SCTA Strategies

The Alliance offers to equip and technically support any hospital in the state.

 Deploy a coordinated, open-access telehealth network in South Carolina. Palmetto Health and Greenville Health System are contracted to receive funding to expand their telehealth capacities.

MUSC is deploying all of its specialties for hospital-hospital consultations.

- Understand and effectively respond to the needs of users of telehealth with an emphasis on the underserved and rural.
- Invest in expanding needed specialty and subspecialty capabilities through telehealth.

- 4. Conduct statewide education, training and promotion to providers and the public to accelerate and spread adoption of telehealth.
- Develop a telehealth organization structure that encourages and facilitates statewide collaboration among providers in the delivery of health care, education and research.

Educational offerings will be designed for use by all SC healthcare provider training programs.

 Demonstrate to legislators, payers, providers and the public, the impact of telehealth in improving access, quality and affordability.

An Alliance workgroup to include insurers will develop reimbursement policies that go beyond reimbursement parity and leverage the cost savings associated with telehealth.

Strategy 1: Deploy a coordinated, open-access telehealth network in S	outh Carolina
Center for Telehealth - Operations & Personnel	\$5,300,000
Service and network development	70,000,000
 24/7 technical network management and support 	
 Physician leadership for service development 	
letwork Infrastructure - Hardware & Software	\$1,875,000
Telehealth software platform	\$1,575,000
 Hardware (4-year depreciation schedule) 	
> 100 carts in schools	
> 100 carts in schools	
 60 carts in hospitals trategy 2: Understand and effectively respond to the needs of users of 	 of telehealth with an emphasis
on the underserved and rural	
Rural site support (Palmetto Care Connections)	\$500,000
 Rural provider education and training 	
 Network connectivity assistance 	
 Annual SC Telehealth Summit 	
Strategy 3: Invest in expanding needed specialty and subspecialty capa	abilities through telehealth
Clinical Capacity Development	\$2,900,000
 Tele-ICU subsidy for hospitals to cover >50% of SC ICU patients 	
School health team subsidy	
 Initial phase clinical team growth for priority services 	
mHealth Initiatives	\$400,000
 Deploy mobile health technologies to help manage patients 	
with chronic conditions	
Strategy 4: Conduct statewide education, training, and promotion to paccelerate and spread adoption of telehealth	providers and the public to
Office of Telehealth Education (SC AHEC)	\$400,000
 Telehealth educational and training modules 	
 Create telehealth curriculum for workforce of tomorrow 	
Strategy 5: Develop a telehealth organization structure that encourag	
collaboration among providers in the delivery of health care, educatio	
Regionally-based Hub Support	\$1,925,000
3 regional health systems	
7 regional community hospitals	
■ 5 critical access hospitals	Parkation of the Property of
Strategy 6: Demonstrate to legislators, payers, providers, and the pub improving access, quality and affordability	lic the impact of telehealth in
Marketing & Outcomes Reporting	\$700,000
 SCTA marketing campaign (e.g. agreement with SCETV) 	
 Outcomes reporting team 	



2015 Strategic Plan Deliverables

1. Deploy a coordinated, open-access telehealth network in South Carolina.

Tactic	Deliverable	Owner	Deadline	Completion Status
Explore a common telehealth technological platform that is capable of coordinating multiple referring and consulting hospitals	sc Telehealth Alliance providers will collectively establish: conferencing security and confidentiality, and electronic medical record integration. MUSC to complete RFP process for a telehealth delivery platform to include advisory members of GHS, USC and DMH	MUSC	March 1, 2015	Complete
Coordinate existing telehealth programs within the Alliance	Create a plan for existing telehealth services to coordinate their delivery will be established	MUSC	June 1, 2015	Complete

2. Understand and effectively respond to the needs of users of telehealth with an emphasis on the underserved and rural.

Tactic	Deliverable	Owner	Deadline	Completion Status
Conduct onsite assessments of rural providers to include interest, desired services, workforce capacity, and internet connectivity	Perform a thorough needs assessment of rural hospitals, FQHCs and clinics A needs assessment team will be facilitated by PCC and include investigators from MUSC, USC and GHS. The team will develop a community health access assessment plan for at least one rural region to include a critical access hospital, regional referral hospitals and all primary care health access points The team will assess the ability of a primary care network to be augmented by telehealth	PCC	March 1, 2015	Complete Addition of the second of the seco
Conduct onsite assessments of rural providers to include interest, desired services, workforce capacity, and internet connectivity	Develop workflow assistance for referring sites for the implementation of quality telehealth service delivery o a PCC initiative will establish a telehealth best-practices advisory team for referring sites charged with advising on technical specifications, connectivity, administration and clinical workflow aspects of a telehealth enabled site	PCC	June 1, 2015	Complete
Facilitate improved connectivity for rural providers	The capability of assessing a referring site's current broadband capabilities and performing a review of all options for desired connectivity for site, including ETV resources and the USAC's HCF	PCC	September 1, 2015	Complete

	Program for subsidized funding, will be established o connectivity assessment for all sites in at least one rural region will be completed			
Facilitate improved connectivity for rural providers	Assist with equipment installs, support and training o all health access points that have adequate bandwidth and desiring to participate in telehealth activities within at least one rural region will be equipped with telehealth technologies	PCC	December 1, 2015	
Objectively assess for care disparities in chronic health condition management	Perform a telehealth needs assessment at the regional level to include both available quantitative health data and qualitative community assessments The needs assessment team detailed in Strategy 2a will establish a telehealth service delivery needs assessment following the completion of the health access assessment	PCC	TBD	Complete
Objectively assess for care disparities in chronic health condition management	Identify and assist in the development of appropriate telehealth service lines O PCC will establish a region-specific database of the available telehealth services in South Carolina to be utilized in identifying service gaps upon completion of the needs assessment (Strategy 2a and 2c)	PCC	September 1, 2015	Complete
Objectively assess for care disparities in chronic health	Identify consulting assistance to communities for telehealth grant opportunities	PCC	September 1, 2015	Complete

condition	0	establish a formal support		
management		mechanism to assist	almerkeens	The state of the state of
		community providers in		
		participation of telehealth		
		grant opportunities		

3. Invest in expanding needed specialty and subspecialty capabilities through telehealth.

Champions: Designees of MUSC, USC and GHS					
Tactic	Deliverable	Owner	Deadline	Completion Status	
Promote telehealth services which transform the care delivery system to	Report a timeline and the pathway of service development	MUSC	March 1, 2015	Complete	
provide better care, lower cost and maximize the limited supply of care providers				Ten glandakul Tuget et in Kiras Maden Geldini Harasun ki	

4. Conduct statewide education, training and promotion to providers and the public to accelerate and spread adoption of telehealth.

Champions: Designee	s of PCC and ETV			
Tactic	Deliverable	Owner	Deadline	Completion Status
Leverage the experience of the PCC to raise awareness, educate and facilitate the adoption of telehealth	Provide monthly newsletter discussing telehealth news and send to health care providers in SC, hold educational webinars for providers and their staffs, maintain central website for telehealth information and continue to convene the annual telehealth summit to promote state efforts and educate on national trends	PCC states and states	Ongoing	Ongoing
Provide training for future providers through multidisciplinary telehealth courses	Establish a telehealth best practices training mechanism	PCC	June 1, 2015	Complete

at the graduate level	multidisciplinary health teams			
Provide training for future providers through multidisciplinary telehealth courses at the graduate level	Leverage SCETV's 50+ years of experience and the Area Health Education Consortium SCHOOLS network to disseminate telehealth best practices and tele-educational courses for health care providers and patients	ETV	Ongoing	Ongoing
Investigate the feasibility of statewide centralized credentialing program for all telehealth providers	PCC will report a feasibility assessment of a centralized credentialing program	PCC	June 1, 2015	Complete

5. Develop a telehealth organization structure that encourages and facilitates statewide collaboration among providers in the delivery of health care, education and research.

Champions: Designees of MUSC and representatives of the State Legislature

Tactic	Deliverable	Owner	Deadline	Completion Status
Establish a SC Telehealth Advisory Council	The Advisory Council will convene by December 15, 2014.	MUSC	December 15, 2014	Complete
Establish success metrics that focus on SC care problems that are amenable to telehealth and	The Advisory Council will establish success metrics for telehealth delivery in South Carolina	MUSC	March 1, 2015	Complete
which encourage collaboration for equitable impact				

6. Demonstrate to legislators, payers, providers and the public, the impact of telehealth in improving access, quality and affordability.

Champions: Designees of MUSC, USC, GHS, DHHS, PCC and ETV

Tactic	Deliverable	Owner	Deadline	Completion
		ALL DESCRIPTION OF THE PROPERTY OF THE PROPERT		Status

Document, evaluate and communicate outcomes related to existing and new telehealth initiatives to include cost savings, clinical quality improvements, increased access to care, etc. ETV resources and experience will be leveraged to deliver telehealth successes to the public and other stakeholders	As representing the South Carolina Telehealth Alliance, MUSC and ETV will initiate effective public awareness campaigns	MUSC and ETV	June 1, 2015	Complete Service of the service of
Support research that establishes academic visibility and credibility for telehealth in SC	A report on the ongoing assessments and telehealth activities will be presented at the 2015 Annual Telehealth Summit of South Carolina	MUSC and PCC	October 16, 2015	

2016 South Carolina Telehealth Alliance Strategic Plan

A) Mission

Improve the health of all South Carolinians through telehealth.

B) Values

Patient centered
 Quality
 Collaboration
 Sustainability
 Accountability

C) Vision

Telehealth will grow to support delivery of health care to all South Carolinians with an emphasis on underserved and rural communities. It will facilitate, coordinate and make more accessible quality care, education and research that are patient centered, reliable and timely. Our state will become recognized nationally for telehealth that is uniquely collaborative, valuable and cost effective.

D) Value Proposition

Telehealth in South Carolina will deliver high value through productive collaboration.

South Carolina Telehealth Alliance Driving Strategies and Proposed Tactics 2016

1. Deploy a coordinated, open-access telehealth network in South Carolina.

In 2016, any hospital in South Carolina wishing to receive telehealth services will have a mechanism to be equipped to do so.

- A. Disseminate, support and utilize open-access telehealth technology in hospitals and primary care clinics across the state
 - a. Champion: MUSC
 - b. Planning Members: PH-USC, GHS, DMH, PCC
 - c. Deliverables:
 - March: Report a roadmap for the deployment of technology, training and ongoing support for consultative telehealth services for all hospitals in the state wishing to receive consultative services via the Alliance
 - ii. September: Demonstrate use of a common, open-access platform in use by at least one hospital receiving services provided by multiple institutions in the Alliance
- B. Develop a process for coordinating and streamlining credentialing, with a focus on the needs of hospitals receiving services from multiple institutions
 - a. Champion: Palmetto Care Connections
 - b. Planning Members: PH-USC, GHS, MUSC, DMH, Roper, Hampton
 - c. Deliverables:
 - i. March: Develop a model for a process of streamlining credentialing for hospital-based telehealth services
 - ii. September: Have at least one referring hospital piloting the streamlined credentialing process
- C. Incorporate large employers in open access network
 - a. Champion: Hospital Association
 - b. Planning Members: MUSC, PH-USC, GHS
 - c. Deliverables:
 - September: Large employers engaged to assess needs and readiness to adopt telehealth for their employees

2. Understand and effectively respond to the needs of users of telehealth with an emphasis on the underserved and rural.

In 2016, telehealth service development will be driven to the tailored needs of a rural region.

- A. Establish service development priorities based on the 2015 needs assessment of the 4 county rural area
 - a. Champion: PCC
 - b. Planning Members: Hampton, Orangeburg, MUSC, Roper, PH-USC
 - c. Deliverables:
 - i. March: Prioritize the identified services from the 2015 Needs Assessment results by readiness for implementation
 - ii. September: Implement at least one additional service which responds to the Needs Assessment in the 4 county area

3. Invest in expanding needed specialty and subspecialty capabilities through telehealth.

In 2016, the telehealth support to South Carolina hospitals will be accelerated by both increasing the number of services available and the number institutions providing services regionally.

- A. Enable primary regional hospital networks and providers of hospital-based telehealth services to be regional telehealth support hubs
 - a. Champion: MUSC
 - b. Planning Members: PH-USC, GHS, Children's Hospital Collaborative
 - c. Deliverables:
 - i. June: Regional support hub personnel training completed and regular coordination meetings established
 - ii. September: Palmetto Health and GHS will report roadmaps of their regional telehealth growth
- B. Coordinate deployment of existing outpatient services to maximize South Carolina coverage
 - a. Champion: MUSC
 - b. Planning Members: DHHS, DHEC, DMH, PCC
 - c. Deliverables:
 - June: An expansion plan to increase telehealth participation in low-utilization counties for primary care clinics will be underway
 - ii. September: A report on telehealth utilization by county will be presented to the Advisory Council
- C. Develop a telehealth "teach the teacher" forum which enables primary care settings to co-manage complex diseases with the assistance of specialists and a multidisciplinary team
 - a. Champion: PH-USC
 - b. Planning Members: AHEC, MUSC, GHS
 - c. Deliverables:

- i. March: Needs assessment to identify target regions with a focus on Hepatitis C
 ii. September: Multidisciplinary team, initial sites and outcomes process in place

4. Conduct statewide education, training and promotion to providers and the public to accelerate and spread adoption of telehealth.

In 2016 the Alliance will begin preparing the workforce of the future by integrating telehealth training into health provider education programs across the state.

- A. Establish a health provider training process in telehealth for both practicing providers and the future health workforce.
 - a. Champion: AHEC, PCC
 - b. Planning Members: MUSC, PCC, PH-USC
 - c. Deliverables:
 - i. June: A program development and statewide implementation plan for telehealth training for the healthcare workforce will be established
 - ii. September: At least one formal telehealth training program will be open to South Carolina providers

5. Develop a telehealth organization structure that encourages and facilitates statewide collaboration among providers in the delivery of health care, education and research.

In 2016, active healthcare stakeholder involvement in the Alliance will increase through the establishment of regional and task-focused workgroups

- A. Establish a work group structure to enable engagement with specific initiatives across geography, patient populations and service areas
 - a. Champion: SCTA Outreach Coordinator
 - b. Planning Members: SCTA Advisory Council, PCC
 - c. Deliverables:
 - i. March: Working groups structure proposed
 - ii. June: Working groups convened and first report to SCTA Advisory Council

6. Demonstrate to legislators, payers, providers and the public, the impact of telehealth in improving access, quality and affordability.

In 2016 the Alliance will work directly with insurers to develop sustainable reimbursement models which incentivize the use of effective telehealth in South Carolina.

- A. Deploy an informative promotional campaign that can be utilized by all SCTA partners
 - a. Champion: SCETV
 - b. Planning Members: MUSC, PCC, PH-USC, and GHS
 - c. Deliverables:
 - i. June: Marketing material development and dissemination plan finalized
- B. Develop a coordinated approach to working with the SC Board of Medical Examiners on policies supporting responsible use of telehealth
 - a. Champion: SCTA Advisory Council Liaison
 - b. Planning Members: SCTA Advisory Council
 - c. Deliverables:
 - i. September: SCTA plan to address SC BOME priority concerns regarding telehealth is formulated
- C. Establish a task force to include insurers to develop reimbursement policies which incentivize telehealth models that enhance care and reduce overall costs
 - a. Champion: MUSC
 - b. Planning Members: DHHS, BCBS, PH-USC, GHS
 - c. Deliverables:
 - i. March: Task force formed
 - ii. September: Health plans considering SCTA recommendations for reimbursement contracts and policies