



Telehealth Deep Dive Toolkit:

Polishing the Schedule: Telehealth Considerations

What is included in this toolkit:

- Introduction: Polishing the Schedule
- How to Polish the Schedule?
- Innovative Opportunities
- Appointment Conversion Sample Script

Introduction:

In order to provide a patient centered approach to scheduling, health centers should offer patients the soonest available appointment in way that this meaningful for the care team and patient. In order to do this, health centers should learn to polish the schedule to confirm the most appropriate delivery method for patient care.

There are several methods by which care can be delivered:

- Face-2-Face – Traditional visit where the clinician sees the patient physically in person.
- Video Visit - Clinician connects directly with the patient via video or telehealth platform to conduct the equivalent of an in-person visit.
- Telephone Call - Clinician connects directly with the patient via telephone.
- Secure Messaging - Clinician connects with the patient via patient portal, secure email, or telehealth platform to provide clinical advice or support.
- Remote Patient Monitoring - Clinician monitors patient vitals and other information via electronic communication technologies in near real time.

When looking at the schedule it is important to look at whether the patient wants the appointment, needs to have the appointment in a certain method or way, and

what method the patient is most likely to keep. Telehealth appointments have been shown to significantly reduce no-shows, improve longitudinal care, and improve chronic disease management.

How To:

1. Anyone (provider, medical assistant, nurse, front desk, call center, even as a team during huddles) can complete this process. It is important that the individual(s) are empowered by the team and have the accountability and have the authority to make the delivery method change.
2. Print a copy of the scheduling template or open the schedule on your computer.
3. Preferably 1-2 days before the scheduled appointment look for situations within the schedule to ensure that the correct appointment method is selected (ie. video visit, telephone or face-2-face visit).
 - a. Should the appointment method be changed?
 - b. What would be the patient's preference?
 - c. Is there an ideal delivery method?
4. The following situations are potentially ideal for telehealth visits instead of face-2-face:
 - a. Healthy Patients
 - i. Infectious diseases to reduce transmission
 - ii. Ad hoc, low risk concerns
 - iii. Pre- and post – operative procedure checks
 - b. Patients with Chronic Conditions
 - i. Quick check-ins between visits for continuity
 - ii. Rapid follow-ups after tests and labs
 - iii. Medication management
 - iv. Remote patient monitoring
 - v. Self-management groups and other supports
 - c. Children
 - i. Common low-risk conditions that can easily be evaluated remotely (e.g., rashes, pinkeye)
 - ii. Improve care environment for children with special needs
 - iii. Limit time away from school
 - d. Pregnant Women
 - i. Routine checks for uncomplicated pregnancies

- ii. Remote patient monitoring for blood pressure and blood sugar
- e. Geriatric Patients
 - i. Avoid travel for frail patients
 - ii. Improve care for patients with dementia
 - iii. Include family and care givers in visits
- f. Behavioral Health
 - i. Routine monitoring of common medications for anxiety, depression, and ADHD
 - ii. Conduct psychotherapy online
 - iii. Improve integration between behavioral health and family practitioners
- g. Other Considerations
 - i. Chronic offenders – these are patients who repeatedly schedule appointments and then don't show.
 - ii. Unnecessary follow up appointments. Consider the necessity of the appointment.
 - iii. Consider the purpose of the visit. Medication refills or blood pressure checks, resolution of symptoms.
 - iv. Does this patient live far away?
 - v. Does this patient have a disability impacting travel or ability to self-assess?
 - vi. Are there risks to this patient associated with travel or exposure to infectious disease at the clinic?
 - vii. Does this patient have the necessary technology to support a telehealth visit?
 - viii. Is the patient comfortable with the technology?
 - ix. Does this condition require diagnostic testing or other labs? If so, could these needs have been met before or after a telehealth encounter?
 - x. Is there potential for a strong emotional reaction (e.g., diagnosis of cancer, sexually transmitted infection, or a poor/lower than expected prognosis) where speed to report was less important than being present in person?

Innovative Solutions:

- Video Visit - Clinician connects directly with the patient via video to conduct the equivalent of an in-person visit
 - Group visits in which several patients meet together with a provider and/or the care team can be conducted. Group visits are an effective method not only for reducing demand but also for providing increased continuity of care and a supportive social network for patients. In a group visit, the physician might meet briefly with the group, but the patient receives all the services of a traditional visit by utilizing other members of the care team.
- Telephone Call - Clinician connects directly with the patient via telephone
 - Physicians can conduct telephone consults with patients. These consults can be pre-scheduled or planned at the end or beginning of each day to follow up on concerning patients several days later.
 - **Be sure to check your state and payor reimbursement for telephone vs. video visits. If telephone visits do not reimburse as much, you may want to limit the number of these visits per day.
- Secure Messaging - Clinician connects with the patient via patient portal, secure email, or telehealth platform to provide clinical advice or support
 - Create an alternative way for patients to refill medications (e.g., pharmacy clinic) or receive lab results (e.g., nurse calls patients with results).
 - Nurses can staff chat advice lines.
 - Manage patients with chronic conditions such as diabetes, chronic obstructive pulmonary disease (COPD), and congestive heart failure (CHF).
- Remote Patient Monitoring - Clinician monitors patient vitals and other information via electronic communication technologies in near real time
 - Manage patients with chronic conditions such as diabetes, chronic obstructive pulmonary disease (COPD), and congestive heart failure (CHF).

Appointment Conversion Sample Script:

- Good afternoon, my name is _____. I'm calling from _____ Health Center; may I please speak with Mr./Ms. _____.
- Hello Mr./Ms. _____, I am calling in regard to your appointment scheduled on [DATE] at [TIME] with Dr. _____. We are very excited to see you and met earlier to discuss your care. The doctor would like to see you if you are interested in a telehealth appointment. Receiving your care via telehealth may be beneficial for you because your doctor can perform the same service as you would receive during an in-person visit and save you the time typically required to come into our office. Telehealth is completely voluntary, and you can be scheduled for an in-person visit instead.
- Would you like to schedule a telehealth appointment now?
 - **If Yes:**
 - Let's see if you can participate in a telehealth visit:
 - Do you have a device, such as a smartphone, tablet, or computer that has a camera and microphone that you can use for this visit?
 - Where would you plan to have this appointment with the doctor? Do you have a space that is private and free of distractions? Is there internet access in the space?
 - If you would like, we can schedule a pre-visit consultation for a staff person to walk you through the technology and what to expect during the visit. Would you be interested in this service?
 - Payment for a telehealth visit is the same as for an in-person visit. A bill for this service will be generated and submitted for payment by your health insurance carrier. As with in-person health care visits, you will be responsible for any deductibles and/or copays required by your insurance plan.
 - We use HIPAA-compliant technology for the telehealth visit, and we will hold this appointment in a way that protects your privacy and confidentiality. Before the telehealth visit, we will ask for your consent to receive this service via telehealth.
 - Please be aware that we may need to schedule an additional appointment if clinically necessary, or if a technical problem occurs.
 - Thank you and have a great day! Please call us if you have questions or concerns.
 - **If No:**
 - Thank you very much for your time.
 - Verify demographics. What is a second phone number for you that if we need to get hold of you and can't reach you? email address? correct address?

- Please call us if you are unable to make this appointment or have any issues. You can call us at xxx.xxx.xxxx. Please let us know in advance of your appointment time if possible.
- We look forward to seeing you for a **Face-2-Face visit** on [DATE] at [TIME] with Dr. _____.
- Thank you and have a great day! Please call us if you have questions or concerns.