Today’s Presentation

- What is telehealth and why does it matter?
- Laws that pertain to telemedicine in veterinary practice, and policy guidance from the AVMA
- Learnings from the use of telehealth to support human healthcare

Today’s Presentation

- Boots-on-the-ground. What we’ve learned about using videoconferencing to improve access to care in an underserved population.

AVMA Resources

- Case Studies
- Collaboration

What is Telehealth?

- Teleconsulting services (e.g., poison control, radiology, cardiology)
- After-hours triage service for veterinary practices
- App connecting animal owner to a veterinarian
- Smart dog collar
3 Main Categories of Telemedicine

1. Real-time interactive (synchronous, video or audio conferencing)
   • Client/patient-primary care veterinarian
   • Primary care veterinarian-specialist
   • Patient/client-primary care veterinarian-specialist

2. Store-and-forward (asynchronous)
   • Acquire data and transmit to primary care veterinarian or specialist
   • Radiology, dermatology, pathology

3. Remote monitoring
   • Collect data, using simple-to-use devices
   • Activity monitors; blood, urine samples/tests

Commonly used in combination to support complete patient care.

Opportunities: Access to Care

• Large segments of population not served by anyone (for-profits, not-for-profits); a significant care and economic opportunity
• Limiting factor is access
  – Veterinary deserts (inner city, rural)
  – Economic resources
  – Transportation, physical limitations
  – Cultural and language
• Opportunity to create service models that meet a variety of needs
  – Primary care veterinarian/specialty hospitals
  – Allied professional or translation support
  – Petco/PetCoach
  – Vetsource/TeleVet

Opportunities: Disaster Response

Banfield used a text service in the aftermath of Hurricanes Harvey and Irma to connect pet owners directly with a veterinarian
• Secure vaccination records to enable access to a shelter
• Answer health questions
• Handle postsurgical questions when a client couldn’t get to the hospital for a follow-up appointment

Opportunities: Remote Monitoring

• Surgical rechecks
• Management of chronic diseases or conditions
  – Obesity
  – Diabetes
  – Allergies, skin conditions
• Behavioral issues
• Earlier identification of important changes
• More timely care adjustments
• Improved client compliance

Telehealth is Connected Care

Veterinary Care Must Meet Legal Requirements

• State Veterinary Practice Acts
  – How a veterinarian-client-patient relationship (VCPR) may be established and maintained
  – Same standard of care pertains
• Federal VCPR definition
  – Extralabel drug use
  – Veterinary Feed Directives (VFD)
  – Veterinarian-produced biologics
Telehealth and the Law: Federal Requirements for a VCPR

- Apply to extralabel drug use, VFD, veterinarian-produced biologics
- Require that veterinarian has/is...
  - Assumed responsibility for medical judgments of the health of the animal(s) and need for treatment, and the client (the owner of the animal or animals or other caretaker) has agreed to follow instructions;
  - Sufficient knowledge of the animal(s) to initiate a general or preliminary diagnosis of the medical condition;
  - Readily available for follow up in case of adverse reactions or failure of the regimen of therapy.
- State that...
  - Such a relationship can exist only when the veterinarian has recently seen and is personally acquainted with the keeping and care of the animal(s) by virtue of examination of the animal(s), and/or by medically appropriate and timely visits to the premises where the animal(s) are kept.
- Failure to follow violates federal law and risks disciplinary actions and malpractice liability

Telehealth and the Law: Federal
Physical Examination Required? FDA CVM Opinion

“...for purposes of the federal definition, a VCPR cannot be established solely through telemedicine (e.g., photos, videos, or other electronic means that do not involve examination of the animal(s) or timely visits to the premises).”

“...nothing would prohibit the use of telemedicine... to allow the veterinarian to keep informed and be able to make medical judgments regarding the health of the animal(s) and the need for medical treatment between periodic examination of the animal(s) and/or timely visits to the premises where the animal(s) are being kept.”

Reply to Questions from AVMA April 6, 2017

Telehealth and the Law: States

- Variable and in flux. Interest in modifying requirements for VCPR to support telehealth.
- Telemedicine regulations should be harmonized across the U.S.

AVMA Policy and Guidance

- Two years of intensive study and input from members and stakeholders (2015-17)
- AVMA House of Delegates adopted policy on July 21, 2017
- Goal to support client access and convenience, but ensure continued provision of high-quality veterinary care
- Recognition that policy will evolve and be informed by evidence-based research on the impact of telemedicine on access to care and patient safety.
AVMA Policy (July 2017): Key Points

• Telemedicine should only be conducted within an existing VCPR, except advice given in an emergency until patient can be seen by a veterinarian (PVME, federal and state law)
• Without a VCPR, any advice provided through electronic means should be general and not specific to a patient, diagnosis, or treatment.
• Except for emergency teletriage, including poison control services, AVMA opposes remote consulting offered directly to the public when the intent is to diagnose or treat in the absence of a VCPR

AVMA Policy (July 2017): Key Points

• Veterinarian with the VCPR has professional discretion to confer with specialists or other consultants
  • Specialist/consultant should not be required to hold an active license in the state in which the veterinarian with the VCPR practices or within which the patient or client resides
• Telehealth provider must be legally authorized to practice veterinary medicine

AVMA Policy (July 2017): Key Points

• Credentials of all advice givers, as well as service disclaimers, should be unambiguous and prominently displayed
• Legal accountability, liability and responsibility should be in both the state where patient is located and state in which veterinarian providing services is located
• Full policy available at https://www.avma.org/KB/Policies/Pages/Telemedicine.aspx

Learnings from Human Healthcare

WHY SOUGHT
• Want to improve patient outcomes
• Provide remote or rural patients with access to physicians and specialists
• Increase patient engagement
• Reduce unnecessary emergency department visits

March 2018 US Telemedicine Industry Benchmark Survey, REACHHealth

OUTCOMES
• Patient acceptance continues to be one of the least challenging components
• Top two primary contributors to ROI
  • Improved patient satisfaction
  • Patient retention
• All care settings showed continued growth
• Reimbursement (government and private) continues to create significant obstacle to success

Human Healthcare Successes

Congestive heart failure—3,000 patients used at-home monitors to send weight, blood pressure, etc. to central facility.
  • 3 to 4 nurses for 250 patients
  • Readmissions reduced by 44%
  • Cost savings of > $10 million

Wireless pill bottle providing reminder to take blood pressure medication—increased adherence by 68%.

Tele-ICU—Remote care by trained intensivists.
  • 20% mortality decrease
  • 30% reduction in length of stay

Possible approach to white coat syndrome—patients more willing to seek care.
Some Human Healthcare Challenges

- High costs of technology, data management, and technical training
- Reduced human interaction between physicians and patients (short visits already a concern for patients)
- Absence of a complete physical exam may increase risk of errors
- Time efficiencies may be reduced due to difficulties in assessing and treating patients remotely (e.g., teledermatology consults take 30 minutes versus 15 minutes for traditional visit)
- Data quality (poor images, incomplete reports, security)
- Monetization

The Case for Telehealth

AVMA Resources for Veterinarians

Provide members and other veterinarians with practical tools they can use to understand, evaluate, and implement telehealth in their practice.

Education and Resources

- Telehealth Resource Center
- AVMA Convention
  - Vet Clinic Live!
  - Friday Meet-the-Experts Event
  - Sunday Hot Topic
- AAHA/AVMA Telehealth Booklet
- Lead & Learn Webinars
- Virtual Care – stay tuned!
  - Providers list
  - Pet insurance
  - More case studies

Telehealth Resource Center

Toolkit Launched @ AVMA Convention

avma.org/telehealth

Includes

- Definitions, policy, Q&A
- Steps to build telehealth into your practice
- Service model descriptions
- Equipment resources
- Case studies (multi-species)
- Monetization guidance

Case 1: Coastal Animal Hospital

Expanding Access to Care

Challenge: Low compliance
Solution: Third-party service for postsurgical and hospice care video consults
Results: Increased adherence and client satisfaction.

“Telemedicine is a pathway to make it easier for clients to adhere to their medical care instructions while allowing the clients to better manage their time. Our use of telemedicine allows us to meet high consumer expectations while enabling the healthcare team to provide patients and clients the highest level of care.”

— Dr. Brian Evans, founder, Coastal Animal Hospital
Case 2: Butterball - Telehealth and Turkeys
Improving Quality and Efficiency of Care

Challenges
• Widely scattered farms, potential delays in addressing concerns for flocks
• Non-veterinary decision making
• Time spent traveling vs caring for patients.

Solution
• Electronic monitoring of flock
• Constant information streams
• Video consults
• Remote triage and primary diagnosis
• Electronic prescriptions

Results
• Better quality of care
• Increase efficiency
• Improved communication
• Increase veterinary quality of life

Case 3: University Veterinary Specialists
Specialty Care Without Extended Wait Times

Challenge: Monthly delays in scheduling oncology appointments causing patient suffering and client distress.

Solution: Virtual consultations with oncologist, sharing medical records prior to video consults.

Results: Increased availability and shorter wait times for new consultations and recheck appointments.
• Better patient care
• Less anxiety and distress for clients

Case 4: King Veterinary Services
A Photo is Worth 1000 Miles

Challenge: Clients scattered across a large geographic area. Mobile livestock practitioner, Dr. Henderson King, sought a way to better assess and prioritize cases and reduce dx and tx delays caused by long drive times.

Solution: Farm calls are triaged by supplementing with photos and videos. Stored in the cloud for easy access and insertion into EMR.

Results: Improve care, stronger client relationships, and better time management.

Case 5: Crown 3 Veterinary Services
Keeping Communication on Track: How mobile phone videos improve compliance and patient care

Challenge: Communicating diagnostic and treatment recommendations for equine patients consistently to multiple stakeholders

Solution: To ensure that diagnostics, comments, and treatment recommendations are properly communicated to all those involved in the care of a patient, the veterinarian records and sends a short video right after the consultation, featuring the key points and important messages to convey.

Results: Improved compliance and time saving.

Collaboration
• Veterinary Telehealth Coalition
• American Telemedicine Association
• American Academy of Pediatrics
• Telehealth Booklet with AAHA
• Telehealth Solution Providers

AVMA-AAVMC-AAVSB Agreed Statement
Telehealth can provide valuable tools to augment the delivery and availability of high quality veterinary care... Veterinarians need to utilize emerging technologies to enhance accessibility and client communication, while promoting the responsible provision of high-quality veterinary medical care...[we] are committed to continue [our] collaboration with a wide variety of stakeholders to promote access to the convenience and benefits of telehealth, while providing information to the veterinary community about the development of applications and other technologies that help connect veterinarians with clients.

November 2017
Serving the Underserved: A Pilot

Boot on the Ground: Reaching UP Pilot

- Spay/neuter and targeted preventive care services for underserved populations; currently on a pueblo in New Mexico
- Reported complications referred to veterinary clinic in Albuquerque
- Clients are 45-60 minutes away with unreliable access to transportation
- No veterinary professional on-site to triage
- Telehealth pilot with goal to increase access to care

Reaching UP Telehealth Pilot
Putting it into Practice

- Recheck appointments via videoconference, basic software and common equipment
  - Scheduled 7-10 days postop
  - As needed during first week if complications suspected
- Existing VCPR with surgeon
- Rechecks located at police station or patient’s home

What We Learned
Importance of value for population served and productive use of veterinarian’s time.

- Approach to service must meet needs of population
- Most valuable as teletriage for this population
- Build confidence through demonstrated value

What can confidently be assessed during a remote video visit:
- Wound healing
- Gingiva/CRT
- Patient attitude and behavior

Questions?

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THANK YOU