Health Equity bucket and highlighting cumulative achievements in South Carolina

2021 Milestones:

• **September 2021:** Review existing content library to identify Health Equity-specific content

• **December 2021:** Propose plan to fill any gaps with new content and/or aggregate data points.

2022 Milestones:

- March 2022: Create plan to outline next steps in content creation, obtain needed data from partners to include
- June 2022: Implement content creation and production plan, outline dissemination plan
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<u>Tactical Leads:</u> South Carolina Educational Television (SCETV)

Health Equity Example Services

- School-Based Telehealth
- Women's Reproductive Behavioral Health
- Tele-MAT
- Maternal Fetal Medicine
- Health Care for the Homeless
- Pediatric Intensive Care Telehealth
- Telehealth Resilience and Recovery Program