

Interactive Video Conferencing and the Journey Toward Meaningful Use

Presented by:

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Internet2 Member Meeting

Objectives

- Understand what the KFMC HITREC is
- Review ARRA and HITECH
- Describe how we used interactive video conferencing to educate rural Kansas providers and clinic staff
 - Benefits and Challenges
 - Planning Participants
 - Meeting Milestones
 - Measuring Success
 - Lessons Learned

KFMC Background

As a non-profit organization, Kansas Foundation for Medical Care, Inc. (KFMC) was incorporated in 1972. Serving Kansas for over 38 years, we have performed multiple contracted services for the federal and state government as well as private entities with a focus on our mission – to **facilitate the improvement of healthcare.**

Some of our contracts include:

- Quality Improvement Organization (QIO) for the State of Kansas new priorities began August 1, 2011 – July 31, 2014
- External Quality Review Organization (EQRO)
- Case Review – Medicare beneficiary protection & Medicaid utilization review
- HIT Regional Extension Center Contract

ARRA and HITECH

- The American Recovery and Reinvestment Act of 2009 (ARRA) was signed into law on February 17, 2009
- The Health Information Technology for Economic and Clinical Health (HITECH) Act includes provisions to promote Meaningful Use of health information technology to improve the quality and value of American health care
- Established the Office of the National Coordinator for Health Information Technology (ONC) within the Department of Health and Human Services (HHS)



- The ONC is principally responsible for coordinating the effort to implement a nationwide health information technology infrastructure that allows for the use and exchange of electronic health information in electronic format
- The ONC is also primarily responsible for oversight and coordination of HITREC (and other) grantees

HIT Regional Extension Center Program

- The Program goal is to assist 100,000 Priority Primary Care Providers (PPCPs) in meeting Meaningful Use (MU)
- Due to their previous quality improvement work, Kansas healthcare stakeholders agreed that KFMC should apply for the HITREC grant
- On February 8, 2010, KFMC was notified that they were one of thirty-two first round grant recipients
 - A total of 62 HITRECs were selected to be grant recipients
- Our goal is to assist 1,200 PPCPs in meeting MU
- Additionally, on September 10, 2010, we received a Critical Access Hospital/Rural Hospital (CAH/RH) Supplemental Grant
 - KHA/KHERF is our subcontractor for the supplemental grant
- KFMC has partnered with multiple Kansas healthcare stakeholders to accelerate adoption of health information technology

REC Objectives

- Education and outreach to all stakeholders
 - Materials available:
 - On our website (including FAQs)
 - From Practice Consultants
 - Through educational webinars and video conferencing sessions
- Onsite assistance to providers to help them meet Meaningful Use criteria
- Assistance with HIT workforce development
 - Partnering with Johnson County Community College (JCCC) to develop a HIT six month certification program
 - Offering internships to JCCC graduates
 - Helping with graduate job placement



Educating Providers and Clinic Staff

Our goals when planning the Meaningful Use workshop were to:

- Provide information to both HITREC and non-HITREC participants at a nominal fee
- Present via interactive video conferencing
- Limit presentations to one or two sites
- Broadcast to a maximum of fifteen interactive host sites
- Focus (for the first meeting) on western Kansas providers

Benefits of Interactive Video Conferencing

- Compared to traditional onsite meetings, the benefits include:
 - Being cost effective for participants
 - Allowing more productive time for participants
 - Typically, participants stay onsite at their facility for the meeting
 - Participants can attend only the sessions that are beneficial and/or applicable to them
 - Travel time is eliminated or reduced
 - The ability to reach more participants
- In Kansas, rural providers and their staff are comfortable with video conferencing
 - Often, a Rural Health Clinic (RHC) is associated with a Critical Access Hospital (CAH) that has video conferencing equipment

Benefits of Interactive Video Conferencing



- In Kansas, Kan-ed has created a strong network and communication infrastructure for rural hospitals, schools and libraries
 - Hospital connectivity is typically at least 1 T1 for which Kan-ed subsidizes the cost
- Video conferencing is more interactive than teleconferences or webinars

Challenges of Interactive Video Conferencing

- In comparison to traditional onsite meetings, the challenges include:
 - Requiring more extensive pre-meeting testing
 - Kan-ed's Network Operations Center (NOC) handled testing
 - Technology “hiccups”
 - Pre-meeting testing does not guarantee success
 - Being an unfamiliar presentation medium for many speakers
 - A slightly less interactive environment than meeting in person
- This was the first time KFMC provided education via interactive video conferencing

Planning Participants

- HITREC Education Coordinator
- KFMC Communications Staff
- Practice Consultant
- Kan-ed and Kan-ed NOC Staff
 - One of their many services is facilitating interactive video conferences.

Meeting Milestones

- Met with planning participants to establish meeting expectations and to plan logistics
- Secured commitments from speakers
- Coordinated with speakers to set a meeting date
- Selected two presentation sites
- Coordinated seven interactive meeting sites strategically placed throughout western Kansas



Meeting Milestones (cont.)

- Provided host site demographics to Kan-ed's NOC
- Developed the meeting agenda
 - Utilized six speakers to cover eight topics
- Distributed meeting brochures and registration forms
- Processed registration forms
- Gathered and distributed presentation materials to registered participants
- Conducted the interactive video conference
- Distributed and processed evaluation forms
- Sent thank you notes to speakers and host sites

Measuring Success

- We were able to educate 27 registered participants from 10 facilities at 7 sites
- The educational session was offered at no cost to all participants
- A wide range of Meaningful Use topics were addressed
- Our feedback was primarily positive but also provided some opportunities for improvement
- We had nominal direct expenses
 - Kan-ed's video conferencing services were provided as an in-kind donation.
 - Indirect expenses, like workshop planning and presentation development, were not calculated.



Lessons Learned

What We Did

- We selected our primary presentation site based upon speaker availability and convenience. (They were wonderful hosts!)
- We selected and coordinated interactive meeting sites so that they were spread as evenly as possible throughout western Kansas.

What We Learned

- It may be beneficial to determine the video equipment's capability (such as content sharing) to ensure that it meets all speakers' expectations.
- It may be beneficial to allow registering participants to indicate whether they would like to attend via video conference at their facility or in person. If video conference demand is high, sites could be combined.

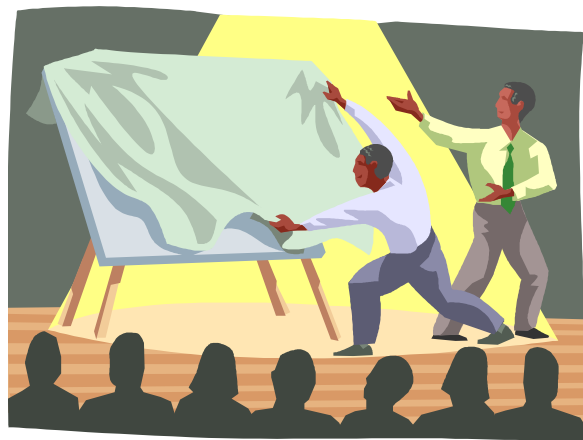
Lessons Learned (cont.)

What We Did

- We focused on providers and their staff in a specific geographic area.
- We relied primarily on direct marketing via email, postal mail and fax.

What We Learned

- It may be beneficial to plan for statewide meetings even if there are two or three separate locations and meeting dates.
- It may be beneficial to look at other marketing sources such as professional healthcare organizations and/or healthcare networks.



Lessons Learned (cont.)

What We Did

- We provided an overview of some of our tools. However, due to including non-HITREC participants, we did not provide the actual tools.
- We sent the program evaluations to registered participants after the meeting.

What We Learned

- It may be beneficial to provide a more in-depth review of specific tools as well as distributing the actual tool to HITREC participants in a separate meeting.
- It may be beneficial to include the program evaluation with the presentation materials.

Acronyms

ARRA	American Recovery and Reinvestment Act
CAH/RH	Critical Access Hospital/Rural Hospital
EQRO	External Quality Review Organization
FAQ	Frequently Asked Questions
HITECH	Health Information Technology for Economic and Clinical Health Act
HITREC	Health Information Technology Regional Extension Center
HHS	Department of Health and Human Services
JCCC	Johnson County Community College
KHA/KHERF	Kansas Hospital Association/Kansas Hospital Education and Research Foundation
MU	Meaningful Use
NOC	Network Operations Center
ONC	Office of National the Coordinator
PPCP	Priority Primary Care Provider
QIO	Quality Improvement Organization
RHC	Rural Health Clinic

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