

Proactive Telecare™ is Telehealth's Secret Weapon for Home Health & Hospice

Over the last three months, the COVID-19 outbreak has drastically changed the way healthcare is delivered in America – even worldwide. For healthcare and home health professionals who are used to seeing their patients in-person on a regular basis, their agencies have been directly impacted by sudden shifts in care protocols.

While Telehealth systems and related technology have been under development for several years, they have undeniably been launched into the spotlight, and demand for remote patient care systems — to protect both home health patients and care providers alike — has skyrocketed.

According to a recent Frost & Sullivan report, the demand for Telehealth is predicted to rise almost 65% in 2020, a clear sign that clinicians are looking for alternative ways to keep up with patients amid COVID-19. But the report also notes that Telehealth will continue to grow far beyond 2020, with a predicted five-year annual compound growth rate of 38.2%.

What is Telehealth, Telemedicine & Telecare?

Telehealth encompasses all health-related services and information distributed and performed via remote communication and monitoring. This technology has been extraordinarily useful in a time when face-to-face visits are being reduced. Patients are still able to check in with their doctors, receive diagnoses and be prescribed medicine all without having to go to the doctor's office. In addition to doctor visits, Telehealth may also include services such as remote recording of vitals like temperature, heart rate and blood pressure, which can then be transmitted to a corresponding healthcare agency or caregiver.

Within this whole realm of Telehealth exists two subsets: Telemedicine and Telecare. Telemedicine is the act of doctors visiting, diagnosing and prescribing to patients via telecommunication software and “virtual” office visits.

Telecare, on the other hand, is the same act of visiting a doctor virtually but via audio-only communication, commonly by phone.

The Dilemma: Critical Care Decisions Faced by Healthcare Providers

The COVID-19 outbreak completely changed how healthcare is delivered to patients. In many clinics, medical offices, urgent care facilities and even hospitals, routine office visits were significantly curtailed or postponed indefinitely out of caution for healthcare professionals. The unintended side effect that resulted was the interruption of monitoring of chronic conditions, elective surgeries and care for routine medical conditions.

Home healthcare workers, visiting & private-duty nurses — and agency owners — all cite the concerns of inadvertently passing COVID-19 onto patients during routine home visits. Additionally, healthcare providers may be exposed while working with a patient who is carrying the virus but not yet showing symptoms.

Many home healthcare and hospice providers have curtailed in-home visits or will screen patients at the door before entering to protect both parties.

Low Cost and Easy To Deploy, Telecare Comes of Age

For the past 20 years, Telecare consisted of remotely monitored medical alarm systems to be used for medical or personal emergencies only. During the past five years, however, technology has advanced significantly and new solutions provide a whole new level of capabilities and services to healthcare. As of May 2020, well-respected national organizations like PACE are adopting Telecare as their primary means of remotely caring for patients.

To start, the technology is far cheaper. Most Americans have far greater access to affordable phone lines than internet access. Additionally, far less training is required for agency staff and patients. When visits can be done over the phone, care is as simple as pressing one button and speaking directly with a healthcare provider. Telecare also eliminates the need for expensive software and hardware to remotely track and transmit information. And with the typical barriers of Telehealth removed, Telecare can be implemented quickly into an agency's menu of care.

Telecare Wearables That Call Home Healthcare Providers Directly

One company, Homestead Health, has been pioneering the development of Proactive Telecare™ solutions. Creator of the innovative NurseCaller™ Help Alert pendant, Homestead Health specializes in easy-to-use and cost-effective Telecare solutions to home healthcare agencies across the country for years. The recent calls for increased use of Telecare technology was no surprise to them.

“National pilot programs and initiatives by a variety of home healthcare providers have proven the incredible ROI that Telecare offers,” said Homestead Health Executive Director Thomas Franks. “For as little as \$1 a day, a home healthcare or hospice agency can quickly and easily deploy a NurseCaller™ to each of their patients that may have chronic or debilitating conditions.”

An industry-leading provider, Homestead Health first developed the NurseCaller™ Help Alert pendant with the goal of providing patients a mobile version of the nurse call button typically only seen in hospital rooms. The NurseCaller™ builds on that idea and gives patients the power to directly contact their healthcare providers anytime, anywhere.



“The NurseCaller™ was designed to provide a proactive approach to home patient care,” said Franks. “Encouraging patients to call their healthcare provider or caregiver for routine or even urgent matters significantly increases patient engagement. This typically results in a 24% reduction in avoidable hospital readmissions, 35% reduction in unnecessary ER visits and a 50% reduction in missed home nurse visits.”

Combining proprietary Proactive Telecare™ technology — exclusive to Homestead Health — with the power of 4G LTE, the NurseCaller™ is a revolutionary home help alert call button.

The small, lightweight NurseCaller™ is a completely self-contained, waterproof mobile pendant that fits in the palm of the hand. With a built-in microphone and speaker, the wearer of the device can place and receive phone calls, while talking directly to a contact through the pendant.

The NurseCaller™ will alert the wearer during such events as a fall detection, when a phone call has been placed, when the device is low on battery and much more. Because the device has its own designated phone number, pre-set contacts can remotely customize and call into the device, as well as request real-time location, device status and update authorized phone numbers — all with the simplicity of sending a text message.

Telecare Wearables that Contain Built-in Thermometers

Another company offering cutting-edge Telecare devices is SafeGuardian — a Wyoming LLC. This national solutions provider recently announced “their most advanced Telecare wearable yet,” the CareCaller TempAlert™ Pendant. Similar to Homestead Health’s NurseCaller™ device, the CareCaller TempAlert™ is a 4G mobile pendant that includes built-in biometric sensors that can monitor a patient’s temperature and heart rate in real time.

If either the temperature or heart rate of a home health patient exceeds a set threshold, the device will send a text message alert to contacts that have been preprogrammed into the device. Amid the COVID-19 outbreak, close monitoring of temperature and heart rate for at-risk patients can mean the difference between life and death.

“The CareCaller TempAlert™ is such an important device because it provides caregivers with that much more real-time information,” said Sean Holohan, general manager at SafeGuardian. “Especially during a pandemic when face-to-face visits are being almost completely eliminated, it’s of paramount importance that the care of at-risk patients is not interrupted. Not only does the device call out to caregivers when patients

need help, but now specific vital signs can be automatically tracked and sent to caregivers and clinicians.”



Unlike other Telehealth solutions, the CareCaller TempAlert™ doesn't require any expensive software or training. Anyone — home health and hospice agencies, primary caregivers, nurses, doctors or other caregivers — can stay up-to-date with patients simply by receiving text messages or phone calls.

“The CareCaller TempAlert™ will proactively keep caregivers in the loop by automatically sending text messages or phone calls,” said Holohan. “Information is dispersed with the simplicity of a text message, so there's really no learning curve for this device, which makes it accessible to anyone.”

When receiving care is as simple as the press of a button, Telecare isn't complicated, nor is it costly.

Telehealth — and Telecare specifically — can save home health agencies, as well as CMS itself, upwards of \$15,000 per patient from reduced hospital readmissions, ambulance and ER visits and missed nurse visits. Not to mention, in a time where face-to-face care is being limited, Telecare can keep patients who require around-the-clock care connected to their caregivers anywhere, anytime.

In a May 20, 2020 article in Kiplinger, Brian Marcotte, president of the National Business Group on Health, told the publication that, “having a doctor treat an upper respiratory infection could cost as little as \$40 via a video call compared to a doctor's office visit that would run about \$100. An urgent care center's bill would be something in the neighborhood of \$150. A visit to a hospital emergency room could set you back \$700.”

CMS Responds by Changing Telehealth Reimbursement Guidelines

In an unprecedented response aimed at keeping healthcare agencies moving along with their regular care of patients during social distancing, CMS is loosening its restrictions on reimbursement for Telehealth visits like never before.

In March 2020, CMS — which is historically very stringent on reimbursements for Telehealth visits — announced that its 140 million beneficiaries nationwide could now visit their doctors via Telehealth communications and be covered. This move was unprecedented by CMS, but it was also necessary to help protect the nation's most vulnerable population during a pandemic. As a result, agencies are searching for Telehealth solutions to keep them safely connected to their patients without having to see them in person.

Since the announcement, there's been a surge from healthcare and home health agencies across the country to find a suitable Telehealth solution for their patients. With face-to-face visits being completely halted during the pandemic, caregivers can ill afford to fall behind on routine checkups of their patients.

In fact, National Association for Home Care & Hospice President William A. Dombi recently urged the agency to permanently relax its restrictions on covering Telehealth visits.

"It is too early to make a determination as to when risks associated with the COVID-19 virus will subside," he said. "It is widely believed that health care delivery will be altered for the foreseeable future by COVID-19. This will most certainly be the case for services rendered to individuals with serious illness and those that are terminally ill. Given this likelihood, we believe it is an appropriate time to begin discussions around steps that can be taken by CMS to establish permanent Medicare policies related to the ongoing use of telecommunications technology in hospice care. Further, it may be time to set in motion actions that will allow for proper monitoring of utilization of technology-based visits and for assessment of their impact on quality of care outside of the current public health emergency."

As a result of that appetite, healthcare agencies continue to implement more Telehealth protocols into their daily operations.

The Telehealth technology of today is immense in its scope and capabilities. Doctors can see patients via video chat, diagnose a problem and prescribe medication. Patients can wear monitors that will automatically track and report vital signs. Active and independent seniors can take advantage of a vast market of wearable devices such as watches and pendants. Healthcare agencies can utilize software that will record, track and transmit a patient's readings by the minute.

But typically, Telehealth solutions are expensive and require months to deploy. The initial cost of the technology can quickly run into six figures for proprietary, HIPPA-Compliant software — including app development, hardware cost for monitors, biometric sensors and tablets. Additionally, there can be a significant investment required for installation, employee training and patient instruction — both in their medical offices and in patients' homes. Therein lies the barrier to implementing such protocols.

In addition to barriers faced by agencies, many aging and underserved Americans also face barriers in access to Telehealth. According to a recent Pew Research Center study, nearly 35 million Americans don't use the internet. This could be due to lack of access — such as those who live in rural areas — or lack of financial means to pay for it.

As the rise in demand for general Telehealth services increases, so too does the demand for audio-only Telecare services.

CMS, however, has yet to agree to reimburse patients for audio-only visits with clinicians, saying that, "...the provider must use an interactive audio and video telecommunications system that permits real-time communication between the distant site and the patient at home." But that hasn't stopped some industry leaders for calling on such a measure.

In a letter sent to CMS, National PACE Association President and CEO Shawn M. Bloom called for the agency to cover these audio-only visits. PACE who provide Programs of All-Inclusive Care for the Elderly and, "whose exclusively nursing home eligible participants are 98% low-income," is concerned that its most vulnerable population will not receive the proper care they require without access to internet, video and voice chat communication.

CMS Video: Medicare Coverage and Payment of Virtual Services

CMS recently released a [video](#) that answers common questions about the expanded Medicare Telehealth services benefit during COVID-19. New information includes how CMS adds services to the list of Telehealth services, additional practitioners that can provide Telehealth services and the distant site services that Rural Health Clinics (RHCs) and Federally Qualified Health Centers (FQHCs) can provide. Further, the video includes information about audio-only Telehealth services, Telehealth services that hospitals, nursing homes and home health agencies can provide and how to correctly bill for Telehealth services.

For more information on new CMS Telehealth guidelines, visit their website:
<https://www.cms.gov/newsroom>

For more information on Homestead Health's NurseCaller, including access to their recent white paper and case study, visit their site: <https://www.homesteadhealth.com/>

For more information on SafeGuardian and the CareCaller TempAlert™, visit their site:
<https://safeguardian.com/>