Executive Summary

In quarter one of 2017, the initial tactics of the 2017 South Carolina Telehealth Alliance ("SCTA") strategic plan were earnestly rolled out. While not without its challenges, overall the quarter successfully heralded an enhanced engagement between the member institutions of the SCTA. Significantly, the Regional Hubs have met regularly and are actively discussing the barriers of enhancing telehealth development statewide. These discussions have laid the groundwork for robust contract discussions which will allow the Hubs to receive the resources they need to overcome the identified barriers. This report also details the collaborative successes in the strategies of IT support and education, which will serve to establish the presence of equitable telehealth support across the state. Additional highlights of the report include a continued emphasis on the rural needs of the state carried forward by Palmetto Care Connections as they assess ways to increase access to telehealth services and allow sites to navigate logistical challenges. Lastly, the advocacy and sustainability arm of the 2017 strategy was highly successful with the first ever Telehealth Awareness Week pronounced and a well-attended 2-day Telehealth Summit for the state.

Mission

Improve the health of all South Carolinians through telehealth.

Values

Patient centered
Quality
Collaboration
Sustainability
Accountability

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.

Value Proposition

Telehealth in South Carolina will deliver high value through productive collaboration.
Driving Strategy 1
Deploy a coordinated, open-access telehealth network in South Carolina.

The SCTA IT Workgroup has collaborated to establish guidelines for the SCTA telehealth technical standards (Appendix A). In addition, the SCTA IT Workgroup has been working on the following initiatives to support the statewide telehealth network:

1) The creation of a statewide help desk for capturing, organizing, reporting and managing technical assistance calls that is currently being pilot tested. The help desk is a cloud-based resource that has the capability to triage and forward calls to a team of SCTA IT resources which can be across many organizations. The current link to the help desk is SCtelehealth.service-now.com.

2) The creation and deployment of a statewide telehealth endpoint directory (the workgroup has decided to focus on telehealth endpoints as opposed to individual existing programs and providers). MUSC and PSPN sites are participating in the pilot phase of an online directory service that can be configured on endpoints ( codecs ) or PC’s running software codecs and is accessed via the web using a simple web browser on PC’s and or mobile devices. The directory is intended to provide a service that allows any provider or referring site the ability to lookup participating SC telehealth endpoints SIP URL’s ( addresses ). This is in direct support of the open access network. One that allows any SCTA site to call any SCTA provider or providers of services. ( https://www.seevia.me/ )

3) The creation of the SCTA self help portal for access to frequently asked questions, a telehealth knowledge base, equipment literature, training materials and software downloads. The current site can be browsed at ttt.musc.edu. An SCTA friendly URL will be created when testing is complete.

Palmetto Care Connections has been in communication with representatives of the SCTA regional hubs on continued exploration of a statewide credentialing model. In addition, PCC has contacted potential vendors to inquire about specifications for a system that could potentially support a state-wide system. PCC has distributed surveys South Carolina hospitals to assess their perspective on the proposed model.

---

SCTA Strategy 1 - Milestones

<table>
<thead>
<tr>
<th>Milestone</th>
<th>Strategy</th>
<th>Tactic</th>
<th>Timeline</th>
<th>Champion</th>
<th>Status</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Establish collaborative language to define standards and protocols</td>
<td>Tactic 1</td>
<td>1</td>
<td>March</td>
<td>MUSC Health</td>
<td>Completed</td>
<td>None</td>
</tr>
<tr>
<td>governing technical that conform to existing standards and meet or exceed federal mandates and emphasis interoperability and security</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Complete draft of guidelines for compliance language regarding standards and protocols as it relates to the Hub Agreement with approach to exceptions (exceptions will be included as an Appendix)</td>
<td>Strategy 1</td>
<td>2</td>
<td>March</td>
<td>MUSC Health, Roper St. Francis</td>
<td>Transitioned</td>
<td>IT Workgroup focusing on endpoints and not specific programs</td>
</tr>
<tr>
<td>Create a directory of existing telehealth programs and providers, to include small pilot and grant funded projects.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Complete template draft and populate with data from SCTA IT Workgroup member programs</td>
<td>Strategy 1</td>
<td>3</td>
<td>March</td>
<td>McLeod Health</td>
<td>In Progress</td>
<td>Use case simulations are being developed</td>
</tr>
<tr>
<td>Establish a process for regular ongoing use case simulation “testing” of new systems, processes and protocols across partner sites</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Draft of use case simulations and recommended timeline for testing developed</td>
<td>Strategy 1</td>
<td>4</td>
<td>March</td>
<td>PCC, MUSC Health</td>
<td>In Progress</td>
<td>Survey results pending</td>
</tr>
<tr>
<td>Continue to develop a streamlined credentialing process for hospital-based services</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Survey SC hospitals on credentialing process</td>
<td>Strategy 1</td>
<td>5</td>
<td>March</td>
<td>MUSC Health</td>
<td>Completed</td>
<td>None</td>
</tr>
<tr>
<td>Explore the feasibility of a SCTA tool, to include system monitoring/dashboard, for an automated online help desk for steering support calls, identifying problems and capturing issues</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Make recommendation regarding timeline, budget and implementation process for online help desk platform</td>
<td>Strategy 1</td>
<td>6</td>
<td>March</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Driving Strategy 2

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

**Palmetto Care Connections** has identified "number of connected sites" and "number of encounters" as the key indicators that will be monitored in the four county areas of Bamberg, Barnwell, Allendale and Hampton to assess the impact of telehealth on improving access to care.

The **Diabetes Self-Management Education/Training program** is a collaboration between the Carolinas Center for Medical Excellence, Low Country AHEC, Low Country Health Care Systems, and Palmetto Care Connections. The program has been providing a class each week to patients in Walterboro, Fairfax, and Barnwell. The program has graduated 24 diabetic patients in Q1 of CY2017. In addition, 19 patients have started the program by attending at least one class.

In Q1 of CY2017, patients at **Hampton Regional Medical Center** received 45 telepsychiatry consultations from the **Department of Mental Health** and conducted their first ever virtual endocrinology visit with a **Roper St. Francis** provider.

**MUSC Health** has continued to provide multi-specialty consultations to the four county area through its Virtual Tele Consultation service. In addition, MUSC has been collaborating with community partners to expand access to care through school-based telehealth.

### Barriers/Issues

1) Resistance of providers & administration
2) Limited insurance coverage & reimbursement
3) Low referral rate
4) Low bandwidth

### Proposed Solutions

1) Continue with quarterly visits to promote available telehealth services
2) Continue participation in annual reimbursement forum
3) Continue with quarterly visits to encourage the use of telehealth
4) Work with Spirit &/or local internet provider to increase bandwidth for services

---

**SCTA Strategy 2 - Milestones**

<table>
<thead>
<tr>
<th>Milestone</th>
<th>Strategy</th>
<th>Tactic</th>
<th>Timeline</th>
<th>Champion</th>
<th>Status</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tactic 1: Monitor key indicators of improved access to care delivered via telehealth for the four county areas of Bamberg, Barnwell, Allendale and Hampton identified in 2016 as service development priorities</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Identify key indicators that will be monitored</td>
<td>Strategy 2</td>
<td>1</td>
<td>March</td>
<td>PCC</td>
<td>Completed</td>
<td>None</td>
</tr>
<tr>
<td>Tactic 2: Review the Connect2Health® Tool Force's Mapping Broadband Health in America tool and identify underserved areas of South Carolina</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Conduct thorough review of the Connect2Health® Tool Force's Mapping Broadband Health in America tool for entire state. Report out on underserved areas by county and region.</td>
<td>Strategy 2</td>
<td>2</td>
<td>March</td>
<td>PCC</td>
<td>Deferred to Q2</td>
<td>Review expected to be completed in Q2</td>
</tr>
<tr>
<td>Tactic 3: Monitor clinics to make sure they have the support they need to deliver services and monitor utilization of existing/new service lines</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Quarterly reporting of actual utilization and utilization trends.</td>
<td>Strategy 2</td>
<td>3</td>
<td>March</td>
<td>PCC</td>
<td>Completed</td>
<td>None</td>
</tr>
<tr>
<td>Quarterly reporting of barriers/issues identified and proposed solutions offered.</td>
<td>Strategy 2</td>
<td>3</td>
<td>March</td>
<td>PCC</td>
<td>Completed</td>
<td>None</td>
</tr>
</tbody>
</table>
Driving Strategy 3
Invest in expanding needed specialty and subspecialty capabilities through telehealth

On February 13, 2017, the SCTA regional hubs, representing Greenville Health System, McLeod Health, MUSC Health, and Palmetto Health, met in Columbia, SC to discuss opportunities and challenges to accelerating telehealth service development among the regional hubs. The group discussed foundational best practices that can be shared and applied from MUSC’s telehealth experience (e.g. contracts, SC reimbursement information). However, there are other barriers that will require unique solutions and support within each regional hub due to variability of EHRs and organizational structure. Potential barriers to accelerated service development include:

- Medical director (i.e. physician champion) support for new services
- Communications (internal and external marketing)
- Need for operational personnel/support for facilitating organizational solutions to:
  - Scheduling challenges (hospital-based vs outpatient, EHR variability)
  - Clinical workflows
  - Documentation
  - Billing and coding

The operational leaders decided to create the following SCTA collaborative workgroups:

- School-based health
- Hospital-based operations
- Ambulatory operations
- Direct-to-consumer

Palmetto Health and McLeod Health are leading the exploration of a statewide direct-to-consumer model that ensures high quality and keeps care local and will be working on an initial assessment of current South Carolina utilization and local and national trends of direct-to-consumer care.

### SCTA Strategy 3 - Milestones

<table>
<thead>
<tr>
<th>Tactic</th>
<th>Strategy</th>
<th>Tactic</th>
<th>Timeline</th>
<th>Champion</th>
<th>Status</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tactic 1: Catalyze telehealth service development through regional hubs</td>
<td>Strategy 3</td>
<td>1A</td>
<td>March</td>
<td>MUSC Health</td>
<td>Completed</td>
<td>None</td>
</tr>
<tr>
<td>Subtactic 1A: Establish an equitable approach to providing operational support for the Regional Hubs in order to catalyze the development of high value services</td>
<td>The S/CTA regional hub’s operational leaders will provide an assessment of telehealth service development barriers in South Carolina</td>
<td>Strategy 3</td>
<td>1A</td>
<td>March</td>
<td>MUSC Health</td>
<td>Completed</td>
</tr>
<tr>
<td>Subtactic 1B: Establish service specific collaborative work groups charged with formulating short term objectives and a long term vision for the service in South Carolina</td>
<td>Identify at least two service specific workgroups (e.g. telestroke and school-based health) with recommendations on participants</td>
<td>Strategy 3</td>
<td>1B</td>
<td>March</td>
<td>MUSC Health</td>
<td>Completed</td>
</tr>
<tr>
<td>Subtactic 1C: Establish executive level communications between Regional Hubs to ensure synergies in service development</td>
<td>Review and discuss collaborative service development opportunities on an as-needed basis</td>
<td>Strategy 3</td>
<td>1C</td>
<td>Ongoing</td>
<td>MUSC Health, Palmetto Health, McLeod Health, GHS</td>
<td>Ongoing</td>
</tr>
<tr>
<td>Tactic 4: Enhance access to care through direct connections with patients and non-traditional clinical settings</td>
<td>Subtactic 4B: Explore feasibility of a statewide direct-to-consumer model that ensures high quality and keeps care local</td>
<td>Identify stakeholders to participate in exploration of a SCTA direct-to-consumer model</td>
<td>Strategy 3</td>
<td>4B</td>
<td>March</td>
<td>Palmetto Health, McLeod Health</td>
</tr>
</tbody>
</table>
Driving Strategy 4
Conduct statewide education, training and promotion to providers and the public to accelerate and spread adoption of telehealth.

Under the guidance of Office for Telehealth Education, the South Carolina Telehealth Alliance (SCTA) telehealth education workgroup is meeting monthly to work on the development and dissemination of telehealth curriculum and professional development modules.

Membership includes the following partners:

Beaufort Memorial Hospital
Edward Via College of Osteopathic Medicine
Greenville Health System
McLeod Health
MUSC Health
Palmetto Care Connections
Palmetto Health - USC Medical Group
SC AHEC
SC Department of Health and Human Services
SC Department of Mental Health
Tidelands Health

The working group is in the process of inventorying current health professions student and provider curriculum related to telehealth education. Academic and community partners are identifying areas where existing activities can be shared and expanded upon through collaboration. In addition, a rural providers sub-group has been formed to initiate the planning process for dissemination of education outside of the academic health systems.

SCTA Strategy 4 - Milestones

<table>
<thead>
<tr>
<th>Milestone</th>
<th>Strategy</th>
<th>Tactic</th>
<th>Timeline</th>
<th>Champion</th>
<th>Status</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tactic 1: Develop an overall telehealth knowledge dissemination plan to SCTA institutions with a mechanism to provide introductory knowledge of telehealth to their learners and providers</td>
<td>Strategy 4</td>
<td>1</td>
<td>March</td>
<td>SC AHEC</td>
<td>Completed</td>
<td>None</td>
</tr>
<tr>
<td>Engage health care provider training institutions, beginning the with the four medical schools, to determine their readiness and preferred format for the incorporation of introductory knowledge into their existing curriculums.</td>
<td>Strategy 4</td>
<td>1</td>
<td>March</td>
<td>SC AHEC</td>
<td>Completed</td>
<td>None</td>
</tr>
<tr>
<td>Tactic 3: Establish mechanism to ensure telehealth knowledge and training is disseminated to rural sites</td>
<td>Inventory of existing training materials for rural providers</td>
<td>Strategy 4</td>
<td>3</td>
<td>March</td>
<td>PCC</td>
<td>In Progress</td>
</tr>
</tbody>
</table>
Driving Strategy 5

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

Membership Model
A membership model is being developed and will be subjected to review by the SCTA Advisory Council to effectively reach telehealth stakeholders at all levels: providers, patients, employers, payers, educators, legislators, etc. Benefits will be delineated for stakeholders providing a telehealth service of program in South Carolina.

Operating Procedures Manual
The SCTA Advisory Council has reviewed the SCTA Advisory Council Operating Procedures manual. The manual outlines the charter of the Advisory Council, roles and responsibilities of its members, and establishes procedures for reviewing budget and contractual progress that support the SCTA strategic plan.

SCTA Strategy 5 - Milestones

<table>
<thead>
<tr>
<th>Milestone</th>
<th>Strategy</th>
<th>Tactic</th>
<th>Timeline</th>
<th>Champion</th>
<th>Status</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tactic 1: Introduce formal membership model with defined benefits and responsibilities for participating in the SCTA</td>
<td>Strategy 5</td>
<td>1</td>
<td>March</td>
<td>SCTA - Growth and Sustainability Specialist</td>
<td>In Progress</td>
<td>SCTA Adv. Council to provide feedback on membership model</td>
</tr>
<tr>
<td>Draft membership document(s) with defined benefits and responsibilities delineated</td>
<td>Strategy 5</td>
<td>1</td>
<td>March</td>
<td>SCTA - Growth and Sustainability Specialist</td>
<td>In Progress</td>
<td>SCTA Adv. Council to provide feedback on membership model</td>
</tr>
<tr>
<td>Tactic 2: Develop a strategy for streamlining communications within the SCTA with a focus on Advisory Council procedures</td>
<td>Strategy 5</td>
<td>2</td>
<td>March</td>
<td>SCTA - Growth and Sustainability Specialist</td>
<td>Completed</td>
<td>None</td>
</tr>
<tr>
<td>Operational Procedures document for SCTA Advisory Council available for review</td>
<td>Strategy 5</td>
<td>2</td>
<td>March</td>
<td>SCTA - Growth and Sustainability Specialist</td>
<td>Completed</td>
<td>None</td>
</tr>
</tbody>
</table>
Driving Strategy 6

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

The Content Advisory Team, led by SC ETV, has been working to develop a draft strategic marketing plan that leverages existing media assets created by SC ETV--these assets have already been disseminated among members of the committee to promote in respective regional markets. An expansion of the committee extends beyond the telehealth personnel to regional hub marketing departments as outlined in the forthcoming marketing plan.

**Notable Q1 Accomplishments**

- The first Annual Telehealth Awareness Week was authorized to take place every March 20-24 by SC Governor Henry McMaster. A copy of the resolution can be found in the appendices.
- The 5th Annual Telehealth Summit of SC was held on March 28-30, 2017.

### SCTA Strategy 6A - Milestones

<table>
<thead>
<tr>
<th>Milestone</th>
<th>Strategy</th>
<th>Tactic</th>
<th>Timeline</th>
<th>Champion</th>
<th>Status</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tactic 1: Promote awareness of SCTA and SCTA resources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Develop draft strategic marketing plan</td>
<td>Strategy 6A</td>
<td>1</td>
<td>March</td>
<td>SCETV</td>
<td>Completed</td>
<td>None</td>
</tr>
<tr>
<td>Review composition of existing content advisory group and identify and invite representation from additional key strategic partners in order to increase coordination around marketing efforts</td>
<td>Strategy 6A</td>
<td>1</td>
<td>March</td>
<td>SCETV</td>
<td>Completed</td>
<td>None</td>
</tr>
<tr>
<td>Tactic 2: Disseminate new telehealth information, data, resources and success stories within the state of South Carolina and beyond</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Leverage existing SCTA reports (Annual Report, Mid-Year Report and Quarterly Report) as a mechanism for disseminating new information, data, resources and success stories</td>
<td>Strategy 6A</td>
<td>2</td>
<td>March</td>
<td>SCTA - Telehealth Growth and Sustainability Specialist</td>
<td>Ongoing</td>
<td>None</td>
</tr>
<tr>
<td>Establish a standing agenda item for monthly content advisory team meetings</td>
<td>Strategy 6A</td>
<td>2</td>
<td>March</td>
<td>SCTA - Telehealth Growth and Sustainability Specialist</td>
<td>Completed</td>
<td>None</td>
</tr>
</tbody>
</table>
Driving Strategy 6
Demonstrate to legislators, payers, providers and the public, the impact of telehealth in improving access, quality and affordability

Reimbursement Task Force
A Provider/Payer Reimbursement Forum was held on February 28, 2017 at the SC Hospital Association in Columbia, SC to identify priority areas and discuss reimbursement policies for telehealth that can feasibly be developed in South Carolina. Feedback has been compiled and will be gleaned from meetings with statewide payers to inform new recommendations for alternative telehealth policies.

Payer CPT search Portal
The SCTA has developed a new tool that allows users to search for reimbursable services provided via telemedicine. The data that feeds this tool is continually being compiled as new policies are created.

SCTA Strategy 6B - Milestones

<table>
<thead>
<tr>
<th>Milestone</th>
<th>Strategy</th>
<th>Tactic</th>
<th>Timeline</th>
<th>Champion</th>
<th>Status</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tactic 1: Work with payers to enhance telehealth reimbursement policies by coordinating recommendations across organizations and advocating for consistent policies across CPT codes</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Completed, None</td>
<td></td>
</tr>
<tr>
<td>Plan developed for bringing providers and payers together on a regular basis to identify priority areas and collaboratively discuss reimbursement policies for telehealth in SC</td>
<td>Strategy 6B</td>
<td>1</td>
<td>March</td>
<td>SCTA - Telehealth Growth and Sustainability Specialist</td>
<td>Completed, None</td>
<td></td>
</tr>
<tr>
<td>Template developed for putting the recommended reimbursement policies in writing that identifies core questions and/or data points needed to facilitate the discussion with payers</td>
<td>Strategy 6B</td>
<td>1</td>
<td>March</td>
<td>SCTA - Telehealth Growth and Sustainability Specialist</td>
<td>Completed, None</td>
<td></td>
</tr>
<tr>
<td>Tactic 2: Educate providers on best practices, lessons learned and success stories pertaining to billing and reimbursement for telehealth</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>In Progress</td>
<td>Pending feedback by Advisory Council</td>
</tr>
<tr>
<td>Fact sheet with standardized terminology and definitions pertaining to telehealth reimbursement developed and made available to SCTA members and the general public</td>
<td>Strategy 6B</td>
<td>2</td>
<td>March</td>
<td>PCC, SCTA - Telehealth Growth and Sustainability Specialist</td>
<td>In Progress</td>
<td></td>
</tr>
<tr>
<td>Tactic 3: Implement a plan to collect data for payers based on payer-identified metrics [e.g., patient/ population health outcomes, cost savings/ROI] that are most important for them in making policy decisions pertaining to reimbursement and the development of alternative payment models</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Payer outreach</td>
<td>ongoing</td>
</tr>
<tr>
<td>Draft approved list of data requirements for telehealth programs</td>
<td>Strategy 6B</td>
<td>3</td>
<td>March</td>
<td>SCTA - Telehealth Growth and Sustainability Specialist</td>
<td>In Progress</td>
<td></td>
</tr>
</tbody>
</table>
Regional Hub Program Updates

South Carolina has a unique collaborative telehealth network that serves as a model for the nation. Statewide provider, connectivity and advocacy organizations are deeply involved in providing access to healthcare via telehealth to enhance this network. These strategic partners provide invaluable experience in moving the SCTA strategic plan forward in accordance with regional and statewide needs. Since the end of calendar year 2016, the SCTA regional hubs have collaborated to advance the discussion on telehealth service development and address evolving needs of communities across the state. Providers are cognizant of healthcare needs in the state but realize the importance of keeping care local.

“It's better for the patients and their families to get their care locally.”

~ Rick Foster, MD
Greenville Health System

Greenville Health System has saved approximately 106 hours on 424 exams through their SmartExam direct-to-consumer visit platform. The average wait time was 11.7 minutes, with care time only lasting an average of 4.4 minutes. Patients believe that they were able to save nearly 3 hours by using the SmartExam application.

As part of a SCTA Telehealth Implementation and Evaluation grant, a Pediatric GI specialist provided 11 follow-up consults for eosinophilic esophagitis. One hundred percent of patients treated were satisfied with the mode of treatment. Additionally, GHS’s system served patients and expanded programs and other services that include: telestroke (86 consults); neo-natal resuscitation (1 new location) and tele-psych (6 new locations in GHS EDs).

Where would you have gone instead of SmartExam?

- Appointment: 44%
- Urgent Care: 29%
- Retail Clinic: 9%
- Walk in (PCP): 10%
- Emer. Dept.: 2%
- Other: 6%

Time (in minutes) before provider begins review: 7.2
Palmetto Health - USC Medical Group provides a unique health education program during after-school programs at Gadsden, Hopkins and Webber Elementary Schools using telehealth. Each program is designed to empower students in the lower Richland community about the ways to live healthier lives.

Between January and March 2017, 171 clinicians and support staff attended teleconferences as part of the South Carolina Hepatitis C Telehealth Initiative run by Dr. Divya Ahuja, an infectious disease physician at Palmetto Health – USC Medical Group. A total of twenty-five (25) patient cases were discussed. Representatives from twenty-one provider organizations in South Carolina were present at the teleconferences. While these efforts are focused on SC, clinicians from Georgia, North Carolina, Tennessee, Florida, Washington, D.C., Arizona, Washington and Texas attended these teleconferences.

Telesstroke at Palmetto Health (Baptist, Baptist-Parkridge, Tuomey)
- 94 Telebats
- 10 tPAs
- 64 minutes (avg. DTN time)

SmartExam - Direct-to-Consumer telehealth
- Patients that received care: 200
- Patient queue time: 10m 48s
- Provider care time: 6m 19s
- Total care time: 16m 38s

SmartExam - Top Care Models used
1. Cough/cold/allergy
2. Bladder infection (UTI)
3. Sinus pain or pressure

365 Total number of touchpoints
McLeod Sports Medicine is working with physicians specializing in concussion treatment to incorporate the use of telehealth video conferencing for follow-up consultations with a focus on rural areas such as Johnsonville, Mullins, Lamar, Cheraw, Chesterfield, Marlboro and Dillon. Fifty-one percent of the students are from these rural areas. The remaining 49 percent are from Florence and surrounding communities. McLeod Health has built a solid reputation and relationship with rural high schools and maintains contracts with 23 schools in the region.

**How the program works**
The initial visit will be conducted in a physician’s office with follow-up visits conducted at rural high schools using mobile telemedicine equipment. Certified Athletic Trainers will work closely with physicians to receive training on how best to assist with the follow-up to ensure assessments are as effective and comprehensive as they would be if they were in the office setting. Additionally, Athletic Trainers will conduct preliminary testing with each of the student athletes and provide that data to the physician for review and preparation prior to the telehealth visit to make the visit both efficient and highly productive.
MUSC Health

New Partners

Coastal Carolina went live with teleneurology services.

Hilton Head went live with telesroke and teleneurology services.

Sandpiper Rehabilitation and Nursing Center will begin receiving tele-urgent care services this summer to reduce avoidable readmissions to the emergency department.

McLeod Clarendon will be joining MUSC Health’s teleneurology network with expected go-live in late May.

Vibra Hospital of Charleston went live with tele-EEG services and has plans to expand to teleneurology and other specialty services.

Carolina Health Centers has signed an agreement to bring multi-specialty telehealth services to its 12 practice locations in Saluda, Greenwood, McCormick, Abbeville, and Laurens counties.

School-Based Telehealth

- Met with Molly Spearman, Superintendent of Education, to discuss and further identify high priority South Carolina schools
- Collaborating with Beaufort Jasper Hampton Comprehensive Health Services to layer telehealth on 5 existing school-based health centers in the Beaufort County School District
- Kelli Garber, Center for Telehealth Lead Nurse Practitioner, was selected to participate in the National Association of Pediatric Nurse Practitioners (NAPNAP) Advocacy Scholars Program and had the opportunity to advocate on Capitol Hill in support of children’s health coverage and telehealth
- Dr. Kathryn Cristaldi, Medical Director, School-Based Health, was named the American Academy of Pediatrics (AAP) Section on Telehealth Care representative to the Pediatric Academic Society Program Committee

Telestroke: Best Door-To-Needle Times

- January - McLeod Regional Medical Center
- February - Piedmont Medical Center
- March - Tidelands Waccamaw

MUSC Health Telestroke Network has conducted over 10,000 consults since inception
Statewide Telehealth Publications


Telehealth Alliance

An unprecedented collaboration that is a model for the nation.