

TripleCare Selected for CMS Telemedicine Study

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NEW YORK (August 17, 2017)—TripleCare, a national provider of telemedicine-based health care services to skilled nursing facilities (SNFs), announced today that the company has been selected to participate in a Centers for Medicare & Medicaid Services (CMS) study evaluating the cost effectiveness of telemedicine utilization in SNFs.

The one-year study is intended to assess the benefits of telemedicine-based virtual physician services, which are used to prevent both avoidable nursing-home-to-hospital admissions and readmissions, and to estimate the economic impact on Medicare, Medicaid and the participating SNFs. The TRECS Institute, a non-profit organization dedicated to improving care for seniors while decreasing health care costs, is leading and managing the study while TripleCare is providing the virtual physician services.

As one of the nation's first telemedicine providers, TripleCare brings virtual health care services to SNFs during off hours when physician coverage at these facilities is typically lacking or non-existent, such as overnight, during the weekends and on holidays. These are the times when most hospital transfers occur. The company's network of highly trained physicians perform virtual bedside visits, treating patients in place, using advanced technology, coupled with assistance from SNFs' on-site nurses. This innovative telemedicine-based approach allows physicians to differentiate from patients that truly need to go to the hospital versus those that can be treated in the SNF. TripleCare's virtual physician services have proven to aid in avoiding unnecessary hospital transfers.

In this study, made possible through CMS and Florida's Agency for Health Care Administration under the agency's Civil Money Penalty Grants Program, TripleCare and TRECS are bringing virtual physician services to three Florida-based SNFs, including: Braden River Rehabilitation Center, Bradenton; Tiffany Hall Nursing and Rehabilitation Center, Port St. Lucie; and, Moultrie Creek Nursing and Rehab, St. Augustine.

In a recent, separate TRECS study during which TripleCare provided virtual physician services, both a dramatic improvement in the quality of patient care delivered as well as a significant financial benefit were reported: 91 instances of hospital admissions/readmissions were averted, resulting in more than \$1.3 million in savings for Medicare. Additionally, results revealed positive increases in net revenue for the study facility, which significantly exceeded the cost of TripleCare's services, thereby improving both top- and bottom-line financial performance for the SNF.

"Changes in patients' conditions often occur in the off hours when physicians are not physically present at SNFs. This is precisely the time when TripleCare's virtual physician services kick in. Our team of expert physicians nationwide work closely with on-site SNF nurses to immediately address these changes in an attempt to avoid hospitalizations. As a result, these virtual visits are reaping considerable financial savings for SNFs and our nation's health care system. We also afford SNF patients and their families a better care experience and peace of mind, knowing TripleCare is there to offer physician oversight in the off hours," explained Mary Jo Gorman, chief executive officer at TripleCare.

"We are confident that by the end of this year-long study, results will bear out the many benefits our telemedicine approach affords patients, SNFs and CMS. The health care industry is working aggressively to prevent hospitalizations, and for years, TripleCare has successfully directly addressed this through its model. We are currently contracted with more than 60 SNFs nationwide, which is a true testament to the ways we enhance patient care while concurrently helping them control costs," she concluded.

John Whitman, executive director at TRECS, believes that soon every nursing facility in America will be utilizing virtual physician services. He said: "Studies show that approximately 60 to 70 percent of all nursing home transfers to the hospital are unnecessary. Sending a vulnerable senior to the hospital only increases their exposure to a wide range of other proven, adverse effects. TRECS and TripleCare have clearly demonstrated a

better patient care model that not only reduces avoidable hospitalizations and improves clinical outcomes but also generates positive economic impact for both CMS and participating SNFs.”

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