IN-HOME TELEMONITORING: A HEALTHIER KENTUCKY AT LESS COST

THE PROBLEM
According to “America’s Health Rankings,” Kentucky is ranked near the bottom in several key health indicators. The Commonwealth ranks 50th in Preventable Hospitalizations and Cancer Deaths, 49th in Smoking, 46th in Adult Obesity, 43rd in Cardiovascular Deaths, and 33rd in Adult Diabetes. Overall, Kentucky ranks 47th in the nation in health.\(^i\)

A SOLUTION: IN-HOME TELEMONITORING
In-home telemonitoring (or, remote patient monitoring) involves the deployment of easy-to-use technologies that help patients and physicians track conditions at home. Once tracked, the information is securely relayed to a health care professional in another location to provide assessment and treatment.

What are the Benefits of In-home Telemonitoring?

1. Early Detection. By enabling doctors/nurses to monitor patients remotely, slowly developing conditions can be detected and treated before they become serious and require costly hospital admissions.\(^ii,iii\)

2. Decreased Utilization. The Dept. of Veterans Affairs (VA) has extensively studied the use of in-home telemonitoring to care for veteran patients with chronic conditions. The results showed dramatic decreases in service utilization (see table).\(^iv\)

3. Lower Readmissions. Countless studies have demonstrated dramatic reductions in hospital readmissions and emergency room visits.
   - For example, one NY study saw hospitalizations drop by 55% and emergency visits by 29%.\(^v\)
   - An IN program used telemonitoring to lower hospital readmissions for patients with CHF and COPD to just 3%—down from the national average of 20%. The greatest success story was a patient with 9 chronic conditions and 11 admissions in the previous year (total cost=$156,000) who stayed out of the hospital during the entire 7-month program.\(^vi\)

4. Lower Cost. Reductions in hospital admissions and utilization inevitably lead to lower costs. For example, St. Vincent Health System in PA used in-home telemonitoring to reduce readmissions in all 26 of its facilities, netting a 100 percent return on investment in just two months.\(^vii\)

5. Rural Access. Telemonitoring helps connect health care providers to patients in rural America. Last fall, the University of Mississippi Center for Telehealth launched a successful pilot to manage 200 uncontrolled diabetics in rural parts of the state through aggressive in-home telemonitoring and intervention. All enrolled patients reported their disease was under control for the first time, they have lost weight, and are feeling better.\(^viii\)

STATE COVERAGE OF IN-HOME TELEMONITORING
Currently, 18 states provide coverage for in-home telemonitoring services (see below):\(^ix\)

- Alabama
- Alaska
- Colorado
- Illinois
- Indiana
- Kansas
- Louisiana
- Maine
- Minnesota
- Mississippi
- New York
- Pennsylvania
- South Carolina
- South Dakota
- Texas
- Utah
- Vermont
- Washington

(See footnotes on reverse side).


Dr. Kristi Henderson, University of Mississippi Medical Center (UMMC) Center for Telehealth, Testimony before the US Senate Committee on Commerce, Science, and Transportation, Apr. 21, 2015.