Avera eConsult

Avera Health – Sioux Falls, SD

Background
Beginning in 1993, Avera Health offered eConsult services to rural, frontier and critical access hospitals that were part of the Avera Health system. Ten years later, eCARE expanded to provide eICU care. In addition, Avera eCARE delivered 24/7 access to a wide range of medical specialists and referrals to specialty care for a growing number of underserved populations and communities. In 2009, Avera eCARE launched eEmergency and ePharmacy for all of Avera’s rural hospitals. Additional funding from the Helmsley Charitable Trust and other sources allowed expansion to more than 200 facilities across eight states and the ability to serve partners outside Avera Health. By 2012, eCARE services were available for long-term care and correctional facilities. Avera eCARE telemedicine professionals work together 24/7/365 in the eHELM, a virtual hospital hub, also created in 2012 with the assistance of the Helmsley Charitable Trust.

Program Overview
Health care systems, hospitals, outpatient clinics, long-term care organizations and correctional facilities take advantage of Avera eCARE to support their onsite staff members and services; deliver fast response to patients’ health needs, including urgent and critical care; help avoid unnecessary transfers; reduce patient travel time and expense by improving care for residents where they live; and coordinate referrals to additional medical specialists.

Since eConsult launched in 1993, the program has grown to offer approximately 35 medical specialties – including infectious disease, pulmonary, cardiology, nephrology and others – and the team works with more than 100 participating providers.

eConsult provides the infrastructure that allows specialty providers to embed telemedicine into their medical practice to effectively respond to requests for virtual consultations. The eConsult team then helps specialty providers and local clinicians collaborate during the examination visit.

Here’s how it works:

1. Providers refer a patient to a specialist, easily scheduled with eConsult just like a typical office visit.

2. At the participating local clinic or hospital, patients enter an exam room equipped with a camera and monitor. With the assistance of a nurse, eConsult virtual visits directly connect the onsite patient with the off-site specialty provider.

3. Bedside staff may also use diagnostic medical equipment such as a stethoscope or otoscope that transmits to an eConsult specialist. In addition, the “exam cam” provides high definition views to the consulting physician.

4. Services are billed using the same office visit codes in traditional practice for seamless health care delivery.
The eConsult team supplies monthly reporting, ongoing education and process improvement to build network capacity.

**Impact**
The eConsult program helps participating facilities benefit from enhanced access to a skilled group of doctors, advanced practice providers, nurses and other clinicians, all available to assist facility staff in delivering better care for their rural communities; and retain ancillary charges and other health care revenue in their facilities, rather than sending patients to specialty clinics. For patients, eConsult helps local residents receive care close to home, reducing personal expenses while helping them manage health concerns on a timely basis to avoid complications or more serious issues.

Results for the past 12 months include 10,300 total visits, 39,000 patient hours saved, 2.5 million miles saved, and $1 million in total estimated cost savings.

**Lessons Learned**
After several years of steady – yet slow – growth, Avera conducted a large-scale improvement effort aimed at bolstering utilization. The key to success was making eConsults as efficient and effective for the specialty providers as a face-to-face patient visit. This included locating the video equipment within the physician’s office, standardizing scheduling and tele-presenting procedures, and ensuring that visits started and ended on time. Since this project, growth has maintained 20 percent or better year-over-year growth while adding many new rural sites and urban specialists.

**Future Goals**
Avera will continue to work with new or newly interested specialists or rural clinics, and add them to the telemedicine network. Each year, partners bring forward new opportunities to use telemedicine to address unmet needs. The eCARE team supports grant writing, business planning, and implementation to bring telemedicine to these clinicians. Moving forward, Avera will continue to support organic growth within its region, while also assisting other health systems in their telemedicine efforts.

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