HOW WE GREW OUR DSMES FROM 12 TO 500 PROGRAMS A YEAR USING TELEHEALTH

Tony Song “Diabetes CEO”
President, CEO, PWD
Tony Song AKA "The Diabetes CEO" uses his own diagnosis of diabetes as the catalyst to pursue his goal to help every person living with diabetes become their own expert.

For the past 16 years he has served as the Founder and CEO of Diabetes Care Partners, a nationally recognized diabetes solutions organization dedicated to helping Health systems and organizations get better diabetes outcomes with their members, improve HEDIS measures, increase access and ultimately get more value using innovative curriculum technology and delivery models.

MY MISSION: TO POSITIVELY TRANSFORM THE LIVES OF EVERYONE LIVING WITH DIABETES, EVERYWHERE.
making a DIFFERENCE is Your PASSION.
Our Mission

Increase ACCESS to outcomes driven, meaningful, innovative solutions and support for all people living with diabetes
Founded in 2002 with a mission to increase access in West Covina, California
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12 - 24 Programs Per Year
25 Mile Access
2008 We Built A Mobile Education Unit
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48 Programs Per Year

100 Mile Access
In 2011 we were introduced to our future. Through a Company Called Telehealth Docs.
The next year in 2012 we started a telehealth pilot serving a Rural Health Center in California, then in 2014 we partnered with a Native American resource center to provide telehealth diabetes support near the Oregon border.
In 2012 we started a small telehealth pilot serving a Rural Health Center in Nevada. Then in 2014 we partnered with a Native American resource center to provide telehealth diabetes support near the Oregon/California Border.

72 Programs Per Year

600 Mile Access
In 2015 we partnered with our first Medicare Advantage insurer to provide telehealth DSMES services for 6 counties in California.
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360 Programs Per Year

800 Mile Access
In 2019 we partnered with the nation’s largest publicly operated Medicaid health plan with over 2.2 million members to help develop and facilitate Telehealth DSMES.
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500+ Programs Per Year

800 Mile Access
In 2019 we were honored to be selected by the CDC for a detailed on site multi-day evaluation of our telehealth program to assist other DSMES and DPP programs across the nation.
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Telehealth Equipment

KEEP IT SIMPLE
3 Setup Configurations
Ipad/tablet telehealth setup ($300)

- IPAD POWER CORD
- HDMI CABLE
- HDMI ADAPTER
- IPAD ON/SHUTOFF BUTTON

IPAD
Android TV Telehealth Group Setup ($450)
Home Telehealth Appliance ($175)
My 3 Secrets To Our Success
ANCIENT CHINESE PROVERB

I hear and I forget.
I see and I remember.
I DO and I understand.
In the doing is the learning!
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I see and I remember.
I DO and I understand.
In the doing is the learning!
Best way to achieve your goals is to help them achieve theirs.
Best way to achieve your goals is to help them achieve theirs.

“If you want to go fast go alone, if you want to go far go together.”
#1 Secret to A Successful DSMES
#1 Secret to A Successful DSMES

Member’s Experience is #1

How Does Your Program Makes Them Feel?
We need to Celebrate and Seek Change
That’s How We Will Grow and Evolve
We need to Celebrate and Seek Change
That’s How We Will Grow and Evolve

Always remember why you’re doing this........
This is the time to take risks and be bold in your actions for your patients and for your profession.

Utilize the rich resources you have in the UMTRC and the Indiana State Department of Health to understand local laws, reimbursement issues and Logistics with telehealth.
CONSENT TO PARTICIPATE IN TELEHEALTH CONSULTATION

1. PURPOSE
   The purpose of this form is to obtain your consent for a telehealth consultation with a provider.

2. NATURE OF TELEHEALTH CONSULTATION
   Telehealth involves the use of audio, video, or other electronic communications to transmit audio, video, or other data between you and the health care provider.

3. RISKS, BENEFITS, AND ALTERNATIVES
   The risks of telehealth may include a decrease in the provider’s ability to counsel and monitor you effectively. The provider may not be able to fully assess your condition.

4. MEDICAL INFORMATION AND RECORDS
   We will ensure your privacy is maintained and that your medical information is kept confidential.

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   We will ensure your privacy is maintained and that your medical information is kept confidential.

6. CONSENT
   By signing this consent form, you agree to participate in a telehealth consultation.

My health care provider has discussed with me the information provided above. I have had an opportunity to ask questions about the consent form, and my questions have been answered. I have read and agreed to the Telehealth Consultation.

Signature of Patient: __________________________
Signature of Telehealth Consultant: __________________________
Date of Signing: __________________________

If there are any changes to this consent form, I will be notified.

Signature: __________________________

https://diabetescarepartners.com/p/freeform
Thank you

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Please be advised that UMTRC only provides guidance on billing issues based on experience, anecdotal information we have heard in the field, and through research. Following our advice does not guarantee payment. We always recommend you check with the payer (or your Medicare Administrative Contractor) to verify UMTRC’s information.

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UMTRC

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National Consortium of Telehealth Resource Centers

TelehealthResourceCenters.org

2 National Resource Centers

12 Regional Resource Centers
NCTRC Website

https://www.telehealthresourcecenter.org/
For the most up-to-date coverage of national and state policy, visit our site as well as the Center for Connected Health Policy, housed at the National Telehealth Policy Resource Center: https://www.cchpca.org/
State Telehealth Laws and Reimbursement Policies

AT A GLANCE | Spring 2020

*Please note that since the research was conducted for this report in February 2020, the COVID-19 emergency has imposed many temporary waivers, exceptions and changes to telehealth policy across the nation. These changes, while significant, in most cases do not reflect a permanent shift in a state’s telehealth policy, and are only in effect through the duration of the emergency. Therefore, these COVID-19 specific policy changes are not reflected in the data used for this fact sheet.*

Telehealth policy trends continue to vary from state-to-state, with no two states alike in how telehealth is defined, reimbursed or regulated. A general definition of telehealth used by CCHP is the use of electronic technology to provide health care and services to a patient when the provider is in a different location.

50 States and the District of Columbia (D.C.) have a definition for telehealth, telemedicine or both.

16 Medicaid programs reimburse for S&I

23 Medicaid programs reimburse for RPM

50 States and D.C. reimburse for live video

19 States reimburse services to the home
Spring 2020 State Telemedicine Laws & Reimbursement Policies
TTAC Toolkits

http://telehealthtechnology.org/toolkits/
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UMTRC Services

• Virtual Librarians
  • Individual Consultation
  • Technical Assistance
  • Connections with other programs

• Presentations & Trainings
  • Project assessments
  • Updates on reimbursement policy and legislative developments
Ultimate Goal: Increase Access to Care
• Join our mailing list
  • Blogs
  • News Articles
  • Upcoming Events
  • https://www.umtrc.org/index.php?src=events&submenu=Events&srctype=lister&pos=5,5,14#footer-newsletter-signup
2020 Stakeholder Calls

- Quarterly Stakeholder Calls (All States)
- 2:00pm Eastern
  - January 15th
  - April 15th
  - July 22nd
  - October 21st
- See Events on UMTRC.org
UMTRC 2020 Conference

- UMTRC Annual Conference
  - July 14-15, 2020
  - https://www.umtrc.org/umtrc-annual-conference
Contact Information

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