



Telehealth in Skilled Nursing Facilities (SNFs)

A Guide for MGPS Providers in Non-Trinity Health
Skilled Nursing Facilities

Introduction/Overview

As a result of the COVID-19 public health emergency, the Centers for Medicare & Medicaid Services (CMS) broadened access to Medicare telehealth services. CMS expanded the telehealth benefit on a temporary and emergency basis as part of the broader effort to ensure all Americans, particularly those at high-risk of complications from the virus that causes COVID-19 have accessible benefits that can help keep them healthy while helping to maintain the community spread of the virus.

Trinity Health Senior Communities (THSC) were included in the initial round of telehealth program development and acquired the necessary equipment and applications to provide the needed access within Trinity. Because Trinity health providers are responsible for the care of patients in skilled nursing facilities (SNFs) beyond the scope of THSC and because COVID-19 continues to cause a large percentage of deaths in long term care facilities, a pilot focused on utilization of telehealth by Trinity Health (TH) providers in non-TH SNFs was completed.

The lessons learned during the pilot were used to develop the structure below for local implementation of this work with Trinity Health providers who provide SNF medical management in Non-TH SNFs.

Goals

Implementation of this SNF telehealth model for TH providers in Non-TH SNFs will serve to:

- Minimize exposure for vulnerable patients and ensure patients at high-risk of COVID-19 complications have access to needed benefits while staying in a SNF
- Conserve critical personal protective equipment (PPE) and testing supplies
- Minimize exposure for providers and staff, especially in areas with high community spread

Challenges

In order to assist the reader in avoiding some of the initial challenges faced during the course of the pilot, a summary of challenges to the pilot that were faced are outlined below.

- There was a prolonged delay getting the pilot underway due in large part to the challenge of locating SNF providers who were willing to engage. Most providers were interested but hesitant to implement this technology due to their patients' complex clinical presentation in the SNF as well as concern over the impact to their work productivity.
- Implementing technology and processes of this work was somewhat difficult to manage in Non-TH SNFs. Functions as straightforward as keeping devices charged and ready required focused work to implement.
- The SNFs at times struggled to support the virtual visit due to staffing issues.
- While technology seemed simple, the providers struggled more than expected to initiate a visit.
- Finally, patients with a medical history of moderate dementia and/or combined hearing and visual deficits can be difficult to assess virtually.

Critical Success Factors

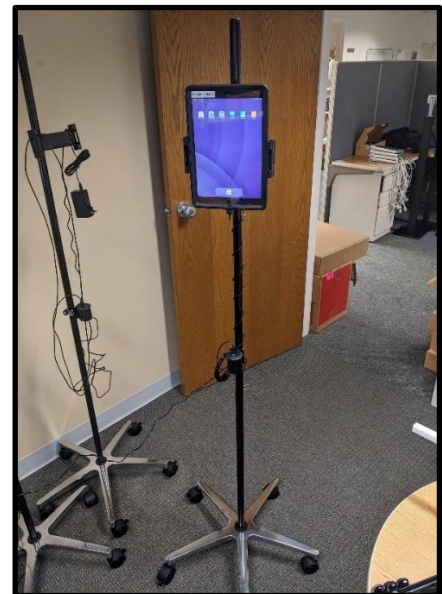
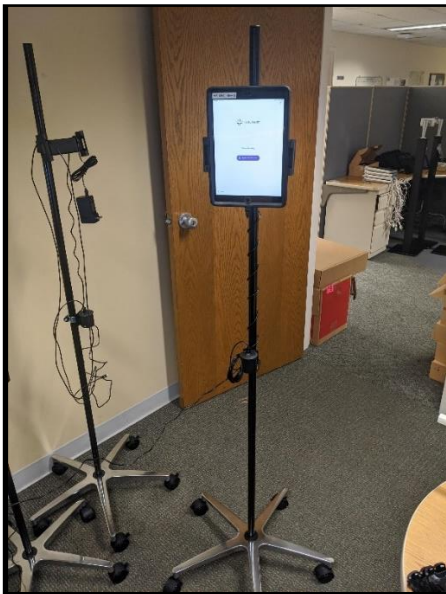
The following characteristics are the essential elements necessary to ensure successful implementation:

- Engaged TH SNF providers who provide SNF Medical Management services in Non-TH SNFs
- Engaged SNF who demonstrates interest in this virtual model
- Critical mass of census (recommend provider have an Average Daily Census (ADC) of 10)
- Facility champion with at least entry level technical/device knowledge and willingness to coordinate this work on behalf of the SNF
- Structured local operational & technical support for providers and SNF/s

Resource Requirements

Expense Type	Estimated Cost
Hardware – iPad + case	\$365
Bluetooth Speakers	\$100
iPad Poles	\$235
1-time Build/Implementation Cost	\$100
Monthly Recurring Data Expense	\$10 cellular (optional)
Monthly Recurring Support Expense	\$25 per iPad (*labor support costs exclude travel and mileage)

Photos of iPad & Poles



Key Implementation Steps

A detailed draft project plan is provided in the attachments. Below is a high-level overview of the steps needed for a TH provider to begin virtual visits in a Non-TH facility.

- Identify project team leads (Region/Hospital Lead, IT, Provider, SNF, etc.)
- Finalize budget and source of funds
- Coordinate provider participation in pilot
- Verify provider virtual system readiness (Camera, Teams access, etc.)
- Coordinate SNF participation
- Assess SNF cellular/wireless coverage
- Finalize device needs and procure
- Complete training
- Deploy iPads/SNF
- Go Virtual

TH COVID-19 Guidance Links

[Clinician Virtual Rounding Job Aid](#) (10/7/20)

[Patient Facing Job Aid: Accepting Telehealth Calls](#) (6/24/20)

[Virtual Rounding Using a Personal Device](#) (5/7/20)

[Expanded Medicare Telehealth Coverage Guidance](#) (3/18/20)

[Covered Telehealth Services for PHE for the COVID-19 Pandemic](#) (5/6/20)

[CMS Billing Guidance Under Waivers, MLN Article SE20011](#) (9/28/20)

Appendix

Lessons Learned
Project Plan Template
Chain of Custody Form
SNF Tip Sheet

Appendix

Lessons Learned

Category	Observation	Impact	Recommendation
Technical Readiness	iPads weren't charged.	iPads didn't work during the first week of Go Live.	Need better knowledge transfer for process to charge devices + by whom (SNF Nurses). Ensure a process for charging iPads so they are ready for use (Facilities champion)
Technical Readiness	TH iPad were removed and SKLD Whitehall SNF was using poles for other uses	iPads were unavailable for use on VR visits.	Ensure SNFs are properly briefed on proper handling of iPads and supporting equipment and their expectations for supporting VR implementation.
Technical Readiness	Cellular reception challenges discovered at Oceana.	Connection quality was poor or non-existent. iPad had to be converted to WIFI connectivity	Implement a site-readiness checklist for cellular/wireless coverage. Confirm connectivity quality between provider and SNF prior to Go Live.
Site Readiness	No locally identified 'champion' to coordinate with on SNF issues.	Complicated the process of discovering and resolving SNF issues.	Identify a site Champion accountable for each SNF involved in the implementation. That champion also identifies key contacts for other project team members to interact with regarding SNF readiness.
People	No 'champion' identified to coordinate with on provider issues.	Complicated the process of discovering and resolving provider issues.	Identify a provider Champion accountable to support providers in successful use of the technology. That Champion also identifies key contacts for other project team members to

Category	Observation	Impact	Recommendation
			interact with regarding provider readiness.
Discovery & Design	Patients who are hard of hearing cannot hear the iPad even with volume at max	Difficulty communicating between patient and provider.	Add accessory speakers to iPad pole.
Discovery & Design	iPads utilized off the pole cause difficulty tracking for provider due to instability of camera.	Provider has difficulty seeing with iPad due to unstable base for camera.	Deploy iPads to SNFs using the poles.

Project Plan Template

Project Task List Detail	Estimated Duration
Identify Project Team members	1 day
Finalize budget and source of funds to pay for monthly service fees and devices	1 day
Schedule regular project team meetings	1 day
Review & update job aids for SNFs	0 days
Review & update job aids for Providers	0 days
Coordinate provider(s) participation in project	32 days
Identify all providers included in this implementation	3 days
Identify a Provider Champion	1 day
Add Provider Champion to appropriate project meetings	1 day
Arrange demo of Virtual Rounding with provider(s)	3 days
Complete demo to provider(s)	5 days
Verify provider(s) system readiness	30 days
Confirm provider has a web cam on their device	5 days
Confirm provider(s) has Microsoft Teams on the devices they will be using for virtual rounding.	5 days
Confirm provider(s) can launch a VR session from their device(s)	1 day
Instruct provider(s) on device maintenance process (include FAQ review)	5 days

Complete orientation on appropriate visit documentation and billing	0 days
Educate Provider(s) on Service Model	1 day
Coordinate SNF(s) participation in pilot	26.25 days
Identify SNF(s) involved in pilot	1 day
Facility 1	26.25 days
Get SNF Approval for Participation in Pilot	1 day
Conduct initial SNF meeting to present information on use case, benefits and demo of Virtual Rounding	5 days
Identify Facility Champion	1 day
Add Facility Champion to appropriate project meetings	1 day
Arrange demo of Virtual Rounding with SNF Leadership (for awareness)	1 day
Complete demo to SNF Leadership	5 days
Finalize device needs	1 day
Determine number of devices	1 day
Calculate run/rate costs	1 day
Complete readiness checklist for cellular/wireless coverage	1 day
Procure equipment and prepare for deployment	9 days
Obtain SNF signoff for equipment	1 day
Deploy iPads to SNF(s)	0 days
Develop SNF name and QR code for facility (to add to utilization report)	1 day
Ensure facility has a defined process and assigned responsibilities for managing/charging iPads	1 day
Confirm iPads can receive VR call	1 day
Instruct SNF on device maintenance process	5 days
Educate SNF on Service Model	1 day
GoLive Dry Run/Prep	1 day
Confirm quality of connection for each provider/SNF combination	1 day
Schedule provider and support to conduct mock VR visit	1 day
Provider conducts mock VR visit with live support	1 day
Decide Go/No-Go for GoLive	1 day
Inform Service Desk of pending activation	1 day
Identify need for (and coordinate) special service support during GoLive period	1 day
GoLive	10 days
Providers begin VR visits	10 days
Regular touchbases with providers on adoption of technology	10 days

Chain of Custody Form

IT Hardware Chain of Custody Form

[illegible]

Disclaimer:

I acknowledge the receipt of the Trinity Health equipment listed on this form. I further understand that upon request or termination of the equipment loan program, the organization will return all Trinity Health property and that the property will be returned in proper working order. This agreement includes, but is not limited to iPads, stands, cases and other equipment. I understand that failure to return equipment upon request or termination of the equipment loan program may result in additional steps to recover Trinity Health assets including legal action.

RECIPIENT INFORMATION

Representative Name, Title	Name of Organization
City, State, Zip	Tax ID No.
Phone	This organization has received all equipment outlined above:
E-Mail	Sign Here X

SNF Tip Sheet

SNF Virtual Rounding – Oceana

To report issues with this technology, please call the Trinity Health Service Desk at 888-667-3003, and wait on the line for the next available agent.

"I am calling from the Oceana Medical Center and need help with our **Virtual Rounding Telehealth system.**"

iPad Virtual Rounding Quick Start Tips

- When a provider wants to conduct a VR visit you will need to wake up iPad with "2580" pin and make sure VR application is open.
- Tap the "Sign in with QR code" button and scan the QR code that matches label on iPad from list below. As long as iPad stays powered on it should keep the code. You will need to scan this code again if battery loses power, device reboots or performs updates.
- Provider initiates VR session



MS-MHC-OCEANA-1



MS-MHC-OCEANA-2



MS-MHC-OCEANA-3