

# Telehealth: Given the Popularity of Fitbit and iWatch – Introducing Remote Care Management for Improved Work Comp Outcomes Is the Next Best Step!

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For decades, doctors have used tools like Holter cardiac monitors to assess health, such as heart function, while the patient goes about his or her daily routine. More recently, consumers have begun donning Fitbits and other activity trackers to monitor their footsteps, their sleep patterns, their heart rate and more — uploading the results to sites like MyFitnessPal.com. Where clinical tools and consumer technology intersect lies an opportunity to improve clinical outcomes in workers' compensation. Remote Care Management (RCM), an application of telehealth, could be particularly useful in those cases where comorbidity threatens to interfere with the quality and speed of recovery.

## Telehealth today

Recently we wrote about telemedicine — “virtual” visits with a physician via video chat or other communications technology — for workers' comp. Telehealth expands the concept to include services provided by other health professionals, such as a nurse or pharmacist, using consumer-grade technology. RCM allows a patient and/or caregivers to use mobile medical devices to perform routine tests and transmit the test data to a health care professional in real time using digital technology. It can be used to monitor vital signs such as body temperature, pulse and respiration rates, blood pressure, heart rate, weight, insulin levels and oxygen saturation.

Wireless thermometers, insulin meters, scales and other similar blue tooth enabled devices capture the information and then sync it with a smart device, such as a tablet or smartphone, which transmits the data to the health care professional, who might be a nurse or other clinician. RCM applications can also track self-reported pain levels, medication adherence, physical activities and activities of daily living. In addition, many can provide reminders and educational material to help the patient with compliance, behavior change and transition to self-management. RCM may also allow for video consultation between the patient and health care professional.

The physiological monitoring can provide a feedback loop to encourage adherence to the treatment plan, supporting the necessary behavior change and, ultimately, transition to self-management.

## Remote monitoring makes an impact

In health care, RCM has already begun demonstrating a positive impact. Between July 2003 and December 2007, the Veterans Health Administration (VHA) introduced a national home telehealth program designed to coordinate care of patients with chronic conditions and avoid unnecessary admission to long-term institutional care. The VHA saw a 25-percent reduction in bed days of care, a 19-percent reduction in hospital admissions and a mean satisfaction rating of 86 percent from patients enrolled in the program.

To date, telehealth has primarily been used to improve management of chronic health problems such as diabetes, hypertension and obesity. These are exactly the kinds of conditions that can jeopardize recovery and return-to-work following an injury, or that could lead to injury, particularly in an older workforce. Both chronic conditions and age can have a significant impact on outcomes and costs. According to the National Council on Compensation Insurance (NCCI),

the number of work comp claims receiving a comorbid diagnosis in the first 12 months of a claim increased from 2.4 percent in accident year 2000 to 6.6 percent in 2009. Hypertension, drug abuse and diabetes were the most prevalent.

## RCM for high-risk claims

Remote care management can play a key role in managing high-risk claims in workers' compensation. Consider the work comp patient who has insulin-dependent diabetes and an open wound after surgery. Monitoring insulin levels is critical to proper healing and preventing infection. With RCM, the patient can check his or her insulin levels and transmit the information to the care manager. The care manager can then advise the employee to contact the primary care provider or coordinate follow-up, if necessary for additional treatment.

Here's another example: A 50-year-old male with a non-surgical back injury is also obese and has uncontrolled high blood pressure, so the treating provider is reluctant to prescribe physical therapy. In this case, RCM would allow the care manager to monitor the employee's blood pressure and weight, remind him to take his medication, while supporting him with behavioral coaching. The goal is to educate the employee on all conditions and risks that affect recovery and, in this case, coach him to seek care from a primary care provider to address the uncontrolled high blood pressure. The sooner the blood pressure is under control, the sooner the injured employee can resume active treatment for the work-related injury. The care manager can also provide behavioral coaching and education for weight loss, helping to facilitate recovery and reduce the risk of further injury.

The first step is identifying the right candidates for remote care management — those at higher risk for complications and prolonged recoveries. That includes those where comorbid conditions delay or prevent the employee from receiving the recommended care, thereby prolonging recovery, and/or increasing the risk of hospital readmission post surgery.

However, identification of those with comorbid conditions may be tricky. These conditions are often underreported and come from other sources like the nurse triage, the case manager, the physician or even the patient. RCM can also be useful in the presence of other risk factors, such as functional limitations, lack of caregiver, poor living conditions, low health literacy, narcotic use for more than 30 days, or other psycho-social issues that could impede timely recovery.

Remote care management is only applicable to a small population of high-risk workers' compensation claims. However, paired with care management to monitor, educate and coach the injured worker, it could make a powerful impact on high risk claim outcomes both clinically and financially.

### About Tammy Bradley

Tammy Bradley is vice president of clinical product development for Coventry Workers' Comp Services. Bradley is a certified case manager with more than 25 years of comprehensive industry experience through service delivery, operations management and product development. She holds several national certifications, including certified case manager (CCM), certified rehabilitation counselor (CRC) and certified program disability manager (CPDM).

### About Coventry Workers' Comp Services

Coventry offers workers' compensation cost and care management solutions for employers, insurance carriers and third-party administrators. With roots in both clinical and network services, Coventry leverages more than 30 years of industry experience, knowledge and data analytics. The company offers an integrated suite of solutions, powered by technology to enhance network development, clinical integration and operational efficiencies at the client desktop, with a focus on total claims cost.

## NOTES

1. Darkins A., Ryan P, Kobb R, Foster L, Edmonson E, Wakefield B, Lancaster AE. Care Coordination/Home Telehealth: the systematic implementation of health informatics, home telehealth, and disease management to support the care of veteran patients with chronic conditions. *Telemed JE Health*. (Dec. 2008) 14(10):118-26. doi: 10.1089/tmj.2008.0021fda
2. NCCI Research Brief. (Oct. 2012) Comorbidities in Workers Compensation. Retrieved from [https://www.ncci.com/Articles/Documents/II\\_Research-Brief-Comorbidities-in-Workers-Compensation-2012.pdf](https://www.ncci.com/Articles/Documents/II_Research-Brief-Comorbidities-in-Workers-Compensation-2012.pdf)