



How Beacon Health System Gained Competitive Advantage and Acquired New Patients through Telehealth

Beacon Health System, the nonprofit parent organization of Elkhart General Hospital and Memorial Hospital of South Bend that provides care throughout Indiana and Michigan, was in search of a convenient care delivery service that could be integrated across its system. Through this service, Beacon hoped to attract new patients and employer groups, as well as extend its own clinical talent to its other brick and mortar facilities to reach patients in need.

The health system believed that one telehealth program that was integrated across the entire system would provide a cohesive and convenient care experience for both its patients and providers.

To launch this type of interconnected program, Beacon developed an effective three-step implementation strategy, which included:

1. Selecting a governance group and telehealth partner
2. Encouraging provider adoption through test groups
3. Rolling out use cases in a multi-phased approach

With its strong commitment to telehealth, Beacon successfully launched a program in 2017. Here is the health system's implementation success story.

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Brett Belock

Innovation Project Consultant
Beacon Health System

Background

Beacon Health System's ecosystem, which includes Elkhart General Hospital; Memorial Hospital of South Bend; Beacon Children's Hospital; Beacon Medical Group; and Beacon Health and Fitness, is run by more than 7,000 associates working to provide the best care possible for its patients. The health system delivers care to patients throughout North Central Indiana and Southwestern Michigan, and is the regional leader in childbirth, mental health, cancer, pediatrics, trauma, heart and vascular care, stroke, surgery, weight loss services, and community health programs.



While telehealth had been on the health system's radar for a while, legislation in Indiana remained slow to adopt telehealth; law required that physicians meet with patients in person before prescribing any medication. In 2015, the Medical Licensing Board of Indiana launched a pilot program to test the effectiveness and integrity of telehealth. The pilot was so successful that a new bill was signed into law in 2016, reversing the longstanding telehealth statute and giving doctors, physician assistants, advanced practice nurses and optometrists the ability to prescribe a variety of prescriptions remotely. The law also stipulated that Indiana law will apply to any out-of-state providers serving patients in the state. This opened the door for Beacon Health System to deploy a telehealth strategy of their own.

Step 1: Selecting a Governance Group and Telehealth Partner

Once legislation for telehealth in Indiana became favorable, Beacon Health System knew they had to play catch-up. They viewed playing catch-up as a benefit, however, as many health systems in other states had already

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been through the process of implementing telehealth. "These health systems had worked out a lot of the details and difficulties, so strangely enough, by being delayed we were actually in a better position," says Lori Turner, Chief Marketing and Innovation Officer of Beacon Health System.

Beacon learned from health systems that came before them and began the process by forming a governance group. At the time, many different stakeholders across the health system—human resources, the medical group, the innovation team—were looking at a telehealth solution. "We brought groups interested in telehealth together and decided to find a solution that could serve us system-wide, as opposed to a bunch of different groups using different technology," says Turner. "This was the most important decision we made."

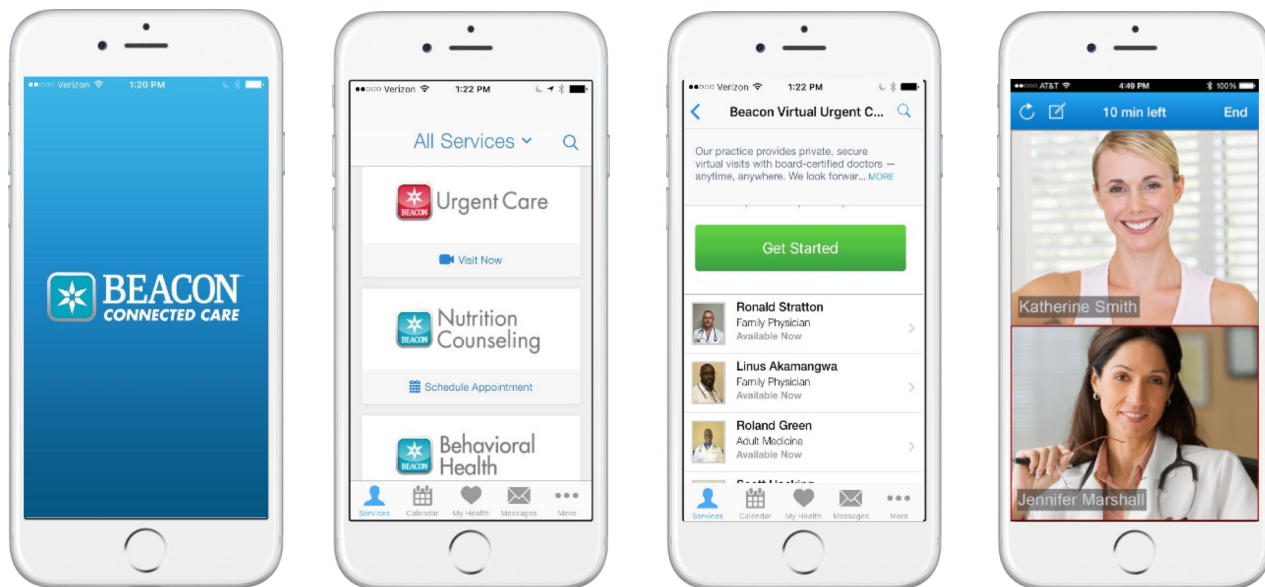
The governance group included representatives from the medical group, human resources, administration, IT, finance, marketing, and innovation. Together, the group formulated four objectives for a telehealth solution. "We said if we can find one technology to solve these four things, we would choose that option," says Turner. "American Well ended up being that technology."

Beacon Health System's four objectives:

1. Offer Beacon associates easy access options for minor acute and episodic care
2. Introduce Beacon Medical Group (BMG) physicians to virtual care while preserving the quality and nuanced aspects of traditional office visits
3. Gain competitive advantage with payers and employer groups
4. Attract new customers and establish Beacon as the telehealth brand in its market

Another vendor consideration included staffing. Beacon Health System's medical group was not able to staff the urgent care telehealth service right away. Because of that, they needed a partner that would be able to provide staffing for the service. Online Care Group, American Well's telehealth medical group, allowed Beacon to staff and launch its urgent care platform quickly with board-certified, licensed and credentialed physicians. While Beacon does plan to increase the use of its own providers—physicians and nurse practitioners—to staff the urgent care service, the partnership with Online Care Group was essential to its overall strategy, especially during the launch phase.

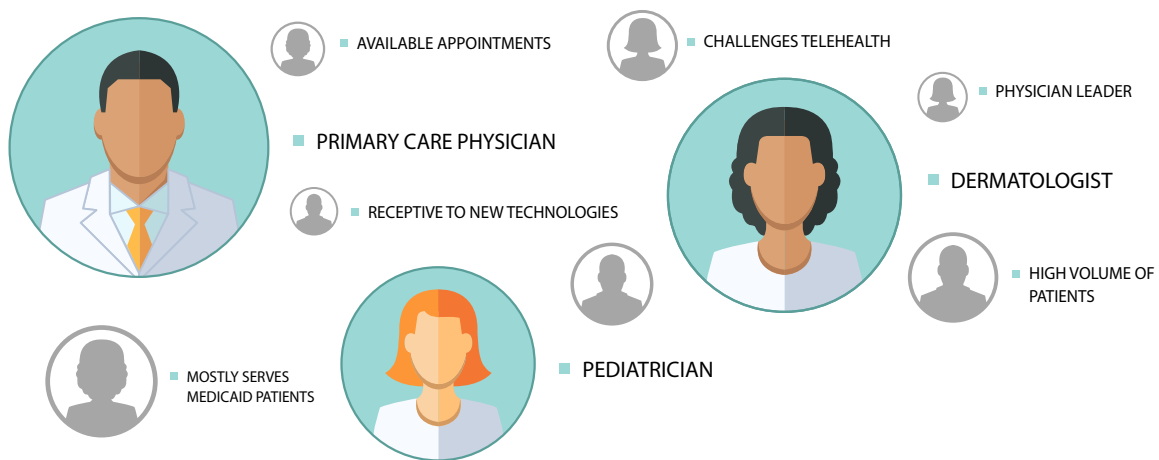
Beacon was also impressed by the easy-to-use interface for the consumers, as well as the platform's ability to hold provider-to-provider consultations. "It was a bonus to have American Well's Telemed Tablet and Kiosk offerings," says Mary Kuhr Anderson, innovation project consultant at Beacon. "Knowing those were an available option for the future to help expand our use cases was great."



Step 2: Encouraging Provider Adoption for Test Groups

Initially, Beacon Health System providers were hesitant about using telehealth within their practices. To help guide provider adoption, as well as understand provider perceptions of telehealth, Beacon formed a provider test group that was comprised of ten physicians. Each physician brought a different set of characteristics to the group: some had been supportive of other initiatives in the past; some were very receptive to new technologies; others were providers who were looked up to as leaders; and there were also those who in some instances were not the obvious choice because they challenged telehealth. The group also represented a broad spectrum of specialties, including pediatrics, orthopedics, dermatology, and primary care, as well as a variety of day-to-day operations—available appointment spots, more administrative time, high volume of patients per hour, or mostly Medicaid patients. “We wanted to learn from this diverse group and understand all the different opportunities they saw for telehealth,” says Turner.

DIVERSE PROVIDER TEST GROUP



Beacon’s Innovation team (the team responsible for the successful implementation and deployment of telehealth) observed these providers in their own environment as they went about their daily routines. Innovation team members would work with the physicians to identify key areas where telehealth could help—whether the physician was trying to see more patients more efficiently, or extend specialty care for after hours. Then, the innovation team would go to other physicians in the group and repeat the process, sharing the ideas and insights they had learned.

After these one-on-one discussions with the Innovation team, opinions started to shift. “We would listen and allow them to come up with an opportunity for their practice. Those who were resistant started seeing telehealth as a good benefit,” says Turner. “When we got into working on specific use cases, [the providers] did it on their own without much coaching.”

The Innovation team did not try to interrupt or disrupt the providers’ operations, but allowed them to drive their own initiatives. This approach enabled the provider to find the best fit for telehealth within the practice and roll out a program that would have longevity.

“It’s not that this group *was* important, it still *is* very important,” says Belock. “Telemedicine is not its own thing, its own department. It’s like a stethoscope or a blood pressure cuff—it’s just part of the provider’s practice. Our job is finding how it fits into the work they’re already doing.”

Step 3: Rolling Out Use Cases in a Multi-Phased Approach

Beacon Health System deployed its telehealth program in four separate phases, each playing a vital role in its goal to deliver better healthcare to patients.

1. Direct-to-Consumer Telehealth

The health system launched its direct-to-consumer telehealth offering, Beacon Connected Care, in January 2017. This initial soft launch was followed by a marketing launch in August 2017, which included email campaigns and paid search. Beacon originally launched with solely urgent care and has since begun to expand its offerings for consumers to include nutrition counseling and behavioral health services.

2. Employer Group Strategy

Before its telehealth program was even ready for deployment, Beacon Health System had employer groups asking for telehealth. “Employers of all sizes are really looking for a way to serve the health needs of their employees and reduce their costs,” says Turner. “So telehealth, especially in the area of urgent care, is a good fit.”

Beacon launched its employer group strategy with urgent care. Beacon’s Managed Care sales team reached out to employers with whom they had existing relationships to discuss this new benefit and found that there was little resistance. Employers were quick to adopt telehealth and have seen positive results.

“Even in the first year, employers are seeing a positive return on their investment,” says Turner. “They are saving money compared to what they could expect if people instead went to the ER or urgent care site. We consider a positive return in year one an extremely good thing.”

3. Site-to-Site Consults

For Beacon, remote provider-to-provider consultations were about connectivity, synchronizing information and better availability. The health system utilizes American Well’s Telemed Tablet to facilitate its provider-to-provider remote rounding, which currently is being used by psychiatrists.

Beacon is using the remote provider rounding to facilitate the extension of its own clinical talent to other hospitals in the ecosystem. Employers were quick to adopt telehealth and have seen positive results. The nurses at the other facility connect their patients with the physician using the Telemed Tablet. “We are really extending the talents of our own system” says Belock. “It’s a very important place to start.”

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American Well Telemed Tablet

4. Provider-Driven Telehealth

Through Beacon's provider test group, the health system has also piloted many provider-initiated use cases, including scheduled visits and follow-up care appointments. The scheduled visit pilot is being used with providers' existing patients, specifically those who are best seen at home due to high stress or burden of travel, inevitably improving the patients' safety and convenience.

The follow-up appointment pilot is for patients who require quick visits for things like post-op or medication management. All the follow-up appointments are scheduled in advance.

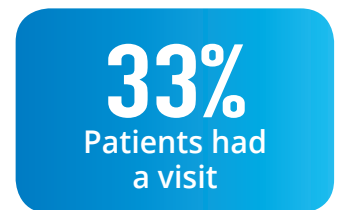
Another provider-driven pilot being tested is filling a provider's open time slots during the day with on-demand urgent care. If a physician finds he or she has open time during the work day, they log on to Beacon Connected Care to help treat patients who are looking for on-demand acute care. This not only maximizes the provider's time, but gives consumers access to Beacon's renowned physicians.

Success: Online Care Options Reduce Cost for Patients & Employer Groups

Since its integrated launch, over 33 percent of patients who signed up for Beacon's direct-to-consumer and employer telehealth services have gone on to have an online visit. Of those who had a visit, 70 percent were female and 30 percent were male.

The average wait time to see a physician was around six minutes, and the top conditions treated included sinusitis, upper respiratory infections, acute pharyngitis, acute cystitis, and conjunctivitis.

Patients and employees who used Beacon's online care option rated the providers and platform as "excellent" with 4.7 and 4.5 out of five stars, respectively.



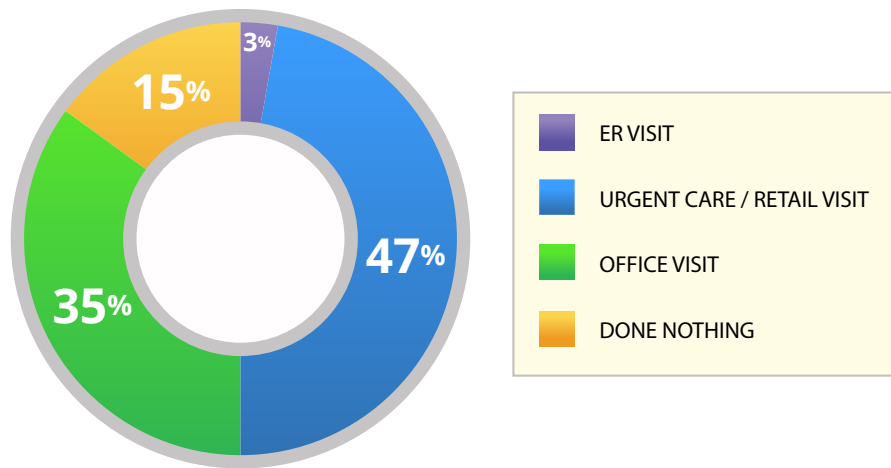
Initial Results Show Cost Savings

The employer groups using Beacon's telehealth option saw a return on investment in the first year. Their employees, as well as other patients who had a visit via the direct-to-consumer service, were successfully diverted away from costlier care alternatives, including unnecessary office and emergency room visits.

After each visit, patients provided feedback on whether they would have sought care if they were not able to use Beacon Connected Care:

- **47%** of patients would have gone to an urgent care center or retail clinic – visits that could have potentially taken place outside the Beacon Health System
- **35%** would have gone to a doctor's office– Beacon helped reduce the cost of a low level encounter
- **15%** of patients said they would not have seen a doctor without the availability of the service – a sign that Beacon was addressing an access need within the communities it served
- **3%** would have gone to the emergency room. While this is not a high percent of visits, these types of visits are more costly

WHERE PATIENTS WOULD HAVE GONE IF NOT FOR TELEHEALTH



Looking Ahead: Beacon Providers Will Lead the Way

As Beacon Health System continues to expand and grow its telehealth strategy, its physicians will play a vital role in its path and ultimate success. The long-term goal for its direct-to-consumer and employer group urgent care service is to have Beacon providers staffing the platform. And with many promising provider-initiated and provider-to-provider telehealth pilots underway, Beacon has set itself up to fully integrate telehealth into everything it does in the future.