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# SCTA Quarterly Report

## CY23 Quarter 2

Progress Achieved on the CY2023 Strategic Plan  
April - June 2023

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## South Carolina Telehealth Alliance (SCTA)

### CY2023 Q2 Report

### Executive Summary

South Carolina Telehealth Alliance partners remained engaged during the second quarter of calendar year 2023, (April 1 – June 30), continuing to fulfill strategic tactics outlined in the [CY23 SCTA Statewide Strategic Plan](#). The [2022 SCTA Annual Report](#) and SCETV's [Telehealth By The Numbers](#) video were widely distributed during the quarter to various South Carolina stakeholders to showcase the telehealth achievements in our state.

[House Bill 4159: Telehealth and Telemedicine Modernization Act](#) unanimously passed through the House of Representatives during CY23Q2 and will advance to the SC Senate's Medical Affairs Committee during the next legislative session.

The Federal Public Health Emergency (PHE) came to an end during the quarter on May 11th, 2023. As a result, the SCTA continued to serve as a resource to folks navigating telehealth changes and flexibilities through communications such as the SCTA newsletter, website, and social media.

SCTA partners look forward to CY23Q3, with plans to hold South Carolina's 7<sup>th</sup> Annual Telehealth Awareness Week, September 17-23, 2023. In alignment with the American Telemedicine Association's (ATA) [National Telehealth Awareness Week](#), SCTA partners will have the opportunity to reflect upon the impact of telehealth both in SC and nationally.

The following report provides additional details on the above accomplishments and others from **CY23Q2**.

# SOUTH CAROLINA Telehealth ALLIANCE

South Carolina Telehealth Alliance (SCTA)  
CY23Q2 Report

## **SCTA Statewide Strategy**

By fulfilling their outlined clinical and support tactics, SCTA partners continued to work toward advancing the [CY23 SCTA Statewide Strategic Plan](#) during CY23Q2.

SCTA leadership was excited to share its new partnership with a data collection software company. This web-based, password-protected software will allow SCTA partners to update their organization's telehealth utilization and geographical sites throughout the year to enhance data metric alignment, and increase capabilities such as mapping. The SCTA leadership team plans to schedule time with each partner during CY23Q3 to walk through the onboarding process with the goal of full implementation by CY23Q4.

## **Sustainability and Reimbursement Advocacy**

The SCTA, alongside the SC Medical Association and SC Hospital Association, introduced [House Bill 4159: Telehealth and Telemedicine Modernization Act](#) during CY23Q1 outlining the following goals:

1. **Introduce a new definition of “telehealth”** which includes all provider types, not only MDs and DOs, who are essential to a patient's care team in providing increased access to healthcare.
2. **Modernize telehealth prescribing language** to ensure SC patients can access life-saving treatment to combat the opioid epidemic in our state while maintaining important safeguards. Prescriptions of Schedule II and III narcotics are not permitted when a physician-patient relationship is established solely via telemedicine except when/for:
  - Patient is in hospital being treated by a practitioner
  - When buprenorphine is prescribed for opioid use disorder
  - End of life care, and
  - Other exceptions authorized by the board

This bill unanimously passed through the House of Representatives during CY23Q2 and will be introduced to the SC Senate's Medical Affairs Committee in 2024 during the next legislative session. The SCTA team continues to work alongside SC legislators and payers to align efforts and further telehealth sustainability in South Carolina. Initiatives to assess South Carolina's telehealth coverage and payment landscape will be conducted by SCTA partners in the coming quarters to ensure success and identify future priorities.

## **SCTA Supported Technologies and Platforms**

The [SCTA's premium instance of Doxy.Me](#), a HIPAA-compliant telehealth platform, remains a free offering to all SC providers for the foreseeable future. During CY23Q2, 27 new providers from 10 different counties in the state joined the instance, increasing access to care for their patients through telehealth.

**Medical University of South Carolina**  
Telehealth Service Updates and Progress  
April – June 2023

**Service Extension**

MUSC's Regional Telehealth Clinics expanded during CY23Q2, offering several new services. Head and neck oncology, general neurology, and headache services were introduced during the quarter, with patient appointments already scheduled. The increasing list of specialties offered via telehealth help extend the reach of services that would otherwise be limited by barriers to care such as travel, availability, etc.

Through its tiered provider care, the Virtual Specialty Program offers patients quick access to specialty care. Currently, the program offers endocrinology and rheumatology services, with additional specialties in the pipeline.

**Hospital Support**

During CY23Q2, inpatient cardiology consultation services were launched at MUSC Health Chester Medical Center, with care provided by MUSC Health Columbia Medical Center Downtown providers. Tele-neonatal rounding services expanded to MUSC Health – Orangeburg, offering expert care to babies in the nursery. A designated telehealth presenter was hired and trained to support hospital-based telehealth services at MUSC Health Kershaw Medical Center and has already proven to have a positive impact.

MUSC's tele-ICU team sought opportunities for enhancements through the ICU Innovations program which provides continued training and education to its providers, and through personalized resources aligned with critical care needs for MUSC tele-ICU sites.

The tele-neuroscience operations team began a partnership with the Lee County EMS, successfully implementing tele-EMS services on five trucks throughout the county. These trucks have been outfitted with the appropriate technology to allow neurology providers to complete stroke consultations with patients via telehealth while in transit to the local emergency department.

**Convenient Care**

Utilization for MUSC's Virtual Urgent Care (VUC) program remained steady throughout the quarter, with nearly 12,000 patient visits completed. As the summer months approach, the VUC team will focus on continued collaboration with college health partners to promote virtual care offerings to incoming and returning students. The VUC team also plans to utilize CY23Q3 to identify new goals, tactics, and metrics, with a specific focus on reaching underserved regions of the state.

**Primary Care Support**

During CY23Q2, the primary care support team at MUSC implemented the psychiatric collaborative care model (CoCM) pilot program at four MUSC primary care locations in Lexington, Lake City, Florence, and Lancaster. The CoCM program leverages a behavioral health care manager to support primary care practices alongside a consulting psychiatrist. The program also uses an app/web-based platform to support patient engagement and education.

Closing MUSC's fiscal year, the outpatient teleconsultation psychiatry and nutrition programs experienced a record number of consults compared to years prior. Integrated with the patient's primary care regimen, these programs continue to serve as a valuable resource to increase access and support local health care infrastructure.

## **Health Equity**

MUSC's school-based telehealth team wrapped up a busy school year during the quarter, with increased utilization across the state. During the upcoming summer months, the team will prepare for the implementation of upgraded technology and equipment for the 2023 school year. This smaller footprint equipment and advanced technology will enhance the overall telehealth experience for both the school nurse and student.

MUSC's statewide school-based behavioral health initiative continued to progress during the quarter, completing final testing of a customized telehealth platform. As a result of successful assessments, the platform is scheduled to launch in schools during CY23Q3 for both physical and behavioral health use cases. Hiring and credentialing of providers for the program by the MUSC Institute of Psychiatry will continue into Q3.

The [Mom's IMPACTT](#) program at MUSC continued to improve access to maternal mental health and substance use disorder care through telehealth. As of CY23Q2, the program has reached patients in 45 of the 46 counties in South Carolina with plans to soon fill the gap in Edgefield County.

MUSC's [Telehealth for the Homeless](#) program completed its EHR integration to help capture and understand program utilization. Looking toward CY23Q3, the program plans to focus its expansion efforts on children experiencing homelessness, and enhancing primary care services to include preventative cancer screenings including breast, lung, and cervical cancer.

# **McLeod Health**

## The Choice for Medical Excellence

### **McLeod Health Telehealth Service Updates and Progress**

**April - June 2023**

#### **Service Extension**

**Epic MyChart:** McLeod Health is excited to announce the launch of a system-wide campaign to educate patients on the benefits of accessing their health information via Epic MyChart. Epic MyChart will increase access to care and convenience in scheduling for patients in several rural SC counties and throughout the Pee Dee region. In addition to education, the campaign will assist patients in signing up for their MyChart account and assist with digital literacy in using the application.

#### **Hospital Support**

**ED & Inpatient TelePsychiatry Consultations:** The McLeod Health acute care teams continue to expand the use of virtual care modalities to consult and treat patients at our hospitals where specialty care services are not available onsite 24/7. The Inpatient Telepsychiatry program has proven to be an invaluable service for McLeod Regional Medical Center and has recently been expanded to McLeod Clarendon. This program enables our hospitals to treat patients appropriately and promptly. The program includes on-demand evaluations, risk assessments, diagnoses, and treatment planning. The benefits of this program include:

- Improved quality of care through psychiatric diagnostic evaluations, including involuntary hold evaluations
- Decreases length of stay
- Creates prompt initiation of treatment and appropriate referral
- Reduces unnecessary hospital admissions while improving ED throughput
- Improves coordination of care between psychiatrists and onsite providers

#### **Convenient Care**

**Direct-to-Consumer Program:** McLeod Health continues to experience growth in the number of visits and high patient satisfaction with the services this program provides. The program is easily accessible via website or mobile app. The Convenient Care program helps provide affordable and easily accessible care to vulnerable populations that can struggle with access and transportation.

#### **Primary Care Support**

**Maternal Fetal Monitoring (MFM):** As an SCTA HUB, we enjoy partnerships with other HUBS while our patients get the benefit of receiving quick, convenient, and quality care from trusted South Carolina providers. The MFM Program is one such partnership. MFM Specialists with MUSC provide education, genetic counseling, and ultrasounds to high-risk mothers throughout their pregnancy. McLeod Health has worked with MUSC to offer this program since 2014 and it continues to provide patients with a better understanding of their special needs during pregnancy and improved outcomes for expectant mothers.

#### **Health Equity**

**Forensic Nurse Examiner Program:** McLeod Health is excited to be expanding our Forensic Nurse Examiner program with the addition of SDFI Telemedicine technology. This program serves the most vulnerable populations in our communities. It staffed with nurses who are sexual assault nurse examiner (SANE) certified. The SDFI technology enables

our nurses to connect asynchronously with law enforcement in a secure and encrypted way to provide a patient's protected health information (PHI). The patient's medical and legal photodocumentaries can be used to empower law enforcement and the domestic violence service community with a coordinated response to violent crimes in our state and communities. We expect the positive impact of this program to be far reaching. It provides important aspects to caring for and healing patients, as well as, addressing crime.

**School Based Care:** McLeod Health is re-launching our School Based Care Telehealth programs for FY24. The Telehealth team is excited to announce the programs will encompass an expansion of services to include onsite scheduled appointments for the treatment of chronic care conditions. We anticipate this addition to be a huge benefit to vulnerable students with chronic conditions. This program improves and expands our students' ability to access health care, to become healthier and to stay focused on learning.





Prisma Health  
Telehealth Service Updates and Progress  
Q2 April – July 2023

**Service Extension**

Prisma Health continues to support and broaden the use of core virtual care modalities in our ambulatory settings to extend the reach of services. This quarter our ambulatory practices across the system have seen over 41K virtual appointments. Currently we have started to expand WE CHAT for children, over the 85th percentile for weight category, focusing on pediatric wellness and engaging them with technology. Our pediatric team, has virtual champion who is a primary provider that is currently added two more out-of-state licenses for a total now of six including SC. The reason for the out of state licenses is to fulfill the request of families in popular vacation states and cover college students in surrounding states allowing them to keep within the Prisma Health network.

The Prisma Health behavioral health group has been working with Program of All-Inclusive Care for the Elderly (PACE) system to provide this population with access to virtual sessions two days a week. This has been piloted for our upstate region this quarter and now the work has begun to provide the same offerings for midlands region PACE programs.

**Hospital Support**

Prisma Health launched a Virtual Care Partners program to extend the care team for inpatients at select rural facilities. The program includes a virtual nurse team member responsible for admission, discharge, and patient education tasks. The program pilot is now complete with successful patient outcomes, expansion of specialty groups for consults to help prevent patient transfers, reduce length of stay, and improve staff satisfaction towards team approach to patient care. We are progressing forward to outfit two additional medical units in our rural hospital.

Our new partnership with Mayo Clinic provides tele-neurology sessions. These offerings extend past the emergency/labor and delivery sessions enabling consultation any time during the infants stay. As well as being available virtually for the staff until the transport team arrives to provide a warm handoff. Onboarding of our pediatric residents at Oconee, now includes training on the enterprise virtual platform to be a tele-presenter on the patient side to provide support during times of reduced staffing. The virtual platform also enables pediatric infectious disease consults and diabetic education for inpatient services. The Intuitive Hub platform has been taken through our approval process and the project is kicking off for next quarter at Toumey. This platform will support collaboration/teaching during surgical procedures with the Da Vinci robot.

Prisma Health continues to have steady utilization of telehealth for specialty care including complex pediatric care, pulmonology, pain management, infectious disease, neurology, and intensive care.

**Convenient Care**

Prisma Health's initiatives supporting convenient care are centered around primary solutions including clinical chatbots, outreach, eVisits and wayfinding embedded in patient reminders. This past quarter the work has been initiated and is nearly complete to embed the eVisits into the systems EMR and to enable all the providers to covert eVisits into virtual visits to ensure improved examinations. This effort will reduce the need to send a patient to an urgent care center due to lack of visibility to the patient. Our eVisits continue to be a popular offering for Prisma Health patients with a 50% return customer rate and 98% patient satisfaction rate, this new

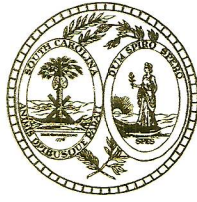
feature will continue improve patient satisfaction. Our systems wayfinding platform has now been integrated into our texting platform for patient reminders. The platform sends the patient directions to locations and 3-D navigations once they are on-site to the provider office. This is extremely useful for our patients seeking care from our medical office buildings and ambulatory surgery centers.

### **Primary Care Support**

Prisma Health offers a variety of services for chronic condition management and remote patient monitoring. Prisma Health continues to support approximately 10,000 patients under some variation of ambulatory remote patient monitoring services allowing us to better support and coordinate care outside the direct hospital system. Our hospital at home program has expanded into our Columbia market to help keep patients out of the inpatient setting by enabling care in their homes.

### **Health Equity**

Prisma Health continues to promote health equity by supporting virtual care initiatives at schools, community outreach centers and satellite clinics for specialty care. Virtual Athletic trainer program has expanded for coverage of summer sports with community centers for the Columbia market. This program allows patients to leverage our customer relationship platform utilizing a QR-code and be setup for a virtual visit with our athletic trainers within minutes. Our initiatives in schools are ramping back up, equipment has been updated and distribution back to the schools begins the week of July 24<sup>th</sup>. Training/re-fresher training will occur on August 2<sup>nd</sup>. The discovery process is under way to test the possibility of adding MyChart visits, utilizing the school Chromebooks if the school tele-presenter is present for certain ages.



# State of South Carolina

## Department of Mental Health

### **MENTAL HEALTH COMMISSION:**

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Acting State Director

### South Carolina Department of Mental Health Telehealth Service Updates and Progress Q2 Calendar Year 2023, July 2023

#### **Service Extension**

DMH's Community Telepsychiatry program helps increase access to mental healthcare by providing telepsychiatry services through 60 Mental Health Centers and satellite clinics statewide. DMH has helped patients in the state access specialized mental health care services, including child and adolescent psychiatry, since 2013.

In the second quarter of 2023, over 17,500 services, which is approximately 42% of overall mental health services provided by MDs and APRNs, are telepsychiatry. DMH's Community Telepsychiatry program serves patients in a wide variety of settings from Community Mental Health Centers and satellite clinics to schools and RV mobile clinics.

#### **Hospital Support**

DMH's Emergency Department (ED) Telepsychiatry program has 26 hospital partners across the state and is in the process of adding new partners. In Q2 of calendar year 2023, the ED Telepsychiatry program provided over 1,900 consults for patients in EDs statewide. Psychiatric care is available through the ED program 17 hours per day, 364 days per year.

#### **Primary Care Support**

DMH's Integrated Care team was awarded HRSA grant (American Rescue Plan Act – Pediatric Mental Health Care Access New Area Expansion) to develop the state's first child psychiatry access network to support the provision of mental health care by primary care providers. The network has been named the Youth Access to Psychiatry Program (YAP-P). The goal is to provide a continuum of supports to SC primary care providers who see children and youth ages 0-21 years. YAP-P provides resources to practices and providers including:

- a provider-to-provider consult line which connects primary care providers with child and adolescent psychiatrists to get guidance on how to manage specific cases
- patient and family education materials about psychotropic medications and other mental health topics

- clinical training and education to improve knowledge of mental and behavioral health conditions
- access to an online closed-loop care referral system to be able to connect patients with community resources and which also contains the registry used to track YAP-P cases for the provider to provider consult line

Funding began in the fall of 2021 for the 5-year grant. YAP-P also received a \$300,000 expansion award in the fall of 2022 from HRSA to look at expanding the network to include school-based health centers (SBHCs).

### **Health Equity**

DMH is partnering with the SC Department of Juvenile Justice (DJJ) to provide child telepsychiatry services to DJJ minors with mental health concerns in secure facilities. This partnership helps address the mental health needs of children involved with the juvenile justice system. To facilitate evaluation and treatment, there is an APRN onsite to support the DMH child and adolescent psychiatrist.

In addition, DMH launched an interagency consultation service with the SC Department of Social Services (DSS) and DJJ to furnish telepsychiatry to at risk children and adolescents. Children referred by DJJ are not located in secure facilities. This innovative collaboration among state agencies promotes cooperative working relationships to make the best use of state resources for a high needs population.



South Carolina AHEC Program Office  
Medical University of South Carolina  
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July 28, 2023

The SC Area Health Education Consortium has focused on ensuring up-to-date telehealth education resources are available on-demand for all health professionals and future health professionals in South Carolina. SCTA funding has helped to support SC AHEC's Office for Telehealth Education in developing and supporting online telehealth courses and seven additional telehealth programs including Palmetto Care Connection's Webinar Wednesday and SC AHEC developed programming available for free for health professionals and students in South Carolina via the [SC AHEC online learning portal](#).

The educational programs listed below support the Supporting Tactical Goal, Education and Training within the CY2023 SCTA Statewide Strategic Plan.

SC AHEC Course Registrations and Course Completers  
(Date range 4/1/2023-6/30/2023)

1. [Telehealth](#) for High School and College Students – 3 New Registrations, **2 Completers**
2. [Telehealth Presenter Certification](#) – 62 New Registrations, **51 Completers**
3. [Telemental Health](#) – 24 New Registrations, **18 Completers**
4. [Foundations of Telehealth](#) – 117 New Registrations, **112 Completers**
5. [Telehealth Implementation](#) – 11 New Registrations, **6 Completers**

**156 Individuals Successful Competed a telehealth module** during April-June 2023.



July 24, 2023

South Carolina ETV  
Calendar Year 2023 Quarter 2 Report  
South Carolina Telehealth Alliance

During the second quarter of 2023 the *SCETV Telehealth* Team published three new videos that highlighted the important telehealth work happening throughout every region of our state.

Published in April, a video featuring the Horry and Georgetown Boards of Disabilities demonstrated the crucial need for telehealth services for people with disabilities, who face a disproportionate rate of dependency on the Emergency Department. When the Public Health Emergency expired in May, we reported on how that expiration would affect telehealth access and what it meant for the nation moving forward. Later in the quarter, a video spotlighting the benefits of virtual counseling featured the tender story of a woman who overcame trauma through mental health counseling via telehealth.

In addition, we conducted interviews for five new videos and collaborated with SCTA partners to plan for upcoming annual events including Telehealth Awareness Week and the Annual Summit of South Carolina.

List of telehealth features:

**Video**

- [Learn how telehealth is used by local boards of disabilities and special needs](#)
- [The End of the Public Health Emergency and Its Impact on Telehealth](#)
- [Virtual Counseling Helps Mother Overcome Trauma](#)

This content is shared via television, email newsletters, multiple websites, and social media platforms.

**Social Media spotlight:** The South Carolina Telehealth Alliance Facebook has three new followers from Q1 2023. Our highest reaching post was an exciting Save the Date announcement about the annual Summit of South Carolina. A post about our video on telehealth for the Georgetown and Horry County Boards of Disabilities garnered the most reactions. On Twitter, the SCTA page has 883 followers, up an additional 6 followers from Q1 and received 347 tweet impressions.

**In Your Inbox:** The SCTA's monthly newsletter held an average open rate of 30% for Q2, down 5% compared to Q1. The click rate was 6.1% which is up 83% from last quarter.

# CENTER FOR RURAL AND PRIMARY HEALTHCARE

*from Evidence to Impact*

## **SCTA CY23 Q2 Report** **SC Center for Rural and Primary Healthcare**

### **Telehealth Hubs**

The CRPH community team continues to meet with library staff regarding digital inclusion initiatives, CRPH is specifically working with libraries in Marlboro and Orangeburg counties.

CRPH is working in coordination with Palmetto Care Connections in these two counties to develop a plan for integrating telehealth services into the library systems. Orangeburg is the most ready for telehealth services. Their director is very engaged and interested in upfitting three branches to provide telehealth services. RMC (MUSC was in the process of taking over running the health system) staff also committed to being an active participant and providing the clinical providers to deliver services. The CRPH community team continues to work with Orangeburg to identify and execute any upfitting of selected space and provide resources. Marlboro expressed some initial concern but after additional discussion is now ready to start discussions with PCC and CareSouth regarding the locations and specifics related to delivering telehealth services.

The CRPH community team, along with partners at the University of Virginia, Augusta University, and the University of North Carolina-Greensboro, are concluding their literature scoping around Libraries and Health with a specific interest in telehealth and libraries. This review has been used to inform this work of libraries as alternate access points of care. A graduate student assistant in the School of Information Sciences at the University of South Carolina assisted with elements of the first draft of a white paper but is now being handled by the Community Team.

This summer, we have been conducting qualitative research on library patrons' attitudes and perceptions regarding accessing telehealth through libraries. This work is being led by a NIH Summer Fellow, who is also drafting a paper with the findings. Additionally, learning from this work will be used in developing our pilot locations and build an implementation guide on what would make a location successful.

### **Telehealth and Primary Health Workgroup**

The Center in partnership with PCC has convened the SCTA Primary Care and Rural Health Workgroup. To explore learning needs and resources necessary to supporting the growth and optimization of telehealth by primary care and rural practices. The Workgroup is comprised of multiple stakeholders: SCORH, SCPHA, SC AHEC, Prisma, SC CRPH, SCTA, Clemson, and Tandem. The group has had two meetings and will continue to meet monthly through 2023 and move towards quarterly in 2024. Areas identified as needing focused attention include reimbursement/coverage, operationalizing telehealth, provider acceptance, patient acceptance, technology limitations and competitors (i.e., Amazon). These issues will be explored at subsequent meetings including planning for educational/learning needs. Additionally, a survey is being developed to be sent out to primary and rural health providers to assess current practices, and reimbursement concerns.



### **Telehealth Awareness and Education**

In Q2, PCC hosted one webinar, Managing Pediatric Obesity via Telehealth. There were 69 registrants and 37 attendees. All registrants have access to the webinar recording.

Educational events during Telehealth Awareness Week are being planned such as Telehealth Tech Talks (in person community event) and mini webinars to promote telehealth utilization and decrease barriers to care. The 11<sup>th</sup> Annual Telehealth Summit of SC is also in the planning phase and scheduled on December 4-6, in Greenville, SC.

PCC co-chairs the Rural and Primary Care Telehealth Workgroup with the SC Center for Rural and Primary Healthcare. The workgroup has had several meetings to discuss ways to increase telehealth in the primary care sector. The Center and PCC are working together on a telehealth kickoff event in September.

### **Broadband and Technology**

All of the FY 2022 filings are complete. See Q1 update.