BOOST YOUR STAFF

How Telehealth Can Help Mitigate Healthcare Staffing Shortages

Helping our partners realize staffing efficiencies with the use of RPM and clinical augmentation

Presented by:

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Session Agenda

1 Welcome & Speaker Intros

4 Sample HRS RPM Workflow

Current State: Staffing Challenges& Clinical Statistics

5 Exploring Lee Health's RPM & Virtual Care Program

How RPM & Virtual Care Can Help

6 Open Q&A



Clinician Staffing Stats



Nurse Staffing

- 203,200 openings projected for RNs each year from 2021-2031 (Bureau of Labor)
- In the years 2021-2022, U.S. nursing schools turned away 91,938 qualified applications
- The average age for an RN is 52 years old. With this we can expect to see a rising increase in retirement over the next 15 years. This will create a knowledge gap across healthcare settings (National Council of State Boards of Nursing's 2020 Nursing Workforce Survey)
- 66% of acute care nurses have considered leaving nursing after the pandemic (American Association of Critical-Care Nurses, Sept 2021)
- Increasing a nurse's patient load by just one patient has been associated with higher rates of infection
- Improving nurse staffing levels were associated with fewer deaths, lower failure-to-rescue incidents, lower rates of infection, and shorter hospital stays



Physician Staffing

- The U.S. faces a projected shortage of between 37,800 and 124,000 physicians within 12 years, according to <u>The</u> <u>Complexities of Physician Supply and Demand: Projections From</u> <u>2019 to 2034</u> (PDF), a report released by the Association of American Medical Colleges (AAMC)
- HRSA data studies shortages in primary care and psychiatry and finds significant shortages in both areas today
- Two-thirds of the population growth expected by 2034 will consist of those age 65 or older, which includes an aging physician workforce. In the next five years, 35% of the physician workforce will be of retirement age



Current State: Staffing Challenges

The Impact on Health Systems



- **Higher Costs:** increased use of temporary workers in all healthcare settings
- **Closures:** increase in closures of community hospitals and clinics, closure of specialty care in rural hospitals such as maternity care
- **Recruitment and retention:** increased burnout, turnover, early retirement





- Increased waiting times in the ED
- Decreased bed availability in the hospital causing delays in admissions
- Delays in elective and emergent surgeries
- Increase in adverse outcomes



There was a 19% rise in adverse outcomes in 2022 (Joint Commission)



Exacerbating Factors

- Work-Life balance
- Aging population and workforce
- Short supply of nurse educators



How RPM/Virtual Care Can Help Mitigate Staffing Challenges

Remote Patient Monitoring (RPM) allows clinicians to communicate with patients via text, voice call or video call any time of day or night. The RPM data (biometrics/surveys) and connection allows medical intervention and escalation at the right time, every time. Timely intervention to care along with improved patient engagement can help to improve patient outcomes; requiring less staff intervention over time.





Face to face virtual technology can increase staff productivity by eliminating the waiting room, rooming of a patient and drive time for home health clinicians



HRS Clinical Monitoring services can provide monitoring of all biometric and survey data, escalating only those true high-risk concerns to your providers. Allowing your team to increase productivity in the office or other healthcare setting



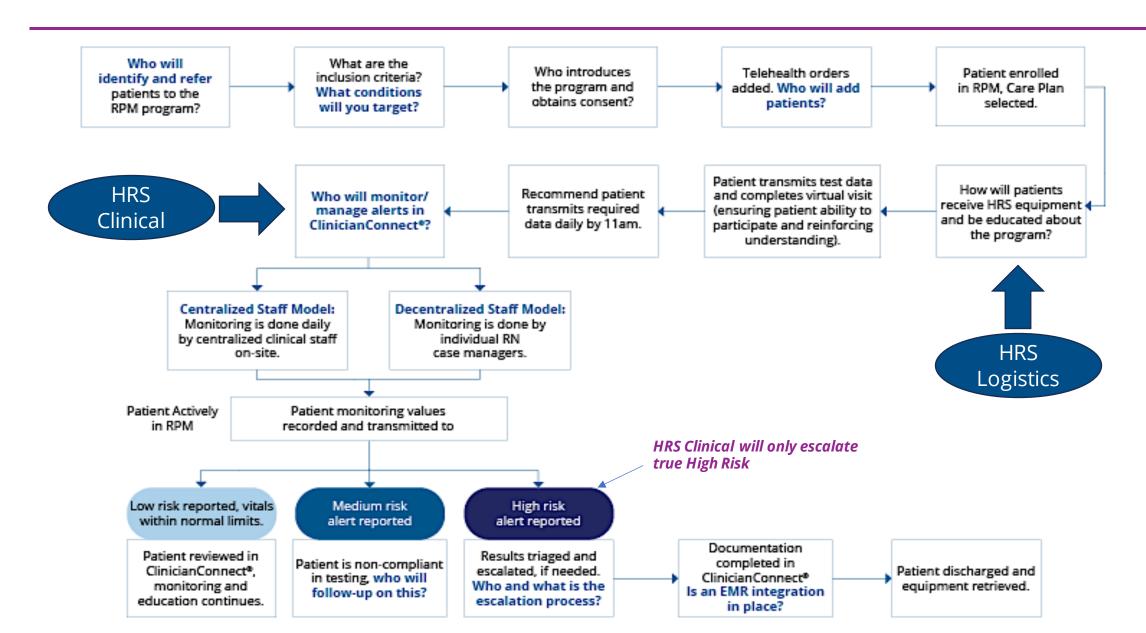
Educational tools within the HRS tablet: such as video and pdf. Can supplement in person education and allow for teach back at the next virtual or in person appointment



HRS Logistics and Onboarding services can alleviate the need for your team to manage, install/deliver equipment: no need for cleaning, storing, shipping/delivering, installing or educating how to use equipment



HRS RPM Patient Evaluation and Enrollment Workflow



HRS Services to Assist with Staffing Needs

Supporting you and your patients every step of the way



CareConnect

- ✓ Remote clinical monitoring of clinical data up to 24/7 availability
- ✓ Service is available for all Acute and Post Acute RPM programs to include Hospital at Home

WoundConnect

- ✓ Virtual consults with an expert Wound Ostomy Certified Nurse Consultant available 5 days a week
- ✓ Store and Forward Wound Imaging
- Optional deep dive-wound supply formulary redesign



- ✓ Equipment delivery direct to patient home
- ✓ Remote patient onboarding
- ✓ Remote patient offboarding and returns coordination
- ✓ Storage of equipment, cleaning, sanitizing and provisioning









Lee Health: Remote Patient Monitoring & Virtual Care

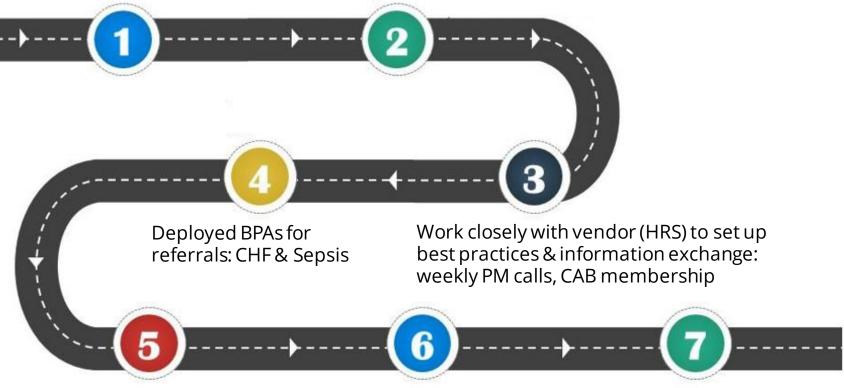


RPM 12-Month Look Back

Remove RPM from Home Health: 3 RNs Start: 150 patients Current: ~359 patient

Retrained HH RNs to new workflows (Epic based documentation), prepared for basis of billing, active management





Started manual billing and ongoing work on automated billing with IS, Epic, LEE billing, and vendor (HRS)

Developed protocols with HVI for CHF, oncology and soon to be HTN

Grew staff from 3 RNs to 6 RNs and 3 Advanced providers

Active RPM Care Pathways













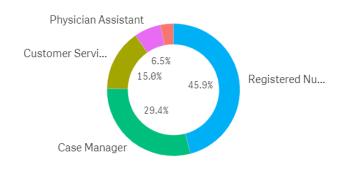


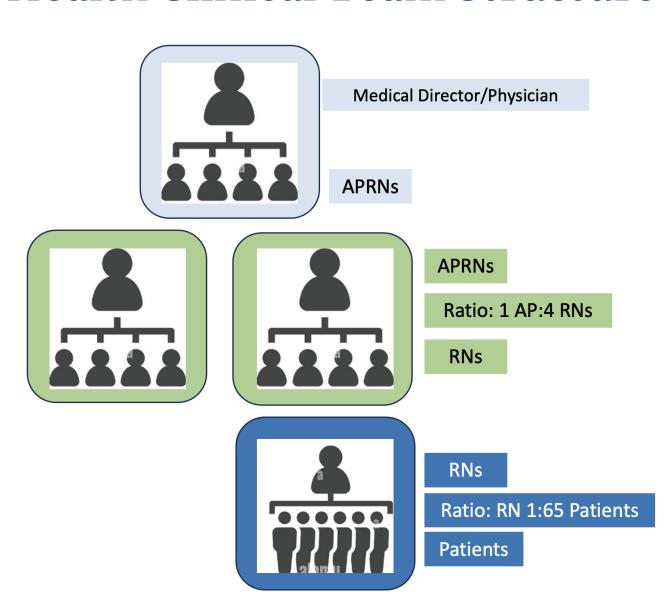


Virtual Health Clinical Team Structure

Key Facts

- Expanding pool for RN, APRN, & front end for FY 2024
- Close to 600 encounters monthly for dept.
- Avg. 20-25 patient outreaches per month

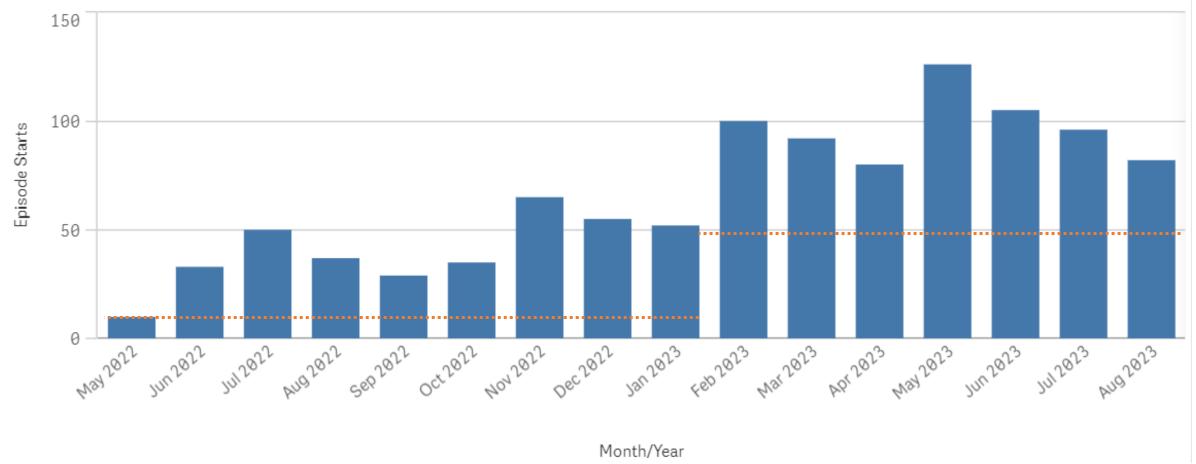






New Start Volumes By Month: RPM

Episode Starts by Month/Year





Referrals via BPA for CHF & Sepsis

	CHF	Sepsis
Hospital #1	67*	34*
Hospital #2	101	17
Hospital #3	101	27*
Hospital #4	64	25



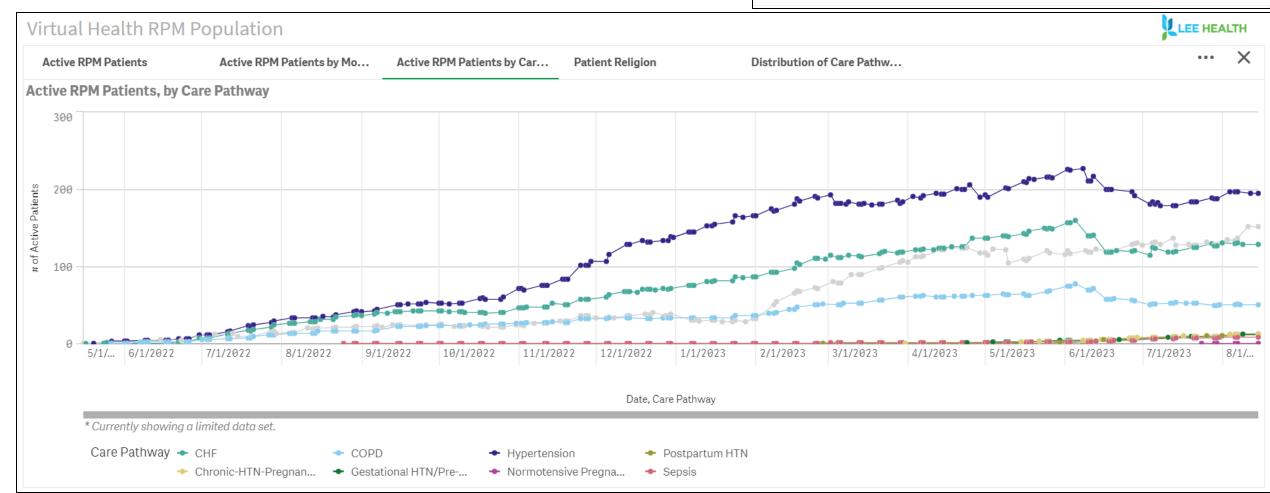
^{*}Green indicates LIVE with plans for all four campuses to go-live post 9/4/2023 Based on Epic's risk of readmission risk score set at 27

Clinical Pathways

Total Inbound Referrals: 1900

Total # of Episodes Ever Number of Active Episodes Episode Length (Median)

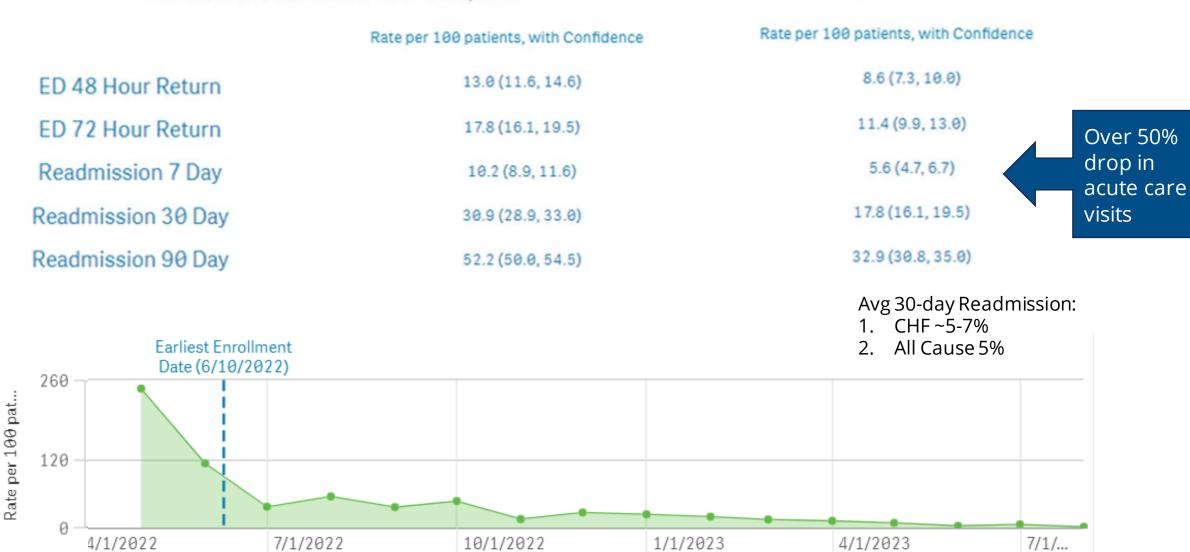
1,009 493 72.0 (Average)



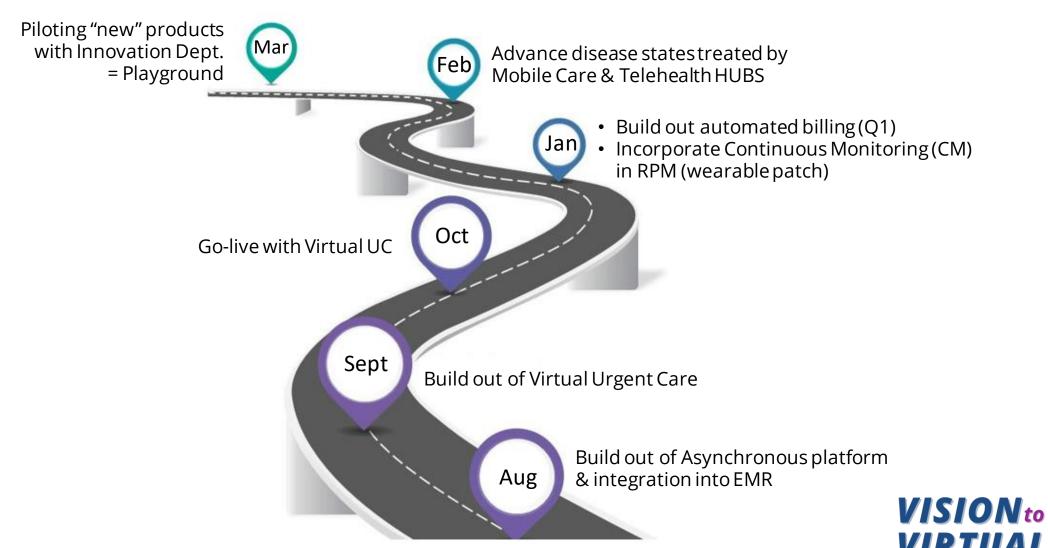
Rate of Acute Care for RPM Members

Previous Acute Encounters in 1 Year Prior to Episode

Encounters in 1 Year Following Episode



A Look at the Year to Come

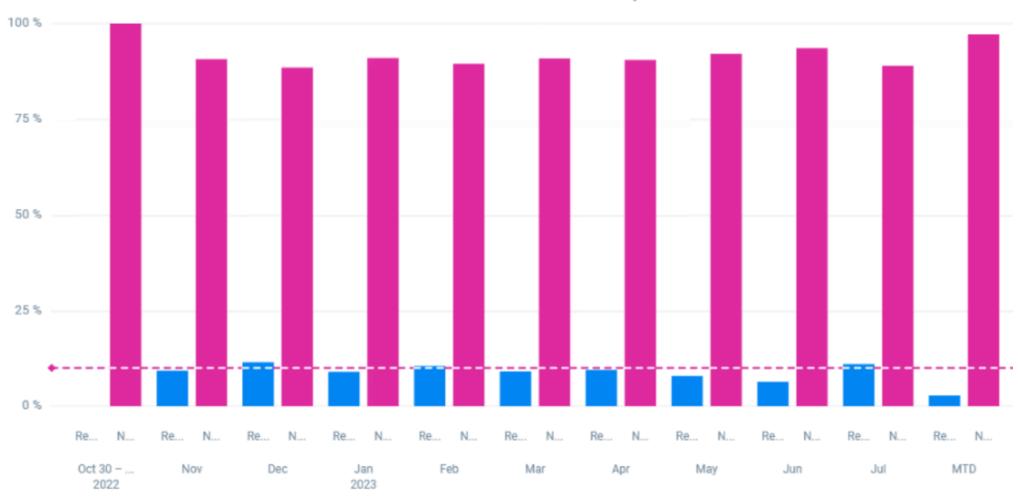


Transforming care delivery

CHF Readmissions in RPM

Percentage of Population by Readmitted? (Index Admission)

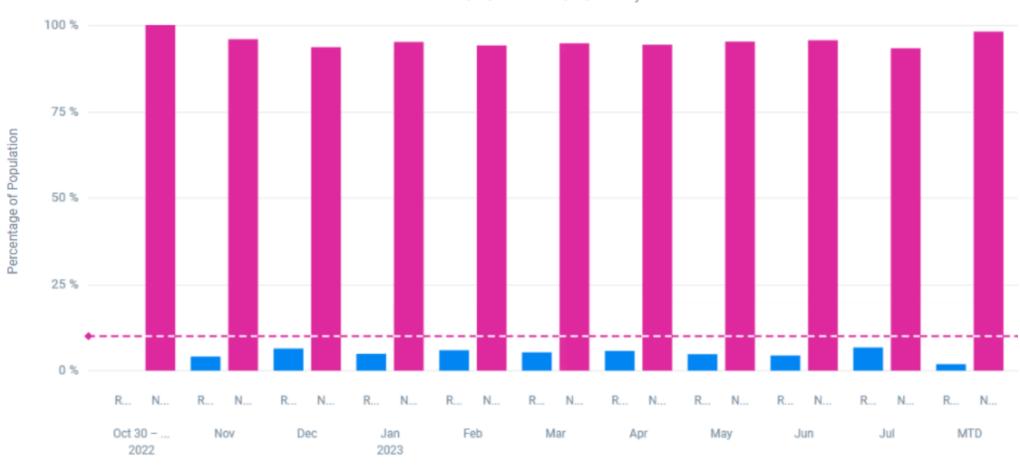
Between 10/30/2022 and 8/29/2023 by month



All Cause Readmission(s)

Percentage of Population by Readmitted? (All Cause)

Between 10/30/2022 and 8/29/2023 by month



Lee Health: Overcoming Challenges





