

*The era of the electronic house is here, and family physicians must become leaders in the development, use and promotion of the 'patientware' systems of the future."*

--Ira Denton, M.D., quoted in "Back to the Future: The Telemedicine House Call." Family Practice Management.



ACI'S FOURTH NATIONAL CONFERENCE ON:

# TELEHEALTH & REMOTE PATIENT MONITORING

## For Hospitals & Health Systems

*Understanding and implementing new technologies and trends to generate revenue, increase patient satisfaction and increase profit share and ROI*

**April 7-8, 2011 • Baltimore, MD**

*A Two-Day Industry Forum highlighting the latest trends, best case studies, hands-on experiences, and innovative strategies from America's top hospitals and other prestigious organizations!*

#### DISTINGUISHED FACULTY INCLUDES:

**Kenneth Wood, MD, Chief Medical Officer**  
GEISINGER HEALTH SYSTEM, Danville, PA

**Susan Fetterman, Vice President**  
GEISINGER HEALTH SYSTEM, Danville, PA

**Angelo Venditti, Operations Director**  
GEISINGER HEALTH SYSTEM, Danville, PA

**David Guggenbuehl, Director-Regional Services**  
GUNDERSEN LUTHERAN HEALTH SYSTEM, La Crosse, WI

**Andy Barbash, Director, Neuroscience Services**  
HOLY CROSS HOSPITAL, Silver Spring, MD

**Albert Villarian, National Director**  
THOMPSON REUTERS HEALTHCARE, Philadelphia, PA

**Rajib Gosh, Global Product Strategy Manager**  
ROBERT BOSCH HEALTHCARE, Palo Alto, CA

**Birthe Dinesen, Professor, Department of Health and Science Technology**  
AALBORG UNIVERSITY, Aalborg, Denmark

**Deborah Randall, Health Attorney, Telehealth Consultant**  
LAW OFFICE OF DEBORAH RANDALL, Chevy Chase, MD

**Georgia Brown, Senior Vice President**  
VITALPARTNERS 365®, Dallas, TX

**Terry Duesterhoeft, President**  
HONEYWELL HOMMED, Brookfield, WI

**John Doherty, Director of Global Marketing**  
HONEYWELL HOMMED, Brookfield, WI

**And More!**

#### Key Learning Objectives Include:

**Essential Components for Telehealth Success**— There are a few 'must haves' in every successful Telehealth program. It is important to stay on top of the competition and keep with the latest trends. Listen and learn about the newest telehealth technologies, government incentives, and reimbursement challenges and guidelines.

**Telehealth Implementation Process** — Healthcare Technology has evolved and so must you! There is a lot to learn not only about the specific technologies but also how to successfully integrate them into your facility. Learn how to implement a successful telehealth program that enhances patient and employee satisfaction all while increasing ROI.

**Understanding the Power and Potential of Telehealth in Healthcare** — There are multiple uses for a telehealth system in a healthcare environment. It is important to understand all the benefits that a comprehensive telehealth program can bring. Listen to understand what type of telehealth would fit best into your healthcare system and understand the risks and benefits and how to successfully partner to create the best possible system for you.

#### More topics include:

- Emerging trends, strategic opportunities and future challenges
- Understanding the current legal, regulatory and reimbursement issues in telehealth and how they can potentially impact your telehealth program
- Identify and understand current reimbursement opportunities and how to overcome reimbursement obstacles
- Building a telehealth program to deliver more convenient accessible and efficient patient care at a lower cost
- Understanding different types of telehealth systems and interpreting which system is best for your facility
- Saving money and increasing ROI with telehealth technologies

#### Learn How:

**Geisinger Health System** built a solid business case for stakeholders that allowed for the implementation of a tele-ICU which improved quality of patient care, reduced the cost of care, and significantly upped their ROI

**Gundersen Lutheran Health System** used market data and clinical research to support their telehealth initiative and was able to create a top-notch regional-wide telemedicine clinical infrastructure within a large multi-specialty group

**Bosch Healthcare** determines the need for telehealth technology in healthcare and what the future will hold for implementing or even updating your telehealth program with new reimbursement and federal guidelines



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## CONFERENCE DAY ONE: THURSDAY, APRIL 7<sup>TH</sup>, 2011

**8:30AM – 8:50AM**

**REGISTRATON AND EXHIBITS**

**8:50AM – 9:00AM**

**WELCOME AND OPENING REMARKS**

**9:00AM – 10:30AM**

**THE IMPLEMENTATION OF A STATE OF THE ART TELEHEALTH SYSTEM TO IMPROVE PATIENT OUTCOMES AND ADDRESS STAFFING SHORTAGES IN THE INTENSIVE CARE UNIT; BUILDING A BUSINESS CASE AND ESTIMATING ROI**

Leveraging tele-ICU technology in large major medical centers, regional hospitals and small rural facilities can ease the efforts and expenses related to recruitment, standardize care delivery throughout a geographical region and decrease length of stay and mortality. Building the business case and estimating the return on investment is a critical phase in program development. This session will provide an overview of lessons learned in the planning and implementation phases.

Attendees Will Learn How To:

- Understand the benefits of a tele-ICU to improve quality of patient care outcomes, ability to reduce cost of care, and to understand utilization of technology to change a care delivery model.
- Understand the business case, developing agreement among stakeholders, return on investment for tele-ICU technology and how it is formulated.
- Understand the benefits of a Tele-Intensivist Team to improve quality and reduce cost of care, and estimating the return on investment for a Tele-ICU program.

**Kenneth Wood, MD, Chief Medical Officer, GEISINGER HEALTH SYSTEM, Danville, PA**

**Susan Fetterman, Vice President, GEISINGER HEALTH SYSTEM, Danville, PA**

**Angelo Venditti, Operations Director, GEISINGER HEALTH SYSTEM, Danville, PA**

*Dr. Kenneth Wood, M.D., is the Chief Medical Officer for Geisinger Medical Center and the eICU Program Medical Director. Prior to working at Geisinger, Dr. Wood was the Director for the Trauma Life Support Center at the University of Wisconsin. Dr. Wood is Board Certified in Critical Care and Internal Medicine.*

*Susan Fetterman, R.N., is the Vice President for the Division of Medicine within the Geisinger Health System, as well as the executive sponsor for the eICU Program. Prior to her position as Vice President, Susan worked in the Office of Business Strategy and Development at Geisinger Health System. Susan is a Registered Nurse and holds Graduate degrees in both Business and Nursing.*

*Angelo Venditti R.N., is the Operations Director for the Geisinger eICU Program. Angelo has been a Registered Nurse for 9 years and previously held a position as the Operations Manager for the Adult Intensive Care and Respiratory Therapy at Geisinger Medical Center.*

**10:30AM – 11:00AM**

**MORNING BREAK/REFRESHMENTS**

**11:00AM – 12:15PM**

**DEVELOPING THE CLINICAL TELEMEDICINE CULTURE WITH YOUR MEDICAL AND SURGICAL CONSULTANTS**

This presentation will address the methods needed to successfully build the Telemedicine clinical infrastructure within a large multi-specialty group practice. Combining research, referral relations methodologies, and patient satisfaction into the planning and implementation of a region-wide clinical Telemedicine program are discussed. Successful strategies to effectively develop a progressive clinical Telemedicine culture will be outlined.

Attendees Will Learn How To:

- Utilize market data to support strategic development of clinical Telemedicine initiatives
- Effectively communicate with clinical specialists on the value and opportunities associated with Telemedicine
- Incorporate patient satisfaction studies into the ongoing development of a Telemedicine program

**David Guggenbuehl, Director-Regional Services, GUNDERSEN LUTHERAN HEALTH SYSTEM, La Crosse, WI**

*David Guggenbuehl is the Director of Regional Services at Gunderson Lutheran Health System in La Crosse, WI. He oversees the development of the Clinical Telemedicine Program at Gunderson Lutheran, in addition to managing relationships with regional referral healthcare providers and hospitals. He has over 30 years of experience in healthcare, including a background in critical care nursing. He has been a featured speaker on Referral Relations and Telemedicine at numerous national healthcare conferences.*

**12:15PM – 1:30PM**

**NETWORKING LUNCHEON**

**REGISTER TODAY! Contact Scott Herrmann at Phone: 312 780 0700 Ext: 305 Fax: 312 780 0600 Email:sherrmann@acius.net**

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**1:30PM – 2:15PM**

### **COLLABORATION OF TELECOMMUNICATIONS AND TELEMEDICINE**

This dynamic session will review various attributes, tools, methods, services and approaches to enhance clinical programs through virtualized communications and collaboration online. ATTENDEES WILL LEARN HOW TO:

- Leverage common, affordable technologies to enhance online collaboration
- Take "information ownership" that crosses boundaries of organizations
- Define one's own and one's group information and communication needs and determine how to best solve them

**Andy Barbash, Director, Neuroscience Services, HOLY CROSS HOSPITAL, Silver Spring, MD**

*Dr. Barbash is currently serving as clinical stroke director at Holy Cross Hospital where he oversees the development of the community hospital neuroscience program. Since 2005 he has been the CEO of Apractis Solutions, which is a group of clinicians who serve as workflow and communication partners. Prior to that, he worked as VP of clinical information systems at Kaiser Permanente Mid Atlantic through 2001, where he oversaw deployment of organization wide EMR. He also served as Advisor to Medical Records Institute, SOS Rx outpatient medication safety initiative, and several eHealth initiatives. A graduate of Northwestern University Medical School, Dr. Barbash completed his Neurology Residency at Mayo Clinic.*

**2:15PM – 3:30PM**

### **PATIENT TRACKING AND DATA ANALYSIS WITH TELEHEALTH TECHNOLOGY**

Here the perspective from the c-suite on tracking assets as a part of a departmental and enterprise-wide workflow visibility strategy. Albert Villarin, MD FACEP, prior Chief medical Informatics Officer at Albert Einstein Health Network, will discuss insights on implementing automatic asset and patient tracking in Albert Einstein Medical Center as part of an enterprise-wide focus on improving patient flow, safety, clinical quality and administrative oversight. Listen and learn how Dr. Villarin transformed his department with the use of telehealth and remote patient monitoring.

ATTENDEES WILL LEARN HOW TO:

- Understand the importance of technology when monitoring patients realizing how the benefits greatly outweigh the risks when implementing technology into an 'old school' health system
- Enhance patient safety and quality through automatic tracking and live clinical surveillance
- Maximize ROI and workflow/clinical benchmarking

**Albert Villarin, National Director, THOMPSON REUTERS HEALTHCARE, Philadelphia, PA**

*Dr. Al Villarin is a Fellow of the American College of Emergency Physicians and practicing emergency department physician at Albert Einstein Medical Centre in Philadelphia, Pennsylvania. This 566-bed inner-city teaching hospital hosts a 48-bed Level 1 Adult Trauma Centre that treats more than 85,000 patients each year. From 2007 to 2009, Dr. Villarin also served as Chief Medical Informatics Officer for the hospital, leaving the role to become a solutions executive and National Director of Physician Services at Thomson Reuters Healthcare.*

*Dr. Villarin obtained his pre-med Bachelor of Science degree from Harvard University, where his initial studies of medical informatics and clinical decision support provided the catalyst for his career. After receiving the Army Health Professions Scholarship, he entered Jefferson Medical College and spent the next six years in both clinical and medical informatics training and development of two systems to support medical education in anatomy and orthopedics. He went on to active duty in the US Army and specialized in Emergency Medicine while developing several computerized support platforms for residency and clinical medicine. After achieving the rank of Major, Dr. Villarin completed his Army responsibilities in 2000 and assumed the role of Director of Medical Informatics at Albert Einstein Medical Center. Over the next seven years, he created a department-wide medical information portal and initiated the overall transformation from paper to computerization for clinical care. As a member of the American College of Emergency Medicine, he participated in several education forums and national committees on medical informatics and co-directed the Pennsylvania Chapter of ACEP Emergency Department Information Systems Annual Conference.*

*Dr. Villarin's presentation experience includes speaking engagements at the Healthcare Information and Management Systems Society (HIMSS) annual conference and the American College of Physician Executives (ACPE) seasonal events. He has also spoken on two HIMSS Virtual Conferences in 2008 and 2009 and is currently a Senior Fellow of the Thomas Jefferson School of Public Health. His presentations and abstracts include topics of medical informatics, workflow analysis, and clinical decision support.*

**3:30PM – 3:45PM**

### **AFTERNOON BREAK/REFRESHMENTS**

**3:45PM – 5:00PM**

### **EMERGING TELEHEALTH TECHNOLOGIES AND THEIR IMPACT ON CLINICAL OUTCOMES**

Telehealth was available for decades but adoption remained low so far. With the emergence of new technologies like cell phones, web, smarter devices, coupled with expansion of broadband and wireless network infrastructure and aided by government initiatives to address a fast growing aging population Telehealth now has a much better chance to succeed. Several successful studies have proved its merit and more will follow. This presentation will showcase technology trends in Telehealth and one of the major studies conducted using system provided by Bosch Healthcare.

ATTENDEES WILL LEARN HOW TO:

- Identify the technology needs specific to their healthcare institution
- Learn about the risks, benefits, and costs involved when implementing a new technology plan into an existing 'old school' system
- Get employees on board with the new way of technologically thinking

**Rajib Gosh, Global Product Strategy Manager, ROBERT BOSCH HEALTHCARE, Palo Alto, CA**

**5:00PM – 5:15PM**

### **CLOSING REMARKS/END DAY ONE**

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### CONFERENCE DAY TWO: FRIDAY, APRIL 8TH, 2011

**8:30AM – 9:00AM**  
**9:00AM – 10:15AM**

**CONTINENTAL BREAKFAST**  
**TELEHOME MONITORING OF PATIENTS ACROSS SECTORS**

With user-driven innovation as the focus of the case study, this dynamic presentation will discuss the results of a randomized study of telehome monitoring of COPD patients across sector. Healthcare professionals and patients were able to share data and communicate online for the benefit of patients and healthcare professionals. Listen and learn what worked, what didn't work, how the process was implemented and the overall recommendations for a implementing a telehome monitoring system for patients and physicians.

Attendees Will Learn How To:

- Do telehome monitoring across sectors
- Combine telehome monitoring with rehabilitation at home
- Use user driven innovation in developing new concepts within telehealth for care and treatment of patients with a chronic disease

**Birthe Dinesen, Professor, Department of Health and Science Technology, AALBORG UNIVERSITY, Aalborg, Denmark**

*Birthe Dinesen holds a PhD in Telehomecare and has a Master in Administration and is a RN. She does research within telehomecare for elderly and patients with a chronic disease. She has focus on user-driven innovation; developing new concepts of care, treatment and rehabilitation. She has done research within this field for more than 10 years.*

**10:15AM – 10:45AM**  
**10:45AM – 12:00AM**

**MORNING BREAK/REFRESHMENTS**  
**COLLABORATING TO MAKE TELEHEALTH A REALITY: BARRIERS IN LAW AND REGULATION AND A WAY OVER**

When the focus is not primarily physician-to-physician consultative events, but rather monitoring, maintenance and disease management for individuals living in and ambulating from personal homes or clustered living units, the policies affecting telehealth advancement may have a different slant. In addition, the technical and legal arrangements and agreements most likely will have different parties, goals and strategic value. The competencies and willingness of the patient/family will be paramount in achieving both research and therapeutic goals.

This session, presented by a health regulatory expert with 25 years' experience in community-based health services and law, will consider telehealth policy issues, liability, contractual and business issues, and medical device regulations as they affect telehealth and telehomecare. The presentation will explore particular challenges for persons with diminishing capacity and those with terminal illness utilizing telehealth and remote monitoring devices and services, and participating in research, and that these will need to be addressed by the telehealth industry.

The presenter will offer observations from her extensive work in the field of community-based services and consideration of recent telehealth issues in the USA and Western Europe. She has recently spoken at Med-e-tel, an international telehealth conference in Luxembourg, and has been an invited guest at the European Union's 2008 meetings "eHealth without Frontiers" and the "Europe's Fight against Alzheimer's Disease."

Attendees Will Learn How To:

- Identify collaborative health provider opportunities for the use of telehealth in homecare and hospice.
- Describe the legal, licensure and liability barriers that appear to present concerns.
- Identify funding and innovative structural approaches to the use of telehealth in community-based services such as home care, hospice, assisted living and long term care residential.

**Deborah Randall, Health Attorney, Telehealth Consultant, LAW OFFICE OF DEBORAH RANDALL, Chevy Chase, MD**

*Deborah Randall has 25 years experience with the health industry, concentrating in: Health regulations and reimbursement (federal and state); Medicare/Medicaid policy; Privacy/HIPAA Aging services and chronic disease care management; Alzheimer's Disease and related dementias Long term care, homecare and hospice and other community-based services Compliance and internal investigations for hospitals, long term care providers, hospices and homecare Telehealth, health information technology [HIT] and remote monitoring, and related research.*

*Ms. Randall is a Member of the Board of Directors of the National Alzheimer's Association, serves on the Public Policy Committee, and participates in the work of the Association's technology research division "Everyday Technologies for Alzheimer's Disease" [ETAC]. She is Fellow of the American Health Lawyers' Association, one of 67 Fellows out of 10,000 active members, in recognition of her expertise in long-term care law, hospice and homecare. Ms. Randall serves on the National Hospice and Palliative Care Organization's [NHPCO] Education, Physician Billing and Regulatory Committees.*

**Deborah Randall, Health Attorney, Telehealth Consultant, LAW OFFICE OF DEBORAH RANDALL, Chevy Chase, MD**

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**12:00PM – 1:15PM**

**NETWORKING LUNCHEON**

**1:15PM – 2:30PM**

**IMPLEMENTING A TELEHEALTH SYSTEM FOR REMOTE PATIENT MONITORING TO ENHANCE DATA COLLECTION, MINIMIZE COLLECTION ERRORS, AND TO MAXIMIZE PATIENT SUCCESS RATES**

This data based presentation focuses on using a comprehensive Telehealth Remote Patient Monitoring systems to monitor hospital admission percentages for chronically ill patients. Discuss methodology, data collection, reporting, and validation.

Attendees Will Learn How To:

1. Build a successful remote monitoring program
2. Report Clinical Outcomes
3. Address Fall Risk with Remote monitoring

**Georgia Brown, Senior Vice President, VITALPARTNERS 365, Dallas, TX**

*Georgia Brown, RRT serves as Senior Vice President for Home Healthcare Partners (HHP). Ms Brown joined HHP in 2004 and brings very diverse management expertise with a clinical and financial focus. She has 17 years of Home Health Management experience including financial modeling and analysis, financial due diligence, program development, billing and collections, and quality improvement. Georgia is the developer and leader of VitalPartners 365™ - HHP's telehealth program. VitalPartners 365™ is considered one of the top telemonitoring programs in the nation demonstrating a significant reduction in hospitalization for chronically ill home health patients.*

*VitalPartners 365 is program providing remote patient monitoring to 2100 home health patients currently. The program began in 2006 and has monitored more than 7,000 Medicare patients and has greater than 1 Million patient days of remote monitoring experience. VitalPartners current 30 day rehospitalization rate is 7.4% compared to the reported 19.6% nationally demonstrating a greater than 60% reduction in the 30 day hospitalization rate.*

**2:30PM - 3:00PM**

**AFTERNOON BREAK/REFRESHMENTS**

**3:00PM - 4:30PM**

**PANEL DISCUSSION MODERATED BY HONEYWELL HOM MED**

Listen and learn as top industry leaders and national Telehealth speakers sit together and offer insight and opinions as well as data and analysis on the in's and out's of Telehealth. What does telehealth mean to the future of Healthcare? How to get through reimbursement barriers? How can you benefit from getting in early? What is the truth behind the costs vs. benefit? Take advantage of the intimate classroom setting with this open discussion on what Telehealth really means to the future of Healthcare.

Moderated by:

**Terry Duesterhoeft, President, HONEYWELL HOMMED, Brookfield, WI**

**John Doherty, Director of Global Marketing, HONEYWELL HOMMED, Brookfield, WI**

**4:30PM – 5:00PM**

**CLOSING REMARKS/CONFERENCE END**

### CONFERENCE FEE'S AND REGISTRATION

**Conference Fee: \$2,390 Conference Documentation CD: \$615**

(Documentation CD includes copies of all proceedings on CD and shipping is included)

**REGISTER 3 & GET 1 FREE!**

Any organization registering three persons at the same time will be entitled to a fourth registrant FREE of charge!

PAYMENT: ACI must receive payment 5 days after receiving booking form.