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TELEHEALTH/TELEMONITORING AND HEALTH INFORMATION TECHNOLOGY

Description of ACA Provisions

- **Supporting care coordination of chronically-ill individuals with health information technology**
  The Innovation Center is authorized to test care coordination for chronically-ill individuals at high risk of hospitalization through health information technology-enabled provider network that includes care coordinators, chronic disease registry, and home telehealth technology. (Sec. 3021(b)(2)(B)(v))

- **Facilitate inpatient care of hospitalized individuals**
  The Innovation Center is also authorized to test the use of electronic monitoring by specialists based at integrated health systems to improve services to patients at local community hospitals. (Sec. 3021(b)(2)(B)(xvi))

- **Using telehealth services in medically underserved areas and facilities of the Indian Health Service**
  Another potential initiative of the Innovation Center will be to use telehealth to treat behavioral health issues, stroke, and improve the capacity of non-medical providers to provide health services for people with chronic complex conditions. (Sec. 3021(b)(2)(B)(xix))

North Carolina Initiatives:

- **Roanoke-Chowan Telehealth Network Grant**
  Roanoke-Chowan Community Health Center received a grant from the North Carolina Health and Wellness Trust Fund in 2006 to establish a daily remote monitoring and chronic care management program. Phase I of the program began in September 2006 and targeted high risk patients with diabetes, cardiovascular disease (CVD), and hypertension. Patients are given monitoring equipment, including a scale, blood pressure/pulse monitor, blood glucose monitor, and a pulse oximeter to monitor their health status daily. Data from these devices, along with other information about the patients' health status and functioning, is sent via a phone line or internet daily to a secure server. RCCHC RNs monitor data daily, contact the patient via phone and conduct a nursing assessment and education for any patient with abnormal readings. When the RN determines a potential need for a change in medical regiment my be needed, the RN informs the patient's primary care provider with the electronic health record (EHR). This program allows health professionals to intervene early if a patient's health began to trend downward. An external evaluation showed a statistically significant reduction in hospital charges for patients who participated in this initiative. Patients in the program demonstrated a statistically significant reduction in systolic blood pressure and have learned better self-management skills. During 2007-2009, additional funding was obtained by Kate B. Reynolds Charitable Trust, the Obici Foundation, Pitt County Foundation and Roanoke Chowan Community Benefit to expand RCCHC's remote monitoring program and implement a post discharge remote monitoring and chronic care