

TESTIMONY

Delivered by Ann Ryan, RN, Telemonitor Nurse
Backus Home Health Care

Before the Human Services Committee

March 11, 2014

Raised Bill HB 5445 IN SUPPORT: AN ACT CONCERNING MEDICAID COVERAGE OF TELEMONITORING SERVICES

Good afternoon Senator Slossberg, Representative Abercrombie and members of the Human Services Committee. My name is Ann Ryan. I am an RN who manages the Telehealth Program and Backus Home Health Care in Norwich, CT.

I fully support raised bill HB5445: An Act Concerning Medicaid Coverage of Telemonitoring Services.

In my testimony, I have laid out five strong reasons to support this bill:

1. Backus Home Health Care provides equipment to our patients to monitor blood pressure, pulse rate, oxygen saturation and weights daily. We encourage our patients to purchase these monitoring devices so that they can become more independent by monitoring themselves post discharge. For our low income patients, the cost of purchasing their own equipment is prohibitive yet having our home care agency provide telehealth in home allows us, once patient is no longer acutely ill, to decrease our skilled nursing visits while close monitoring continues. Telehealth bridges this gap until our patients are able to self monitor.
2. Our telehealth system provides information to the doctors involved in the form of objective printable data. When readings are abnormal the telehealth vital signs report, the patients medication profile and requested action by the registered nurse are communicated to the doctor to advocate for change for our patients. The doctors have responded favorably to our faxes and communication and often action can be taken by the doctor based on this information thus avoiding unnecessary doctor appointments, nursing visits, trips to the emergency room and ultimately hospital admissions.
3. Because of our telehealth monitoring system, we are able to identify problems earlier and intervene in the areas of congestive heart failure, diabetes, chronic obstructive pulmonary disease and hypertension. By looking at vital signs and patient responses to disease specific questions, we

are able to indicate potential exacerbations and then able to follow up the same day. Our first step is a phone call to the patient to determine if diet or medication interventions would be appropriate. For example an as needed medication to treat cardiac or respiratory complications, compliance with a low sodium or sugar free diet. Sometimes a skilled nursing visit is warranted to evaluate, the telehealth nurse can communicate what problems have been identified. If the phone intervention or nursing visit is not sufficient we arrange to have the patient seen at the doctor's office promptly. We are working together to reduce the rate of emergency room treatment and acute care hospitalization.

4. With the telehealth program, our patients report increased compliance with medications and disease self-management. They take greater interest in their illness, what causes exacerbations and what interventions may keep them out of the hospital.
5. Telehealth reinforces what we are teaching in the home with regard to signs and symptoms reportable to their doctor in preparation for discharge from homecare services.

Let me close by telling you a story of one of our patients:

Mr. Dan Rattell, who is one of our telehealth patients, was going to come and testify today but became ill on Monday and asked me to speak for him. On Monday we called him because his blood sugars were elevated. He reported to the telehealth nurse that he was sick and due to his recent exacerbation of his Chronic Obstructive Pulmonary Disease (COPD), we called the doctor who was able to see Mr Rattell the same day.

Mr Rattell states "I don't know what i would do without this program." He reports that "having the machine in the living room and knowing that the nurse will call and check on me if I don't send my readings has kept me going. Without it, I wouldn't check my blood sugars regularly. The encouragement from the nurses over the phone and their help in calling the doctor to get me seen has been helpful in trying to keep me out of the hospital." Dan has had several medication changes to aid in the management of his congestive heart failure, diabetes and COPD that were identified by his telehealth readings, reported by the telehealth nurse and acted upon by his doctor.

Telehealth monitoring works and is a worthwhile expenditure in helping our low income patients to become more involved in their care and preventing rehospitalizations.

Thank you and please contact me if you have further questions.