SCTA Quarterly Report CY24 Quarter 1

Progress Achieved on the CY2024 Strategic Plan January - March 2024



Table of Contents

CONTRIBUTER	PAGE
Executive Summary	3
SC Telehealth Alliance	4
MUSC Health	5-6
McLeod Health	7-8
Prisma Health	9-10
SC Department of Mental Health (SC DMH)	11-12
SC Area Health Education Consortium (SC AHEC)	13
SCETV	14
SC Center for Rural & Primary Healthcare (SC CRPH)	15
Palmetto Care Connections (PCC)	16





South Carolina Telehealth Alliance (SCTA)

CY2024 Q1 Report

Executive Summary

The first quarter of calendar year 2024, (January 1 – March 31) was rewarding for the South Carolina Telehealth Alliance (SCTA). As partners began working toward the outlined deliverables in the <u>CY2024 SCTA Strategic Plan</u>, they had the opportunity to reflect on their achievements from the previous year with the release of the <u>2023 SCTA Annual Report</u>. The report's theme, "Community Focused, Equity Driven", resonates with the SCTA's deeply rooted mission of improving the health of all South Carolinians through telehealth, bringing care to patients regardless of geographical location. The achievements throughout the report showcase the SCTA's determination to combat equity-related barriers in our state through telehealth.

SCTA partners celebrated a long-anticipated win during the quarter, the enactment of the SC <u>Telehealth and Telemedicine Modernization Act</u> (Act No. 120) on March 11, 2024! A dedicated <u>resource page</u> outlining the act's changes has been made publicly available on the SCTA's website.

The following report provides additional details on the above accomplishments and others from CY24Q1.

Telehealth ALLIANCE

South Carolina Telehealth Alliance (SCTA)
CY24Q1 Report

SCTA Statewide Strategy

During CY24Q1, SCTA partners began fulfilling their telehealth strategic tactics found within the CY2024 SCTA Statewide Strategic Plan. Partners continue to report on the progression of these tactics in the SCTA quarter reports, demonstrating advancement of the statewide collaborative strategy.

Sustainability and Reimbursement Advocacy

On March 11, 2024, SC Governor McMaster signed <u>The Telehealth and Telemedicine Modernization</u> <u>Act</u> (Act 120) into law. The legislation was a product of multiple years of collaboration between telehealth champions, payers, and legislators, and outlines two main objectives which were enacted upon signature:

- 1. to introduce a new definition of 'Telehealth' in statute, inclusive of non-MD health care practitioners, and
- 2. to facilitate greater access to certain controlled substances via telehealth while maintaining important safeguards through the modernization of tele-prescribing language.

A <u>resource page</u> was added to the SCTA website outlining the act's changes, including a downloadable 1-pager that can be used for public distribution.

SCTA Supported Technologies and Platforms

The <u>SCTA's premium instance of Doxy.Me</u>, a HIPAA-compliant telehealth platform, remained a free offering to SC providers. During the quarter, nearly **11,600 visits** occurred with **37 new providers** joining the instance.

Partners continued to utilize the SCTA's data collection software to record telehealth utilization and telehealth sites in the SC. This valuable tool helped paint a statewide picture of telehealth's impact in 2023 with impressive statistics showcased throughout the 2023 SCTA Annual Report including:

- **1.2 million+** overall telehealth interactions
- **760,000+** synchronous telehealth interactions
- **166,000+** asynchronous telehealth interactions
- **765+** SCTA-supported telehealth sites
- **10,900** tele-stroke consults across **25** SC counties
- 73 SCTA-support hospitals and free-standing emergency departments across 36 SC counties
- 76,750+ virtual urgent care visits
- 294,200+ remote patient monitoring interactions
- **203** schools utilizing school-based telehealth across **31** SC counties



Center for Telehealth 169 Ashley Avenue MSC 332 Charleston, SC 29425 Tel 843 792 7512

www.musc.edu

Medical University of South Carolina

Telehealth Service Updates and Progress
January – March 2024

Service Extension

MUSC's virtual specialty program continued to expand during Q1 with sleep medicine and general pulmonology added to its growing list of offered specialties. In addition to these new specialties, the program currently offers specialized care in the areas of neurology, endocrinology, hematology, and rheumatology, with primary care coming soon. The program has seen much success with patients across the state taking advantage of accessible specialty care with shorter wait times.

During Q1, MUSC's Regional Telehealth Timeshare Clinics saw significant volume growth with new services added in the areas of audiology cochlear implants, neurosurgery oncology, and pre-operative assessments. The team dedicated time during the quarter toward quality improvements, including strengthening new care team member orientations through on-site training. Folks had the opportunity during the training to enhance their telepresenter skills including their use of peripheral devices while assisting a patient during a telehealth visit, such as a digital stethoscope and high-definition camera horoscope.

Hospital Support

MUSC's hospital support team supported several initiatives during Q1 including the newly implemented virtual nursing program which offers services to support efficient patient throughput and quality metrics. In addition to serving MUSC's Catawba division hospitals (MUSC Health Lancaster Medical Center and MUSC Health Chester Medical Center), the program now serves adult units at MUSC Health University Medical Center (Charleston) and MUSC Health-Orangeburg. This program provides an extra layer of clinical care and workforce support to hospitals and has been shown to significantly enhance patient interaction.

Palliative care services offered at MUSC Health Columbia Medical Center Downtown, MUSC Health Columbia Medical Center Northeast, and MUSC Health-Orangeburg expanded to offer full-time consultations. Additionally, the program added a new service at Regency Hospital-Florence during the quarter.

MUSC Health University Medical Center (Charleston) in collaboration with tele-ICU partnering sites, MUSC Health Columbia Medical Center Downtown and MUSC Health Kershaw Medical Center, relaunched the ICU Innovations program to offer education and ICU-specific training for the clinical critical care teams on-site. Education is facilitated by the MUSC Health University Medical Center (Charleston) tele-ICU medical director with support from the MUSC Center for Telehealth team.

Convenient Care

MUSC's virtual urgent care (VUC) program expanded its reach through strategic partnerships with additional health systems and universities during Q1, resulting in a total of over 450 virtual visits. The program's primary objective remains focused on increasing utilization and enhancing access to care statewide. Notably, there has been a 24% increase in volume compared to the previous year (CY23Q1), indicating a positive trajectory.

Maintaining a steadfast commitment to health equity outreach, the program is actively engaged in community events in Williamsburg County throughout CY24. These events serve as platforms for raising awareness and providing education on the availability of virtual urgent care services to all community members.

Furthermore, efforts to improve pediatric care are underway, with a specific goal of participating in an upcoming AHRQ Safety Program targeting telehealth practices and antibiotic usage. By actively participating in such initiatives, the VUC team demonstrates its dedication to upholding high standards of care and patient safety.

Primary Care Support

The Collaborative Care Model (CoCM) program at MUSC hired two new behavioral health care managers to support its expansion project to the Pee Dee region of the state during Q1. Substantial work has gone into preparing for this expansion's go-live, expected to launch during Q2. Leveraging a behavioral health care manager who is overseen by a consulting psychiatrist, the program provides virtual behavioral health services to patients in collaboration with their primary care provider.

MUSC's outpatient teleconsultation (OT) program for nutrition saw high demand for services entering the new year as consults steadily increased. The integrated weight management (IWM) pilot program, which strengthens collaboration between primary care providers and nutritionists for improved long-term outcomes continued to see new referrals throughout the quarter. OT for psychiatry graduated one of their MUSC College of Nursing advanced practice provider (APP) fellows, and two new APPs were hired to maintain this highly-needed service for the rural areas of the state.

Health Equity

MUSC's school-based telehealth team remained focused on expansion during the quarter as they traveled to Orangeburg and Calhoun County School Districts to discuss ground-breaking partnerships during the upcoming 2024/2025 school year. These partnerships would offer district-wide access to all of MUSC's school-based telehealth services, including trauma, behavioral health, and physical health. If implemented, this will be the first time all three of MUSC's school-based telehealth services were offered to an entire school district.

MUSC's school-based telehealth behavioral health program continued to see rapid expansion during Q1 with 38 schools enrolled and a total of 500 completed visits since program implementation. The team remains prepared to accommodate the influx of requests from schools across the state who seek to adopt these services for their students.

McLeod Health The Choice for Medical Excellence

McLeod Health Telehealth Service Updates and Progress

CY24Q1 / January - March 2024

Service Extension:

During CY24Q1, the offerings of virtual specialty care continued to expand with the launch of outpatient cardiothoracic services in the McLeod Coastal Region. An Advance Practicing Provider was onboarded and will facilitate the patient visits from the originating site. In addition to this program, there continued to be ongoing assessments for additional virtual specialty care needs.

The new palliative care outpatient services program grew in demand with increased referrals from the previous quarter. This telehealth program provides patients with greater and easier access to outpatient palliative care services while remaining in their homes and helps extend coverage gaps within our rural SC counties.

Hospital Support:

The remote sitter pilot remains a central focus, introducing a new service for McLeod Regional Medical Center and integrating a new software platform into McLeod Health's telehealth offerings. The mobile telehealth devices were reconfigured and transitioned from Windows 10 to Windows 11 to align with the health system's new standard. Collaboration among clinical, technical and Epic Monitor teams persists, driving operational optimizations to elevate quality and safety. This program utilizes telehealth technology which allows healthcare professionals to remotely monitor patients in their hospital rooms from a centralized station and promptly alert clinical staff to any safety concerns.

McLeod Health's Emergency Department and inpatient psychiatry programs completed the year with an increase in demand for consultations. A new Nurse Coordinator was onboarded to manage the inpatient program and facilitate continuity for patients with the Emergency Department program. The Emergency Department partners with South Carolina Department of Mental Health to provide teleconsultations for patients.

Assessments and planning began for the expansion of inpatient pulmonology consultation services to McLeod Loris ICU.

The Children's Hospital program focused efforts on enhancements for pediatric EEG services. The program will be piloting a secure messaging platform with a goal to provide timely and seamless communication between the clinical teams for Prisma Health and McLeod Health.

The telehealth and network teams have continued collaboration for required upgrades with configurations and testing that impact connectivity for devices supporting hospital-based programs. McLeod Cheraw has been completed. McLeod Loris and Dillon will be next.

Convenient Care:

During CY24Q1, the convenient care program continued to receive an increased volume on teleconsultations as South Carolina experienced increases in influenza, COVID and RSV.

Health Equity:

In the previous quarter, the Forensic Nurse Examiner program expanded with the addition of services to McLeod Carolina Forest. This program continues to see a growing demand for services with increased referrals; not only internally, but also from surrounding healthcare facilities and law enforcement divisions. The FNE and telehealth teams have been working toward enhancements involving multiple technical complexities with the goal to scale services to McLeod Cheraw. The program provides compassionate care to patients and the patient's medical and legal photodocumentaries can be used to empower law enforcement and the domestic violence service community with a coordinated response to violent crimes in our state.

McLeod Health's school-based telehealth programs provided care to a record volume of patients (students and staff) as it continued to serve students. The team worked with the school districts to advance education for parents and staff including enhancements to websites and onsite registration opportunities. The new clinical lead for the programs, Lauren Johnson APRN MSN FNP-BC, focused efforts on training with the school nurses including EpicCare Link.



Prisma Health Telehealth Service Updates and Progress CY24Q1 January - March 2024

Service Extension

Throughout the first quarter of 2024, Prisma Health continued to expand its virtual care services. In January, ten more practices started providing remote patient monitoring (RPM) in various regions of the state. Pediatric forensics introduced five new devices with a green filter feature, improving the quality of vascular imaging. Our strategically positioned clinics throughout the state facilitate patient access to both virtual and in-person care close to their homes. Furthermore, our psychiatric group has broadened the use of virtual platforms to bring specialized care to rural clinics. Efforts to enhance our hospital-at-home program are ongoing, aimed at allowing patients to recuperate at home and minimize lengthy hospital stays.

In collaboration with our McLeod partners, we have improved the system for assigning on-call providers for pediatric needs, beginning modestly but anticipated to expand significantly. This includes the integration of our HIPAA-compliant texting platform for alerting providers and sharing medical data.

Hospital Support

We have introduced new scheduling options for Neurology, Infectious Disease, and Cardiology at our rural acute centers. A new contract has been finalized to provide acute care carts for Stroke and NICU services, including the installation of in-room equipment in CT rooms where carts are unfeasible, aimed at accelerating treatment. Additionally, more Favor virtual consult carts have been launched to offer addiction medicine throughout several rural acute systems.

We are currently focused on enhancing communication between staff and schedulers to ensure telehealth carts are prepped before appointments, optimizing the workflow to eliminate phone calls. This revised process, tested at Baptist Easley and Oconee, has increased daily consultations and will soon be introduced in Laurens. Other improvements this quarter include integrating our language services app into our Teladoc carts for effortless inclusion of translators during virtual visits. Our network team has also upgraded the entire health system's network, incorporating all digital health and Teladoc carts onto this new network.

Pediatric Services Expansion

Pediatric Supportive Care and Pediatric Nephrology have been added to the inpatient video consult list in our Greenville region. Additionally, 20 new physicians/APPs and 10 new specialties were trained and equipped with Teladoc inpatient consult carts in the Columbia region.

Eating Disorder Program

After expanding last quarter, we have successfully initiated patient care at remote sites this quarter without any reported issues.

Convenient Care

Prisma Health's focus on convenient care centers on growing the remote patient care platform and enhancing our coordinated care at home. Our objective is to double the patient population utilizing the remote patient monitoring program. Additionally, we have selected a vendor to start a remote monitoring and educational program for high-risk pregnancies, to be conducted virtually via patients' phones.

The chatbot program has outlined self-enrollment versus provider enrollment for pediatric teenagers needing wellness support and potential psychiatric services. For diabetes management, our coordinators presented a poster about the chatbot's impact at recent conferences and are considering a self-enrollment chat program, currently under discussion.

Primary Care Support

In Primary Care, we continue to upgrade equipment, replacing headsets to ensure providers can conduct successful virtual visits. With a decline in virtual care use among primary practices, we are collaborating with leadership to identify ideal virtual visits and develop KPIs to promote system usage.

A significant focus has also been on re-educating front desk staff and office managers to ensure they are comfortable with our virtual offerings and can assist patients effectively. Education about billing laws, particularly the recently passed "Telehealth and Telemedicine Modernization Act," is ongoing and will continue into the next quarter to ensure comprehensive understanding and compliance across our system.

Health Equity

Virtual Health is crucial for ensuring state-wide access, particularly in previously underserved areas. We are collaborating with network partners to identify new opportunities for expanding access through state mapping. Our new Medical Director for the Center for Pediatric Medicine is promoting the distribution of Tyto home kits to families, enabling more comprehensive virtual visits at home, especially for monitoring various pulmonary conditions.

Moreover, we have introduced more visit options at our urgent care facilities and established a virtual hub at our new pediatric walk-in clinic to facilitate specialty consultations without the need for travel to the city. Based on this clinic's success, we plan to establish more such facilities throughout the state.



MENTAL HEALTH COMMISSION:

Elliott E. Levy, MD, Chair Carl E. Jones, Ph.D., Vice Chair L. Gregory Pearce, Jr. Bobby H. Mann, Jr. Crystal A. Smith Maxwell, MD 2414 Bull Street P.O. Box 485 Columbia, SC 29202 Information: (803) 898-8581

> Robert Bank, MD Acting State Director

South Carolina Department of Mental Health Telehealth Service Updates and Progress Q1, April 2024

Service Extension

DMH's Community Telepsychiatry program helps increase access to mental healthcare by providing telepsychiatry services through 60 Mental Health Centers and satellite clinics statewide. DMH has helped patients in the state access specialized mental health care services, including child and adolescent psychiatry, since 2013.

In the first quarter, over 17,000 services, which is approximately 41% of overall mental health services provided by MDs and APRNs, were telepsychiatry. DMH's Community Telepsychiatry program serves patients in a wide variety of settings from Mental Health Centers and satellite clinics to schools and RV mobile clinics.

Hospital Support

DMH's Emergency Department (ED) Telepsychiatry program expanded to 28 hospital partners across the state and is in the process of adding new partners. In Q1 of calendar year 2024, the ED Telepsychiatry program provided approximately 1,794 completed consults for patients in EDs statewide. Psychiatric care is available through the ED program 17 hours per day, 364 days per year.

Primary Care Support

DMH's Integrated Care team has continued progress on the HRSA grant (American Rescue Plan Act – Pediatric Mental Health Care Access New Area Expansion) to develop the state's first child psychiatry access network to support the provision of mental health care by primary care providers. The network was named the Youth Access to Psychiatry Program (YAP-P). The goal is to provide a continuum of supports to SC primary care providers who see children and youth ages 0-21 years. YAP-P provides resources to practices and providers in Barnwell County in conjunction with the Aiken-Barnwell Mental Health Center.

Funding began in the fall of 2021 for the 5-year grant. YAP-P also received a \$300,000 expansion award in the fall of 2022 from HRSA to look at expanding the network to include school-based health centers (SBHCs).

Health Equity

DMH's partnership continues with the SC Department of Juvenile Justice (DJJ) to provide child telepsychiatry services to DJJ minors with mental health concerns in secure facilities. This partnership helps address the mental health needs of children involved with the juvenile justice system. To facilitate evaluation and treatment, an APRN supports the remote DMH child and adolescent psychiatrist.

In addition, DMH launched an interagency consultation service with the SC Department of Social Services (DSS) and DJJ to furnish telepsychiatry to at risk children and adolescents. Children referred by DJJ for this program are not located in secure facilities. This innovative collaboration among state agencies promotes cooperative working relationships to make the best use of state resources for a high needs population.



South Carolina AHEC Program Office

Medical University of South Carolina 1 South Park Circle Suite 203 Charleston, SC 29407

April 26, 2024

The SC Area Health Education Consortium has focused on ensuring up-to-date telehealth education resources are available on-demand for all health professionals and future health professionals in South Carolina. SCTA funding has helped to support SC AHEC's Office for Telehealth Education in developing and supporting online telehealth courses. SC AHEC developed programming available for free for health professionals and students in South Carolina via the SC AHEC online learning portal.

The educational programs listed below support the Supporting Tactical Goal, Education and Training within the CY2024 SCTA Statewide Strategic Plan.

SC AHEC Course Registrations and Course Completers (Date range 1/1/2024-3/31/2024)

- 1. <u>Telehealth</u> for High School and College Students 4 Registrations, **1 Completer**
- 2. Telehealth Presenter Certification 12 Registrations, 39 Completers
- 3. <u>Telemental Health</u> 12 Registrations, **33 Completers**
- 4. Foundations of Telehealth 6 Registrations, **36 Completers**
- 5. Telehealth Implementation 10 Registrations, **31 Completers**
- 6. Interprofessional Team Case Conference (ITCC) 8 Registrations, **32 Completers**

172 Individuals Successful Competed a telehealth module during January-March 2024.

1041 GEORGE ROGERS BOULEVARD COLUMBIA, SOUTH CAROLINA 29201



April 23, 2024

South Carolina ETV Calendar Year 2024 Quarter 1 Report South Carolina Telehealth Alliance

The new year is off to a productive start for the *SCETV Telehealth* Team with multiple stories in production that highlight the innovative, life-changing telehealth programs offered in South Carolina. Two videos currently in production include an overview of the Tele-ICU Innovations program at the Medical University of South Carolina and an inside look at the role of telehealth in CareSouth Carolina's Medication Assisted Treatment Program.

In the first quarter of 2024 two new videos were published. The first video features the inspiring story of a 98-year-old woman from Eastover who is the oldest participant yet in the Palmetto Care Connections Digital Inclusion Program. Her interview reveals valuable insight into how digital training benefits seniors in South Carolina. The second video showcases the innovative Tele-ICU at the MUSC. Footage captured at Kershaw Medical Center in Camden demonstrates how the Tele-ICU connects to partner hospitals throughout the state as a doctor provides an in-depth overview of the Tele-ICU.

In addition, the *SCETV Telehealth* Team supported the SCTA's creation of the 2023 Annual Report by providing images and data that document the success and growth of telehealth in 2023.

List of Telehealth features:

Video:

- The Lasting Impact of Digital Literacy Training for Seniors
- Learn how the Tele-ICU at MUSC supports patients at rural hospitals

This content is shared via television, email newsletters, multiple websites, and social media platforms.

Social Media spotlight: The South Carolina Telehealth Alliance Facebook page content interactions were up, and page visits were up 44 percent compared to the previous quarter. There were 11 new page follows as well. The top performing post was the video spotlight of the 2023 Telehealth State Champion, Dr. Kathryn King. The post had the highest reach and engagement. On Twitter, the SCTA page posts earned 868 impressions in this quarter.

In Your Inbox: The SCTA's monthly newsletter held an average open rate of 37% for Q1, which is above the typical audience average. The click rate was 2.6% which is down from Q4.

CENTER FOR RURAL AND PRIMARY HEALTHCARE

from Evidence to Impact

SCTA CY24 Q1 Report
SC Center for Rural and Primary Healthcare

Telehealth Hubs

Orangeburg County Public Library

Orangeburg County Public Library, CRPH, and PCC are meeting on April 29, 2024, to complete the site assessment and move forward with the telehealth equipment installation at the library.

Telehealth in Libraries Implementation Workbook

The Connecting Communities team is building on the telehealth in libraries pre-implementation guidebook created by the Indiana Rural Health Association, by developing a comprehensive playbook on implementation of telehealth in libraries.

Palmetto Care Connections Telehealth Navigators

Through the Connecting Communities fall funding opportunity, we have partnered with PCC to train two telehealth coordinators to serve patrons at the Nichols Public Library and Mullins Public Library, in Marion County, as well as clients at 18 offices on aging in Cherokee, Chesterfield, Marlboro, Dillon, Marion, Georgetown, Williamsburg, Sumter, Lee, Orangeburg, Hampton, McCormick, Greenwood and Oconee counties. One of the two navigator positions has been filled and the newly hired navigator has been successfully onboarded and is completing necessary training and certifications to include the telepresenter certification, billing bootcamp, and competencies in telehealth equipment usage. Since the navigator has been hired, the team has been able to train 12 staff members at 6 sites on the newly installed and/or updated telehealth equipment at each site and how the use of telehealth services.

Project ECHO

Project ECHO SC Pregnancy Wellness curriculum is data driven, state centered, flexible and responsive to emergent healthcare challenges. Didactic topics presented by experts in the field of obstetrics focus on cutting edge, evidence-based practices. Input and feedback from specialists located in our state academic medical centers, rural and urban community providers and state agencies are key factors employed in the design of topics covered. ECHO utilizes a collaborative model to efficiently apply expertise and resources that will address maternal mortality across the state. Below is the total number of participants for each month in the first quarter.

January	84
March	54
March	125

Telehealth and Primary Health Workgroup

The Center continues to partner with PCC to lead the SCTA Primary Care and Rural Health Workgroup in exploring the learning needs and resources necessary to support the growth and optimization of telehealth by primary care and rural practices. The Workgroup comprises multiple stakeholders: SCORH, SCPHA, SC AHEC, Prisma, SC CRPH, SCTA, Clemson Rural Health, and Tandem.



Telehealth

PCC partnered with the South Carolina Department on Aging to implement telehealth capabilities into 18 rural offices on aging. PCC staff conducted on-site assessments to determine telehealth readiness and to date, 8 telehealth carts, enabled with peripherals, have been installed. PCC staff is currently working with each of the 8 locations to conduct a survey of its seniors so that we can determine existing primary and specialty providers in each county/community. PCC staff will then reach out to the health care providers to determine their telehealth capabilities.

PCC was awarded a Connecting Communities Grant from the SC Center for Rural & Primary Healthcare to fund 2 Telehealth Coordinators. These Coordinators will serve as Tele-Presenters and provide training and education to the Virtual Telehealth Access Centers located in rural communities across South Carolina.

Education

PCC partnered with the SC Telehealth Alliance (SCTA) to host a webinar on Billing/Coding for school based telehealth services.

PCC hosted a webinar to share digital literacy tips with healthcare providers so they better assist their patients with navigating a virtual visit.

PCC precepted a Graduate Assistant with the University of South Carolina's MHA program as he developed a Provider's Telehealth Billing & Coding Toolkit that will be available to all providers in South Carolina. This Toolkit was created to help providers navigate through the multitude of changing reimbursement policies since the pandemic.

Digital Inclusion

PCC provided digital literacy training and a digital device equipped with cellular service to 60 residents in Hampton County through a Comcast grant awarded by a national non profit named Rural LISC.

PCC began working with SCDHHS to identify Medicaid beneficiaries who might benefit from digital literacy education and assistance with a device and service. 7,500 letters were sent out to a specific population within Medicaid and over 1,500 of those targeted were screened for participation. The first of many training classes for this project was held in March in Richland County.

PCC has completed 5 online modules that will be used in the Palmetto Connect Digital Inclusion Program.

PCC hired a Digital Navigator to assist patients in subscribing to internet services and helping them find resources so they can afford it.