# WELCOME

You’re Guide to Success with Telehealth

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WELCOME

Honeywell HomMed is dedicated to improving the quality of patients’ lives and reducing the cost of healthcare by providing the industry’s most advanced and integrated solutions at home and beyond. The Honeywell HomMed telehealth system gives people the peace of mind of knowing someone is watching over them at all times and the motivation to take an active role in their own healthcare.

The Honeywell Telehealth Program Guide will assist you through all phases of implementing a successful telehealth program, from getting started through maintaining and growing your program. This guide represents information gathered from over 600 successful customer implementations globally serving over half a million patients.

Your Honeywell HomMed Telehealth Consultant will walk you through each step and assist your organization to establish the foundation to implement and grow your telehealth program. Successful implementation takes place over a period of time and includes a combination of onsite, remote, internal, and external meetings that are customized to your organizational needs.

Please be sure to check to ensure that you have received the following materials in your Honeywell HomMed Telehealth Program Welcome Kit before you begin:

- ✔ Welcome Letter
- ✔ Welcome Kit CD with the following files:
  - Telehealth Program Implementation Guide
  - LifeStream™ Manual
  - LifeStream™ Analytics Manual (Optional Feature)
  - Genesis DM Manual
  - Telemonitor Programming/Troubleshooting Guide
  - Telemonitor Patient Instruction Guide
  - Telehealth Standard Operating Procedures Folder
  - Telehealth Training Competencies Folder
  - Telehealth Tools Folder
You’re Guide to Success with Telehealth

What is a Telehealth Program?
A telehealth program combines the use of technology and clinical expertise to monitor patients’ vital signs. Monitoring takes place in a patient’s residence, seven days a week in order to improve their clinical outcomes, improve nursing efficiencies, and reduce healthcare costs. The benefits of telehealth include:

- Sense of security and reduced anxiety for patients and families
- Early intervention with health status decline
- Improves symptom management
- Reinforces patient self management education
- Increased communication among care providers
- Active involvement between patient and clinicians

Your telehealth program will be based on the needs of your organization, your end user, and your goals. There are multiple types of telehealth segments, ranging from home health to sub-acute care and from managed care to IDN (integrated delivery network), and beyond.

A successful telehealth program is one that:
- Changes the way an organization delivers care.
- Changes a client's health care behaviors as a result of evidence based disease management.

Honeywell HomMed Telehealth Care Delivery
Honeywell HomMed Telehealth Care Delivery is an integral part of The Honeywell HomMed Telehealth Ecosystem. It’s about changing health care behaviors, so the way you care for patients must fundamentally change. This change is not related to equipment features, but is based on:

- **Detection** of subtle changes in health status
- **Assessment** of health data using evidence based disease management
- **Control** of health status using standardized processes

Telehealth Care Delivery Criteria
- A team approach with designated roles and responsibilities and regular team meetings.
- Available to all patients at the start of care
- Available to all patients regardless of diagnosis
- Patient centric – not clinician schedule driven
- Based on telehealth data to determine when in person clinician visits are made.
- A higher skilled nursing visit frequency or clinical oversight within the first 2 weeks of care
- A consistent approach to daily monitoring
Chapter 1 - Key Steps to Successful Telehealth

1. Develop a Telehealth Approach

To successfully implement Honeywell Telehealth Care Delivery you must critically evaluate how telehealth will effect current care delivery and select an approach that best suits the organization. An approach, adopted at the beginning may or may not suit the organization’s later growth or goals, but like other program components it is regularly reviewed and revised as the program grows and evolves.

Each approach yields certain benefits and has related considerations. Your Honeywell HomMed Telehealth Consultant will work with the members of your management team to develop an approach that is tailored for your organization and one that meets your overall needs. Ultimately the telehealth approach decision rests with your management staff and should be supported by senior leadership. Several factors that should be considered when developing your approach to telehealth include:

- Organization Census
- Type & number of referrals
- Geography/Location
- Number of offices

2. Select a Leadership Team

The first step to successful implementation is convening a team of key decision makers who assume leadership and set direction for the Telehealth Program. This team may consist of individuals from the following specialties:

- Organizational Leadership (including those involved with the decision to implement telehealth)
- Multiple levels of Organizational Leadership
- IT/IS Specialists
- Quality Assurance/Improvement
- Marketing Representatives
- Point of Care (POC) or Electronic Medical Record (EMR) software management group (if separate and if interface will be installed)

3. Designate Key Roles

A sound telehealth program that achieves results (outcomes) has the right people in the right places doing the right things. Prior to implementation a thorough understanding of key roles and responsibilities will facilitate decisions about who will be involved in program operations. Below is a list of key roles and a brief description of individual attributes and area’s of individual involvement. Review them carefully and discuss with potential staff.
<table>
<thead>
<tr>
<th>Key Role</th>
<th>Description</th>
<th>Responsibilities may include:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Manager</td>
<td>Advocate for telehealth program that is well respected by staff, and has proven leadership skills.</td>
<td>• Program oversight&lt;br&gt;• Primary agency contact&lt;br&gt;• Coordinates process reviews&lt;br&gt;• Ensures policies and procedures are followed&lt;br&gt;• Facilitates routine team meetings</td>
</tr>
<tr>
<td>Technology Administrator</td>
<td>Skilled with computer software/installation, and responsible for establishing staff access levels.</td>
<td>• Download/install LifeStream software&lt;br&gt;• Manages access levels and user names and passwords&lt;br&gt;• Establishes regular oversight of system log&lt;br&gt;• Coordinates interface dialog between POC/EMR software company and Honeywell HomMed (If applicable)&lt;br&gt;• Coordinates LifeStream upgrades and communicates completion of the upgrade.</td>
</tr>
<tr>
<td>Telehealth Clinician(s)</td>
<td>One of the key roles to the success of your telehealth program. Must have strong clinical assessment skills, and the ability to direct and coordinate a patient’s care plan.</td>
<td>• Proficiency with the LifeStream application&lt;br&gt;• Communication with Telehealth care managers&lt;br&gt;• Cross coverage and peer support&lt;br&gt;• May carry a case load of telehealth patients&lt;br&gt;• Obtains physicians orders for intervention&lt;br&gt;• Uses trended data to facilitate patient visits or for contracting physician/clinician for patient plan of care.&lt;br&gt;• Follows policies and procedures&lt;br&gt;• Maintains competency of equipment management and patient instruction.</td>
</tr>
<tr>
<td>Back-up Clinician(s)</td>
<td>Same as Telehealth Clinician</td>
<td>• Is available to cover for Primary Telehealth Clinician if needed</td>
</tr>
<tr>
<td>Telehealth Care Manager(s)</td>
<td>Must have excellent clinical assessment and judgment skills that can interpret patient data to determine appropriate action for early intervention, and is a well respected and trusted staff member who has a strong rapport with patients and families.</td>
<td>• Proficiency with the telehealth monitor&lt;br&gt;• Reviews patient data according to agencies policies and procedures&lt;br&gt;• Cross coverage and peer support&lt;br&gt;• Communicates with patients/caregivers, physicians, and telehealth clinicians&lt;br&gt;• Attends and contributes to telehealth team meetings Participates in data collection</td>
</tr>
<tr>
<td>Equipment Inventory management</td>
<td>Detailed oriented person, who is familiar with equipment management/inventory tracking, and who will participate actively in the telehealth program in a supporting role.</td>
<td>• Maintains and tracks inventory,&lt;br&gt;• Coordinates process for installation and de-installation&lt;br&gt;• Follows established equipment policy and procedures Cleans and stores equipment between use&lt;br&gt;• Contacts Honeywell HomMed for replacement or return of equipment&lt;br&gt;• Participates in telehealth team meetings</td>
</tr>
</tbody>
</table>

Use caution that “other duties” do not preclude this person’s ability to case manage telemonitoring data for telehealth patients

At the time of publication of this guide, several states are reviewing the relationship of teletriage to scope of practice laws.

If one person is not assigned it’s very likely your organization will lose pieces of equipment. Choose someone who is very detail oriented, and keep inventory under lock and key.
<table>
<thead>
<tr>
<th>Role</th>
<th>Responsibilities</th>
<th>Examples</th>
</tr>
</thead>
</table>
| Marketing Liaison                         | Represents the organization to the external community, and communicates with referral sources, physicians, healthcare providers based on marketing plan. | • Prepares marketing plan that incorporates a telehealth approach  
• Collaborates with team to identify marketing needs  
• Provides medical community and citizen group demonstrations and education about telehealth  
• Provides individualized follow-up for recruiting physician advocacy and resolving concerns.  
• Coordinates team efforts for patient and physician satisfaction reporting. |
| Intake/Liaison Coordinator                 | One of the key roles to the success of your telehealth program. Identifies appropriate referrals for telehealth program. | • Reviews incoming referrals to identify potential patients for a telehealth program.  
• Facilitates processes that support appropriate and timely monitor placement. |
| Quality Assurance                          | Valuable telehealth team member that supports the program by the tracking of clinical outcomes and identifies improvement opportunities through reporting. | • Integrates federal or state quality improvement initiatives into telehealth program  
• Utilizes LifeStream and/or POC/EMR software reports for data tracking and outcome measuring  
• Tracking and reporting responsibilities comparing and evaluating various segments of your telehealth program. |

### 4. Establish Policies and Procedures

Policies and procedures address critical processes for basic implementation. At a minimum it’s recommended that you have:

- Telehealth Care Delivery policy
- Management of Telehealth Monitoring Data
- Telehealth Equipment Management policy.

*We have provided samples of these policies in chapter 6 along with many other examples of standard operating policies*

You are encouraged to develop and implement other policies as needed, which address data access and security, implementing a telehealth visit frequency, orientation, training, competency related to program roles, and integrating data between electronic patient health record software such as LifeStream and Point of Care (POC) and Electronic Medical Record (EMR) software.
5. Schedule Routine Telehealth Team Meetings

Telehealth Team Meetings are conducted weekly for the first six weeks of the program until processes are standardized and then semi-annually thereafter. Successful organizations report that the team meetings are the single most important activity to the success of their programs.

<table>
<thead>
<tr>
<th>Attendees</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Manager</td>
</tr>
<tr>
<td>Telehealth Clinician(s)</td>
</tr>
<tr>
<td>Back-up Clinicians(s) (Optional)</td>
</tr>
<tr>
<td>Telehealth Case Manager(s)</td>
</tr>
<tr>
<td>Quality Assurance/Data collection staff members</td>
</tr>
<tr>
<td>Marketing Liaison(s)</td>
</tr>
<tr>
<td>Clinical Educator, Intake/Admit Nurse(s), and Equipment /materials</td>
</tr>
<tr>
<td>Management staff</td>
</tr>
<tr>
<td>IT/IS Staff</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Meeting Length</th>
</tr>
</thead>
<tbody>
<tr>
<td>Approximately 1 hour</td>
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</table>

<table>
<thead>
<tr>
<th>Goals</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Review current program processes</td>
</tr>
<tr>
<td>• Facilitate continued communication</td>
</tr>
<tr>
<td>• Identify and change incorrect or inefficient processes that are not meeting goals</td>
</tr>
<tr>
<td>• Report and review current program statistics</td>
</tr>
</tbody>
</table>

Meeting Agenda

Review Current processes

• Intake and admission
• Installation and client teaching
• Case Management of telehealth data
• Care Coordination
• Equipment management
• Scheduled visit frequencies

Reporting

<table>
<thead>
<tr>
<th>What needs doing</th>
<th>Who is responsible</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current census of non-telehealth and telehealth patients</td>
<td>Intake/Admit Staff</td>
</tr>
<tr>
<td>Total number of admissions/readmissions in past week.</td>
<td>Intake/Admit Staff</td>
</tr>
<tr>
<td>Number of patients identified for telehealth at intake.</td>
<td>Intake/Admit Staff</td>
</tr>
<tr>
<td>Number of patients identified at intake who did not receive a monitor and reasons.</td>
<td>Program Manager</td>
</tr>
<tr>
<td>Number of hospitalizations and/or ER visits; telehealth and non-telehealth</td>
<td>Program Manager, Telehealth Case Manager, Intake/Admit, Nursing Manager</td>
</tr>
<tr>
<td>Marketing efforts in place to gain referrals which include telehealth?</td>
<td>Marketing</td>
</tr>
</tbody>
</table>
Telehealth success stories provide important information for tracking clinical outcomes. These Success stories are based on any positive event experienced by the telehealth patient’s use of the monitor.

**Patient Success Stories**
- Prevention of unplanned ER, hospital, urgent care or office visits
- Reduction in symptoms
- Change in medication/treatment
- Improved compliance or satisfaction

**Physician success stories**
- Increased referrals related to positive telehealth outcomes
- Examples of improved communication
- Satisfaction with program, monitor, client’s improvement

*Suggestions for Team meetings are located in the Telehealth Program Tools Section – Chapter 7 of this Guide.*

**6. Work with your Honeywell HomMed Telehealth Consultant**

The Telehealth Consultant is a trusted professional resource for implementing a successful telehealth program that will continue to grow.

The Telehealth Consultant:
- Uses clinical expertise and knowledge of disease management best practices, including clinical protocols and pathways, to support Detection, Assessment, and Control as the foundation of a telehealth program.
- Provides consultation and direction in implementing the most appropriate Honeywell Telehealth Care Delivery approach tailored to your organization’s needs.
- Interacts with all identified members of an organization’s designated telehealth team.
- Works to elicit and define realistic organizational telehealth goals, identify operational strengths and barriers affecting success and provide recommendations.
- Participates in internal product and collateral reviews providing clinical feedback and representing customer needs.
Chapter 2 – Introducing Telehealth

Introducing telemonitoring to potential patients, clinicians, and physicians is all in the presentation. A best practice no matter your audience especially by phone is to keep it simple. No lengthy explanation about equipment, reports, etc…is needed unless asked for. The four points people really want to know is:

- **What is it?**
- **What will it do?**
- **How will it affect them?**
- **What does it cost?**

Below you will find example scripts to use when introducing telehealth to potential patients, and healthcare providers using a variety of methods.

**Scripts for New Patients**

**By phone:**
“Our <insert organization name> checks blood pressure, weight, heart rate and oxygen using the Honeywell HomMed telemonitoring system. It takes about 5 minutes each morning and won’t interfere with your normal activity. We’ll show you how it works. See you……..)”

**In person:**
Begin by showing the monitor right away so they see it’s not a huge medical device, or a device they must ‘wear’ all day. Then briefly explain that telemonitoring is a way they and their (nurse, doctor, etc) can see how they are doing everyday. Provide the patient with a simple written introduction they can refer to.

**Scripts for Health care providers**

**By phone:**
“We are now using the Honeywell HomMed telemonitoring system to assess and monitor vital signs to include: BP, weight, heart rate and SPO2. We don’t plan to eliminate nurse visits to <patient name> but by reviewing daily vital sign data we can reduce the number of unexpected visits to your office, ER or hospital.

“Best of all we’ll know how <patient name> is doing everyday. A nurse will continue visits on days when (she/he) really needs a face to face. On those days when a nurse isn’t in the home, we can continue to support medication compliance and symptom management through telephone contact.”

**In Person:**
“The monitor visually and verbally prompts <patient name> to step on the scale, place the BP cuff and finger probe. Additionally we program questions to obtain subjective data about symptoms. The information is transmitted to the office and displayed where a clinician reviews readings and makes a call to <patient name> if needed.”
Additional Key Points

IF they ask:
- Telemonitor placement is not a trial or experiment.
- The telemonitoring system has been used with thousands of patients since 1999.
- The reliability and accuracy comes from the fact that the system is an FDA approved non-invasive device.
- The monitor is provided at no charge OR patients will not be billed for monitor use (unless the organization providing telemonitoring has a private pay arrangement)
- The transfer of data is secure and HIPAA compliant
- Trend reports are available, but we won’t bombard you with endless reports

Summarize and Connect
- We’d like to send you a report prior to <patient name> appointments or if there are concerning changes in assessment findings. Of course you’re welcome to request reports at any time.
- As a courtesy I’ll be sending a short follow-up letter with information.
- If you have more questions or interest let me know. I’d be glad to have (marketing person name) our (title) schedule a short 5 minute introduction at your office or, send you some information, if you prefer.

Other support comments:
- We’ve chosen to implement telemonitoring as way to manage our patients even more effectively, by identifying potential problems early.
- This contributes to reduced ER visits, hospital admits, and unplanned visits to your office that can impact your schedules (customize as needed)
- We won’t substitute telemonitoring for nursing support. However, telemonitoring allows us to make visits on days the patients really needs the nurse.
- Others using telemonitoring have found communication between physicians and staff has been improved, is less time consuming, and provides objective reliable data, when you want it.
- I’d like to send you a simple packet of information. We’d also be glad to have (marketing person name-role) make a brief visit and show you the monitor.
Chapter 3 – Getting Started

Strategic Planning Overview
A key component of any successful Telehealth Program is adequate planning prior to implementation. The Strategic Planning Meeting assists the Honeywell HomMed Telehealth Consultant in determining the timing of implementation activities based on your organizational needs. Your Honeywell HomMed Telehealth Consultant will contact you to set up this initial meeting and provide you with any documents to be filled out prior to the meeting.

Strategic planning activities are completed with a combination of conference calls and on-site contacts with your Honeywell HomMed Telehealth Consultant. The manner in which these activities occur is determined by the size of your program.

What does the Strategic Planning Meeting do for you?
- Provides the foundation for a successful telehealth program
- Establishes the timeline for implementing a telehealth program

Who should attend the Strategic Planning Meeting?
- Administrative Team
- IT/IS Representative
- Clinical Representative(s)
- Quality Improvement/Performance Improvement Team

What should be completed prior to the meeting?
- Complete Organizational Assessment (Telehealth Consultant to provide or also located in Chapter 7)
- Register on the Honeywell HomMed Partner Website, www.hommedpartners.com (Registration Instructions located in Chapter 7)
- Your telehealth consultant will provide recommendations on the materials that you should print out prior to your Strategic Planning Meeting.

Strategic Planning Meeting Components

Step One: Introductory Conference Call
Your Telehealth consultant will arrange an initial conference call to introduce you to the Honeywell Telehealth Approach, how to use this implementation guide, and the steps to setting up your Telehealth Program. The following topics maybe discussed during this initial conference call:
- Staff role identification for your telehealth program
- Identification of the Technology Administrator and IT/IS staff contact information
- Review agenda for the Primary Strategic Planning Meeting (SPM)
• Discuss Organizational Assessment Form (You will receive this via email from your Telehealth Consultant)
  o Purpose of the Organizational Assessment Form: This document assists with establishing the telehealth program direction, initiates goals and provides the telehealth consultant with an in-depth review of the organization.

**Step Two: Strategic Planning Meeting (SPM)**
After the initial Introductory Conference Call you Telehealth Consultant will schedule a Strategic Planning Meeting. The SPM will cover the following areas:

• **SPM Topics**
  o Establish timeline for your Telehealth Program Implementation
  o Confirm the vision and set specific goals for your Telehealth Program
  o Discuss Recommended Policies and Procedures (**Chapter 6**)
  o Plan daily work flows for your telehealth program
  o Set specific agendas for staff training
  o Review Technology and Equipment readiness
  o Discuss Equipment and inventory management
  o LifeStream Application download review and additional IT/IS staff questions
  o Provide LifeStream Demonstration
  o Identify Patients for Monitor Placement
  o Monitor and Peripheral Equipment Overview
  o Discuss agenda and schedule for training
  o Define tasks to be completed prior to training and assign staff
  o Staff Roles and Responsibilities as outlined in Chapter One.
  o Wrap-up

**Step Three: Organizational Prep Time**
Following the Strategic Planning Meeting, your organization will need to begin the process of preparing for onsite training. Completion of this work in advance will maximize the benefit of your onsite training provided by your Telehealth Consultant. This preparation is critical to establishing a solid foundation for a successful program.

• Input Data into LifeStream, such as:
  o LifeStream Users
  o Equipment
  o Care Providers
  o Medications (if applicable)
  o Diagnoses (if applicable)
• Develop Policies and Procedures
• Customize Installation and Patient Consent Forms
• Adjust staff scheduling to allow for onsite training time
Chapter 4 - Onsite Training

Overview
Onsite training follows strategic planning and takes place at the organization site. Training includes both classroom and hands on teaching. The Telehealth Consultant will work with you to determine a specific agenda that incorporates a plan to teach both the LifeStream™ software and use of the Genesis monitor. At the culmination of training competencies will be conducted.

Prior to Onsite Training
Before your Telehealth Consultant arrives, there are several considerations and preparations necessary to ensure a successful training session. It is important to identify as many patients as possible to be placed on a monitor during onsite training. A review of current patient census a few days before onsite training will help identify potential patients for monitor placement. The more installations your staff can observe the more skilled they will be at the end of the training session, and the more likely your program will succeed.

During training place as many monitors as possible for the most success.

Patient Selection Criteria:
- Patients with frequent hospitalizations
- Patients that visit the ER frequently
- Patient can be evaluated for monitor placement regardless of diagnosis
- The monitor is a tool that enhances health care delivery and is not disease specific
- Patients determined by patient specific program design

The primary goal is to collect data, establish trends, identify subtle changes, and provide timely intervention. All staff from intake to the field can identify patients that would benefit from daily monitoring.

Patient Exclusion Criteria:
While most patients benefit from monitoring, there are some potential exclusion criteria

- Patient is physically/cognitively unable to learn the process AND has no able or willing caregiver.
- Patient is combative/displays behavioral problems.
- Patient is living in a residence unsafe for home monitoring.
- Patient is receiving less than 5 skilled visits under the Medicare Home Health benefit.
- Patient is receiving daily skilled nursing throughout course of care.
- Patient is not eligible per program design
Monitor Installation Training

- The initial monitor installation(s) are done by the Telehealth Consultant and are observed by designated staff from the organization.
- Subsequent installations are done by individuals who have been identified as a designated installer(s) and they will also conduct a training session to teach the patient how to use the equipment.
- When possible, it’s advisable for the Telehealth Case Manager to participate in monitor installations as well. This ensures multiple staff members understand the monitor installation process.

If your organization chooses to use non-skilled clinical people (i.e. personal care provider, homemaker, aide etc.) or non-clinical staff members (i.e. office employee, DME staff, volunteer) for equipment installation, they can perform the following tasks; however, a Telehealth Clinician should provide the patient with specific clinical education regarding daily monitoring.

- Provide simple directions to the patient on how to use the monitor and who to contact for questions.
- Show the patient how to answer a subjective question on the monitor.
- Explain to the patient the process of who reviews their vital sign data and possible scenarios that the patient may encounter or be asked to do, i.e. retesting.
- Have patient sign and date the informed consent document.

Non-skilled or non-clinical staff can instruct how to use the telehealth monitor, accessory equipment, and who to call for questions, but a Telehealth Clinician provides the clinical education for daily monitoring, and should include the following topics.

- The relationship of regular daily monitoring to symptom control and disease management
- How to use the monitor and accessory equipment properly and safely for accurate readings
- The purpose of the questions on the monitor and how to respond appropriately
- How their vital sign information is reviewed and how their physician is involved

Equipment Management:

- The designated equipment management staff member should have the monitor(s) and associated equipment prepared and ready for installation during onsite training.
- They should ensure that the equipment is labeled, and the required forms and accessory kits are also ready for the planned installations.
- The installer will require some instruction on the use of the equipment inventory management and monitor configuration sections within the LifeStream™ application.
Physician Involvement

Dependent on your organizational structure, it will be important to determine what type of documentation for physician involvement is necessary. For example:

In a Medicare certified home health organization, a physician’s order is written to reflect skilled activities associated with the covered service. As such, the order incorporates use of the telehealth system. The order must be specific and include the following information:

- Frequency of monitoring
- What is being monitored (i.e. BP, weight, oximetry, heart rate, blood glucose)

When placing a monitor on a Medicare home health patient at SOC, a separate phone call to the physician isn’t necessary as long as the order is incorporated on the CMS 485 form.

Physician Support

- Keep your physician referrals informed about the availability of telemonitoring and the benefits it provides
- Many physicians are not aware of telemonitoring and may think it is complicated
- Involve your marketing team in getting the word out to your referral sources
- If you experience difficulty, you may involve your medical director to address the physicians, peer to peer
- Follow up with the physicians when you have experienced a win with their patient

Policies and Procedures

- Policies and procedures are reviewed during the Primary Strategic Planning Meeting and need to be finalized prior to onsite implementation activities.
- Your Telehealth Consultant can answer questions as you finalize them.
- At a minimum the organization will need a policy addressing:
  - Telehealth Care Delivery policy,
  - Management of Telehealth Monitoring Data
  - Telehealth Equipment Management policy.

Please refer to Chapter 6 – “Developing Your Program” for more information on Policies and Procedures.

Your onsite training will be scheduled during your strategic planning meeting with your Honeywell Telehealth Consultant. Upon arrival at your organization, you consultant will work with you to determine a specific agenda that incorporates the following activities.
Telehealth Care Delivery Training

- Provides orientation to the principles and best practices for implementing Honeywell Telehealth Care Delivery.
- A review of why skilled nursing frequency is different from traditional schedule driven care.
- How to establish an appropriate visit protocol that reflects telehealth.
- Care collaboration and the relationship to telehealth
- Team roles and responsibilities
- Supporting Material
  - Telehealth Program Implementation Guide

LifeStream™ Software Training – is progressive and moves from basic to in-depth hands on training focused on the features and functions with LifeStream™. Topics covered include:

- Initial overview demonstration of the software application
- Hands on training on navigating through the various sections of LifeStream™
  - Data entry
  - Navigational Icons
  - Current Status
  - Vital Sign Alerts
  - Tabular Trends
  - Maintenance
  - Reporting
  - Remote programming
- Supporting Material
  - LifeStream™ Manual

Genesis Monitor Training – provides instruction about how the monitor operates to techniques for assuring accuracy of readings. Topics covered include:

- Hands on training through general operation
  - Set up wizard
  - Programming and data transmission
  - Automatic and manual readings
  - Verbal and Visual prompts
  - Patient questions and reminders
  - Use and Set up of accessories
  - Troubleshooting and error codes
- Installation and de-installation of monitor
- Patient instruction demonstration
- Supporting Materials Include:
  - Genesis Manual
  - Telemonitor Programming/Troubleshooting Guide
  - Telemonitor Patient Instruction Guide
LifeStream Connect - (If applicable) – provides instruction on the use of the data interface between your organizations Point of Care (POC) system and LifeStream™. Topics covered include:

- Technical summary on what data is sent between applications
- Data entry in POC that triggers data exchange between applications
- Clinical workflow planning to manage your data efficiently and avoid duplication
- Supporting Material:
  - LifeStream™ Manual
  - Interface Data Sheet

LifeStream™ View - (If applicable) – provides instruction on the use and management of the indirect web portal application designed to provide healthcare professionals, patients, and patients’ families access to the same clinical vital sign information collected by the LifeStream Telehealth Ecosystem. Topics covered include:

- Administrative management and assigning users
- Assigning patients to users
- General use of LifeStream™ View
  - Current Status
  - Vital sign data
  - Tabular Trends
  - Patient demographics
  - Reports
  - Access Security
- Supporting Material:
  - LifeStream™ View Manual

Concluding Activities

- Telehealth Consultant will summarize goals met during training
- Participating staff provide feedback about training and activities.
- Specific goals and accountabilities are agreed upon for the next six weeks.
- Training competencies for participating in onsite training will be completed.
- The business agreement between your organization and Honeywell HomMed specifies the amount of training provided; any additional training is available for a fee.
  - Staff turnover frequently necessitates additional training
  - Staff that is responsible for other orientation and training at your organization can assist in bringing new hires up to speed.

Training Competencies are located in Chapter 7, Telehealth Program Support Tools
Chapter 5 – Equipment Management

Equipment management is important to your Telehealth Program success.

1. Track inventory to keep equipment safe, maintained and clean for all patients
2. Develop best practice process and procedures for installation and de-installations of equipment

Storage of Equipment

- Choose a location that will protect the monitors from damage, misuse, or theft
- Keep monitors off floor surfaces
- Identify both ‘clean’ and ‘dirty’ areas to store equipment.
- Keep one or two original boxes in the event you must ship monitor back, no need to keep all shipment boxes, as this takes up additional space.

Equipment is covered by warranty; however, misuse resulting in damage will void the warranty (see contract for additional detail).

Procedure for Equipment Receipt/Delivery

- Locate the shipping or packing list
- Use the packing list and “Bill of Materials” (BOM) to verify that the shipment contains each item listed
- Notify Customer Service (888-353-5404) within 7 days of any missing or damaged equipment
- Label equipment to identify the organization and contact number
- Prepare equipment for installation

<table>
<thead>
<tr>
<th>Equipment Bill of Materials (BOM)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Genesis Classic (includes one of each)</strong></td>
</tr>
<tr>
<td>Genesis Classic Monitor</td>
</tr>
<tr>
<td>BP Hose 3’</td>
</tr>
<tr>
<td>BP Cuff- adult size III</td>
</tr>
<tr>
<td>Phone Cord 15’</td>
</tr>
<tr>
<td>Duplex phone Jack</td>
</tr>
<tr>
<td>Monitor Power Supply</td>
</tr>
<tr>
<td>Power Strip</td>
</tr>
<tr>
<td>Scale Cable (blue connector)</td>
</tr>
<tr>
<td>Pulse Oximeter Module and Finger Sensor (2pcs)</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>
Procedure for Monitor Installation

- A transport bag or clear plastic container is desirable for the monitor installation kits.
- Ensure that the selected transport container protects the equipment safely during transport.
- It is important to disconnect all attachments when transporting the monitor.
- Make sure that the Monitor installation transport container kit includes the following at a minimum:
  - Monitor and Power Supply
  - Scale, Power Supply, and Connecting cord
  - Adult size III BP cuff with hose and lure lock end
  - Sp02 finger sensor with connecting cord
  - Power strip
  - 15 ft. phone cord,
  - Phone duplex jack
  - Installation form
  - A patient informed consent form
  - Genesis DM Quick Start Guide
  - Telemonitor Patient Instruction Guide

- For infection control use a transport bag or container that protects the equipment and is easy to clean.
- It is NOT advised to use the original box the monitor was shipped to transport to the patient’s home as cardboard is not easy to keep clean.

Installation form

- Provides coordination of the installation process
- Assists with inventory tracking of equipment
- Promotes communication between the installer and the Telehealth Case Manager

Informed Consent Form

- Have the informed consent document signed by the patient at the time of installation
- Keep a copy in the patient’s home and a second copy is to be placed in the health care record

Sample forms can be found in the Tools Section (Appendix B) of this Guide.

Telemonitor Patient Instruction Guide

- Provides instructions to the patient on the proper use of the monitor and included is a section in which the patient can keep track of their vitals in a log if desired.
- Includes precautions regarding use of the monitor
- Leave a Telemonitor Patient Instruction Guide (P4430.06) in home with the patient

Additional Patient Instruction Guides can be printed if needed from the Telehealth Program Guide file located on this CD sent with your welcome packet.
**Accessory Kits**
In addition to the Monitor Kits needed for installation, we recommend that each installer carries an accessory kit that will include additional supplies possibly needed during installation. It is imperative to have enough accessories stocked and available to meet your installation needs.

*For example: How many people will assume responsibility for installation? Is there a chance they will need to do an installation at the same time?*

Extra blood pressure cuffs must be purchased from Honeywell HomMed. All other accessories may be purchased at your local hardware store or from Honeywell HomMed.

To order, please contact us at 1-888-353-5404 or visit the website www.hommedpartners.com

<table>
<thead>
<tr>
<th>Item</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phone extension cords (7-ft., 12-ft., 15-ft., and 25-ft. lengths)</td>
<td>2-3 each</td>
</tr>
<tr>
<td>Duplex phone jack</td>
<td>2-3 each</td>
</tr>
<tr>
<td>Triplex phone jack</td>
<td>2-3 each</td>
</tr>
<tr>
<td>Phone-in-line coupler</td>
<td>2-3 each</td>
</tr>
<tr>
<td>Genesis DM Field Reference Guide</td>
<td>1</td>
</tr>
<tr>
<td>Small blood pressure cuffs: Adult I or II</td>
<td>2</td>
</tr>
<tr>
<td>Large blood pressure cuffs: Adult IV</td>
<td>2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Optional Accessories</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Flashlight</td>
<td>1</td>
</tr>
<tr>
<td>Tape to secure phone cords</td>
<td>1 Roll</td>
</tr>
<tr>
<td>Roach Resistant RetroKit</td>
<td>1</td>
</tr>
</tbody>
</table>
Procedure for De-installation

- Detach all accessories from the monitor
- Place all accessory parts in selected transport bag or clear plastic container.
- Close bag or clear plastic container.
- It is advised if using a transport bag to close the first bag and place it in a second plastic transport bag. Make sure bags a securely closed prior to leaving patient’s home.
- De-installed monitors are returned to the designated ‘dirty’ area for cleaning

Cleaning the Monitor

- Unplug the monitor and wipe all surfaces with the recommended cleaning supplies and solutions
- Store properly cleaned equipment in a clean transport bag or clean clear plastic container and place in the ‘clean’ storage area.

A list of approved cleaning products can be found in the Tools Section of this Guide.

Special situation: Infestation

If there is ever any question or evidence that a monitor or equipment have been in locations where insect infestation is suspected, call Honeywell HomMed Customer Service, as we will provide you with proper containment and transportation instructions. There is an additional charge for de-infestation service. In addition, we do offer an insect resistance retrofit kit; to order contact Customer Service.

DO NOT attempt to disassemble or open the Genesis DM Monitor at any time – you will void the warranty and possibly damage the monitor.

If customer service requests that you ship your equipment back to Honeywell HomMed, please follow the directions below.

1. Carefully pack the equipment in its original box with its original protective packaging materials. If you do not have the original box, use any sturdy box with at least one-inch clearance around the equipment for protective packing materials.
2. Pack transported equipment in shipping box and tape all seams.
3. Clearly place the **RMA** number provided by Customer Service in bold letters on the outside of the box.
   - **RMA** – Return of Materials label issued to customer by Honeywell Customer Service; attach label to box when shipping equipment
4. Ship to the location provided by Customer Service – add in address after confirming with CS

**DO NOT** use “roach bombs”, sprays, or types of disinfectants on equipment or packing transport box.
**Procedure for Routine maintenance**

Equipment quality control checks and calibration are done at the time of manufacture. In addition, Honeywell HomMed recommends that you establish and routinely follow a calibration schedule for all measurement devices, such as a once annual calibration check as a minimum.

Each agency should set a calibration check/schedule for ALL of its measurement equipment according to Federal, State, or other accrediting agency requirements, such as the Joint Commission (JCAHO). If there is a question that is unresolved after following the recommended troubleshooting, contact Customer Service as 888-353-5440.

If equipment malfunctions, has been dropped or damaged, or appears to be out of calibration, you may choose to verify calibration using the instructions located in the Genesis DM Manual, or you may contact Customer Service.

**Procedure for Equipment repair**

Customer Service authorizes any repairs of Honeywell HomMed equipment and accessories; for repair of peripheral devices (i.e. glucometer, PT/INR, Peak Flow Meter) contact the manufacturer. The equipment may be repaired or replaced depending on the findings of the evaluation.

If any equipment needs repair, contact Customer Service and we will be happy to troubleshoot the problem with you to determine the appropriate correction. Please be prepared to identify the equipment and describe the problem in detail. If the damaged item is a monitor, scale, pulse oximeter, or GPRS device, please provide the model and serial number to Customer Service when you call.

- Monitor – model and serial numbers are located on the bottom of the monitor
- Scale – model and serial numbers are located on the side or bottom of the scale.
- Peripheral medical devices – contact the manufacturer of the device.

The Honeywell HomMed equipment repair policy is as follows:

- ✔ If the item is under warranty and the repair is covered under the warranty, there is no charge for the repair service.
- ✔ If the item is no longer under warranty, or if the repair is not covered under the warranty, we will charge a fee for the repair.
- ✔ For warranty information, please refer to your contract with Honeywell HomMed.

**For return:** Package the equipment in a suitable box with protective padding. Contact Customer Service at our Toll Free number 888-353-5404, and they will provide instructions on how the return should be handled.
Procedure for ordering additional equipment
Additional accessories and peripherals can be ordered from Customer Service (888-353-5404) or via the website www.hommedpartners.com.

Equipment Inventory Procedure
LifeStream™ provides inventory tracking and reports. Determine a primary person responsible for interacting with the system to manage the inventory. The equipment manager or installer is the most likely choice to perform any actions in the LifeStream™ for equipment inventory and tracking, to so sign in to LifeStream™ using your unique username and password.

Equipment List in LifeStream™
To view a list of the telemonitoring equipment that has been entered into LifeStream™:

✓ Click on Equipment List on the left side of the screen under Organization:

This will bring up the following display of your telemonitoring equipment and peripherals such as scales, and oximeters, for example:
There are 4-5 tabs for equipment tracking within LifeStream™ depending on software version of LifeStream™

1. Monitor
2. Scale
3. MedPartner
4. Oximeter
5. GPRS

Each Tab will display the following information to be used to track all equipment entered in LifeStream™

- Displays the Serial Number, Model Name, Software Revision Number (if applicable)
- It indicates the current status of the equipment whether assigned, available, in maintenance or needs to be picked up
- It also displays the site location that the equipment is assigned
- At the bottom display of each tab you will find a status summary of the equipment entered in LifeStream™

*Adding a note about equipment
- Click on Equipment List
- Highlight the piece of equipment from the list
- Then click on the “Add Note” Icon on the toolbar (see picture below)
- This will open a “Note” box which will allow you to enter notes for that piece of equipment.
- Standard Reports, Equipment List, Click on “Options for Equipment” icon, and make sure the “Include notes for equipment is checked” click OK, and the report will then show the equipment with the attached notes.

Equipment Tracking is accomplished using Equipment List Equipment History Reports in LifeStream™
The Equipment List Report in LifeStream™

LifeStream™ provides a list of standard reports that will allow you to pull information from your database. To view the provided standard Equipment List Report:

- Click on Standard Reports
- Site Reports
- Then click on Equipment List

This report shows inventory and assignment history report for all equipment that you have entered into LifeStream™. The report displays monitors, ID cards (if applicable), scales, oximeters, GPRS Units, and MedPartner units.

![Image of the Equipment List Report in LifeStream™](image)

![Image of the Equipment Summary](image)

![Image of the Monitors](image)
The Equipment History Report in LifeStream™
This report shows the equipment assignment history for the selected patient as well as equipment type, model and serial number(s).

✔ Click on Standard Reports
✔ Site Reports
✔ Then click on Equipment History
Chapter 6 – Developing Your Program

**Telehealth Policy**

The HomMed Telehealth Program assists in identifying patient needs, detect subtle changes in condition and allow for early intervention. Providing care in this manner not only enables improvement to the quality of clinical, humanistic, and financial and outcomes, but also empowers the patient to participate each day in the management of their own health care, optimizing their quality of life.

This section contains sample policies and procedures necessary for implementing a successful Telehealth program. You can click on the link below to open a PDF file or you can open the folder titled, “Honeywell HomMed Standard Operating Procedures” on the CD. In this folder, you will have two folders, one will contain the PDF files and one will contain the original word documents. We have provided the original “Word” documents so that you may customize these documents with your organization’s information and logo if desired. Please consult your Telehealth Consultant for assistance in adding or deleting information from a policy. As your Telehealth program grows, your organization may decide that additional policies and procedures are applicable to other processes affected by Telehealth.

**Standard Operating Policies**

- Admission to Telehealth
- Care Management and Collaboration
- Telehealth Team Meeting
- Marketing Telehealth

**Equipment Management Policies**

- Equipment Receipt and Inventory
- Telemonitor Installation and Patient Instruction
- Telemonitor De-Installation and Removal
- Cleaning Telemonitor and Accessories
- Equipment Repair and Maintenance
- Equipment Infestation
- Equipment and Accessory Ordering

**Telehealth Monitoring Data Policies**

- LifeStream Management - Acknowledging Vital Sign Data
- Creating and Editing Pre-Configurations in LifeStream
- Programming Pre-Configurations using LifeStream
- Loading Pre-Configurations using LifeStream
- Programming Telemonitor using LifeStream
- Programming the Telemonitor

**Operations Policies**

- Complaint Handling
- Revisit to Access Equipment Issues and Patient Instruction
Chapter 7 – Telehealth Program Tools

A telehealth program that achieves clinical and financial outcomes has a care delivery process that is standardized. We have provided a selection of program tools that support these standardized processes. These tools will grow as the Honeywell Telehealth Ecosystem expands.

You can click on the link below to open a PDF file or you can open the folder titled, “Honeywell HomMed Telehealth Tools”. In this folder, you will find two additional folders, one will contain the PDF files and one will contain the original word documents. We have provided the original “Word” documents so that you may customize these documents with your organization’s information and logo if desired.

**Forms**
- Honeywell HomMed Monitor Installation
- Honeywell HomMed Information Consent for Home Telehealth
- Inventory Tracking Form
- Organizational Assessment Form

**Marketing Tools**
- Introducing Patients to Telemonitoring

**Outcomes Tracking**
- Telehealth Utilization Outcome Tracking—Single Client
- Telehealth Utilization Outcome Tracking—Aggregate Client Data
- Telehealth Scorecard
- Honeywell HomMed Monitoring Patient Satisfaction Survey

**Telehealth Team(s) Support Material**
- Telehealth Team Meeting Topics – Marketing
- Telehealth Team Meeting Topics – Data Management
- Telehealth Team Meeting Topics – General
- Telehealth Team Meeting Topics – Monitors and Plan of Care
- How to log onto Partner Website

**Clinical Tools**
- Triaging Alerts Overview
- Obtaining Accurate Weight Readings
- Obtaining Accurate Blood Pressure Readings
- Obtaining Accurate SpO2 Readings
Competencies

• Telemonitoring System Competency
• LifeStream Application Competency
• LifeStream Connect Competency
• LifeStream View Competency
• ECG@Home Competency
• LifeStream Analytics Competency

Equipment Management Tools

• Honeywell HomMed Monitor Cleaning Solutions
• Digital Phone Lines Overview
Glossary

Active patient
Currently monitored patient (monitor assigned, LifeStream receiving data).

CHF
Congestive heart failure

Compliance
DM Monitors only: Compliant with (meeting the requirements of) the law, regulations and policies established by the appropriate regulatory agency (e.g., the Food and Drug Administration) for the manufacture of medical devices.

CPT Codes
Current Procedural Terminology (CPT) codes are used uniformly to describe medical and surgical services performed by healthcare providers.

CPT codes are numbers assigned to every task and service a medical practitioner may provide to a patient including medical, surgical and diagnostic services. CPT Codes are used by insurers to determine the amount of reimbursement that a practitioner will receive by an insurer. CPT codes are developed, maintained and copyrighted by the AMA (American Medical Association.) As the practice of health care changes, new codes are developed for new services, current codes may be revised, and old, unused codes are discarded. Thousands of codes are in use, and they are updated annually.

ICD-9-CM codes (ICD Codes) and CPT codes are inherently related, as the diagnosis (ICD-9-CM code) must support the procedure (CPT code). All Medicaid and Medicare claims require a valid ICD-9-CM diagnosis code and a CPT procedure code in order to be reimbursed.

Also see: ICD Codes

Disease Management / Evidence-based disease management
Disease management is an approach to patient care that emphasizes coordinated, comprehensive care along the continuum of disease and across health care delivery systems.

Evidence-based disease management is an approach to practice and teaching that integrates pathophysiological rationale, caregiver experience, and patient preferences with valid and current clinical research evidence. Using diabetes mellitus as an example, we describe the importance of evidence-based medicine to the development of disease management programs. We present a method for developing and implementing evidence-based clinical guidelines, clinical pathways, and algorithms and describe the creation of systems to measure and report processes and outcomes that could drive quality improvement in diabetes care. Multidisciplinary teams are ideally suited to develop, lead, and implement evidence-based disease management programs, since they play an essential role in the preventive, diagnostic, and therapeutic decisions for patients with diabetes throughout the course of their disease.

Data packet
A string of data bundled together that normally includes all of the values collected during a monitoring session. LifeStream extracts the information, evaluates and assigns a status, and then
displays the information.

**DPOA (Durable Power of Attorney)**
The legal empowerment granted to an individual to act in the behalf of another individual.

**ICD Codes (International Classification of Disease codes; formally, ICD-9-CM codes)**
ICD Codes, deployed uniformly throughout the healthcare industry, are used to describe the recognized and therefore codified diseases, injuries, symptoms, and conditions. Current Procedural Terminology (CPT) codes are used to describe medical and surgical services performed by healthcare providers. ICD-9-CM codes and CPT codes are inherently related, as the diagnosis (ICD-9-CM code) must support the procedure (CPT code). All Medicaid and Medicare claims require a valid ICD-9-CM diagnosis code and a CPT procedure code in order to be reimbursed. See also: CPT Codes.

**Implement (implementation, implementing)**
*To put into practical effect; to install.* For the implementation of a telehealth program, numerous factors, personnel, departments, decisions, equipment, and meetings are involved, from conducting a baseline evaluation to determining who, what, when, where, and how, and the telehealth program will be instituted, staffed, budgeted, maintained, and managed.

**Inactive patient**
Non-monitored patient (No monitor, ID card, or MedPartner assignment)

**LifeStream™**
LifeStream is the Honeywell HomMed integrated clinical application system that powers telehealth monitoring. LifeStream integrates and connects patients, physicians, homecare, clinicians, hospitals, payors, caregivers, significant personnel, and others, within the healthcare network. LifeStream is the platform that provides ready access to critical data, vital signs, and more. LifeStream provides you with a way to identify problems sooner, allow for quick intervention, and drive better decision making with more predictable results to yield significantly improved patient outcomes.

**Point-of-Care (POC)**
The POC is the point, place, or location where care is given.

Monitors: Usually, the POC for monitors will be the location where the patient monitor actually is installed; the patient site or home.

**Set of vital signs**
All of the individual vital signs collected in one monitoring session, which is also called a data packet.
Telehealth

Telehealth combines the use of technology and clinical expertise to monitor patient vital signs. Telehealth is still a relatively new, evolving field and its concepts range from the very simple to the extremely complex. A basic analysis of the word reveals its two components, tele- and health.

Tele- is from the Greek combining form, usually a prefix, meaning afar or far off; distant or distance is implied.

Health comes from the Old English word hale or whole and involves the condition of optimal well-being.

Telehealth involves an electronic device, apparatus, system, or process for transmission of health-related data to a distant point where actual monitoring of the health data occurs.

Telehealth can be as basic as phone calls and email messages between patients and healthcare providers, or as advanced as performing remote robotic surgery.

Telehealth is the use of a digital network to provide automated monitoring and treatment delivery to a patient who is in a different physical location than the healthcare provider.

Forms of telehealth currently utilized include, but are not limited to, audio-video conferencing, home monitoring devices, data systems, computers, the Internet, specialized software applications, and more.

There are multiple types of telehealth segments, ranging from home health to sub-acute care and from managed care to IDN (integrated delivery network) platforms, and beyond.

The terms telehealth and telemedicine are often synonymous and can include all aspects of healthcare delivery such as administrative, financial, educational, and clinical methodologies.