TELEHEALTH FOR HOSPICE AND PALLIATIVE CARE IN THE HOME

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Growth-Homecare & Hospice

- Community-centered care in private home
- Services to aged, frail, mentally ill, disabled, diminished in capacity, dying
- Medicare; Medicaid; private insurance as funding sources; some personal payment
- Palliative care (soins palliatives) mostly in the personal home and not in hospital
- Nearly 50% age 65+ use hospice before death
I. Policy Issues

• When and how will USA government payers see benefit from telemonitoring and telehealth, and be prepared to pay for the services, the equipment, the internet connections?
  => A few State Medicaid programs exist.
• Is less in-person care a form of “rationing”? 
• Should care advance before there are standards, for example, mental health services via telehealth are believed to be a near equivalent to in-person. Alternative = no service.
II. Policy Issues

- Electronic health records [EHRs] now being developed more as technology than as a service; thus distinct from remote monitoring and home telehealth?
- Will the USA ever have a blended health/social care approach like other nations: Is that necessary for community based-telehealth or telecare activity?
The National Coordinator of HIT

- Technologies for “vulnerable” populations
- Self-service technologies that facilitate use and exchange of patient information
- Telemedicine technologies
- Facilitate home health care
- Reduce medical errors
- Facilitate continuity of care
Home Telehealth Research

- Research in remote monitoring of chronic disease is supported by grants from Congress; universities and insurers- “remote monitoring” of cardiac conditions (congestive heart failure); pulmonary disease (asthma; COPD); diabetes transmits data for physicians; interaction with health coaches (nurses)
- Goal is better self-care; reduction in costs
- Research shows reduction in use of emergency services and in hospitalization; increase in quality of life for patients
Hospice and Palliative Care Using Telehealth

• Goals are increased quality of care; reduction in unanticipated hospitalizations; pain control.
• Chronic illness in final stages (lung, heart, diabetes, neurological, Alzheimer’s) continue with telehealth remote monitoring in place.
• Pain management and psychological support
• Workgroup of American Telemedicine Association, which I head, doing a review = usage; potential growth; literature on research
• Veteran’s Administration standards for palliative care to be issued this year.
Telehealth Findings

• University of Washington research shows positive benefits of telehealth to bring family caregivers and patient into hospice planning.

• Multiple relationships within the remote monitoring connected parties. Nurses are reluctant to adopt telehealth for hospice.

• If remote monitoring is performed in USA by home health or hospice companies, they must provide care according to Medicare rules which were written without telehealth background.
Telehealth Findings

- Patients prefer the videoconferencing equipment over the audio alone
- Barriers include: States laws, professional licensure, malpractice insurance carriers
- “Practice of medicine or nursing” when consultation comes into the state through the internet? From another country?
- What training standard should apply?
- Should national government overcome local laws to permit universal access? EUROPE could be the laboratory.
Privacy; Ethics; Abuse

- USA privacy laws are complicated
- Recent proposed guidance
- Little review of ethical concerns but consent issues under review for EHRs and regional networks
- Government fears unnecessary use of technology and criminal or fraudulent presentation of claims for payment
Still to Come

• What level of regulation will affect a remote monitoring and communication system?

• HIT software will be subject to the FDA regulatory structure (like CE in Europe)

• Voices of those affected need to be heard; USA does not have a large, unified patient centered group, much less of those seeking palliative care or end of life care
Please feel free to send questions

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