

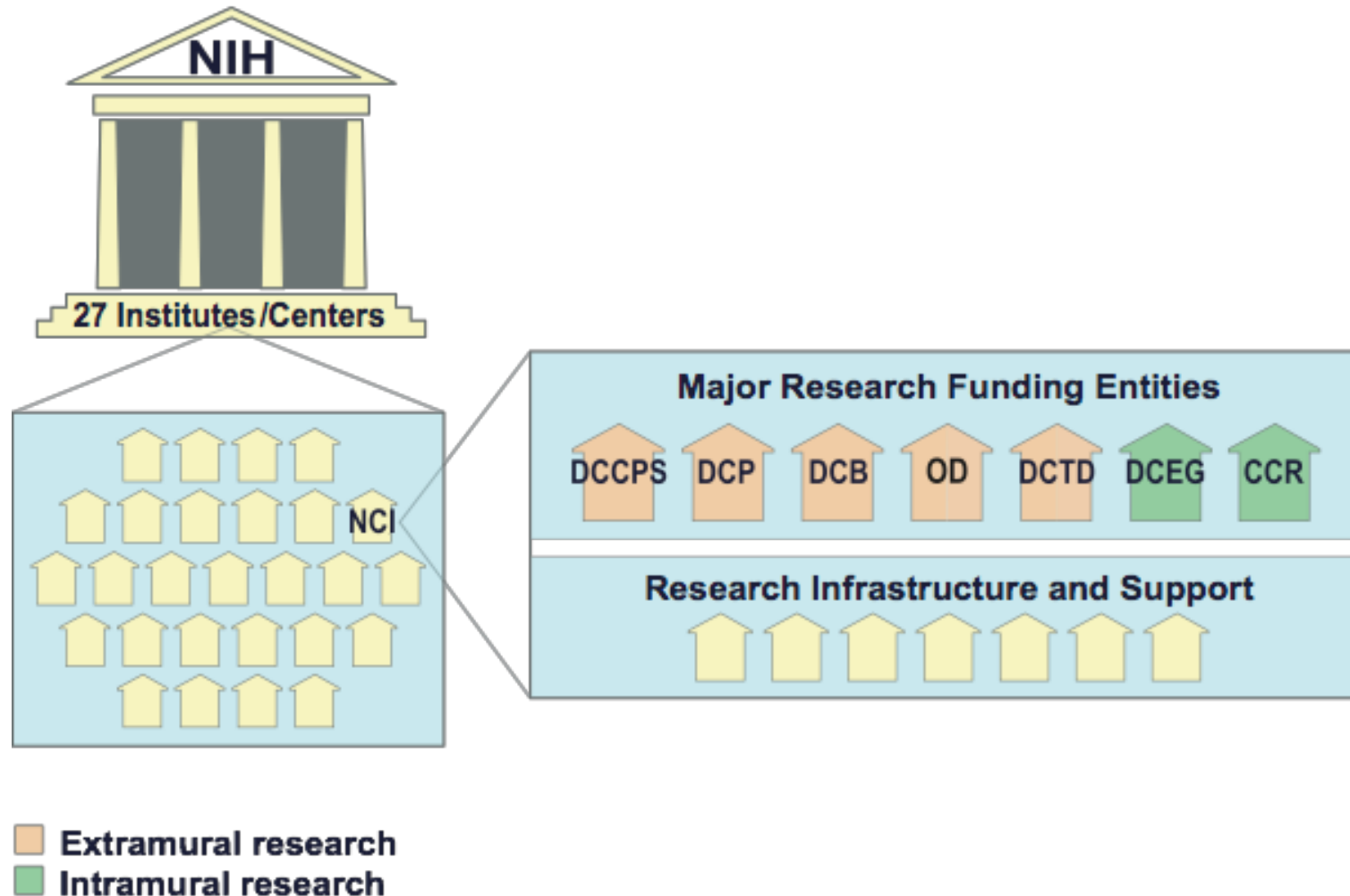
Telehealth at the NIH Clinical Center

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NCI/CCR is a part of the NIH Intramural Research Program



NCI Clinical Center Usage

Adjusted Patient Days* by IC

Institute	FY 2017	FY 2017 % Total
NCI	26,558	34.48%
NHGRI	2,324	3.02%
NHLBI	8,956	11.63%
NIA	1	0.00%
NIAAA	3,426	4.45%
NIAID	12,014	15.60%
NIAMS	1,607	2.09%
NICHHD	3,615	4.69%
NIDCD	14	0.02%
NIDCR	774	1.01%
NIDDK	4,419	5.74%
NIEHS	116	0.15%
NIMH	6,477	8.41%
NINDS	4,636	6.02%
NINR	115	0.15%
Total	77,017	100.00%

*Adjusted Patient Days = Inpatient Days + (OP Visits x 0.4)

% Financial Consumption* by IC

Institute	FY 2017 % Total
NCI	36.20%
NHGRI	2.91%
NHLBI	14.76%
NIA	0.01%
NIAAA	2.73%
NIAID	17.47%
NIAMS	2.14%
NIBIB	0.08%
NICHHD	4.38%
NIDA	0.01%
NIDCD	0.03%
NIDCR	0.60%
NIDDK	6.02%
NIEHS	0.19%
NIMH	5.61%
NINDS	5.38%
NINR	0.10%
Total	100.00%

*NIH CC Calculated Financial Consumption %

Unique Aspects of NIH Clinical Center

- Every patient is on a research study.
- Patients come from every state (and international)
- Patients are not billed for any aspect of their medical care performed at the Clinical Center.
- Third party payers (private or government) are neither notified nor invoiced for care at the CC.
- As a federal institution physicians can be licensed in any state.
- Care is always provided in partnership with a local medical team.

Telehealth Concierge Service



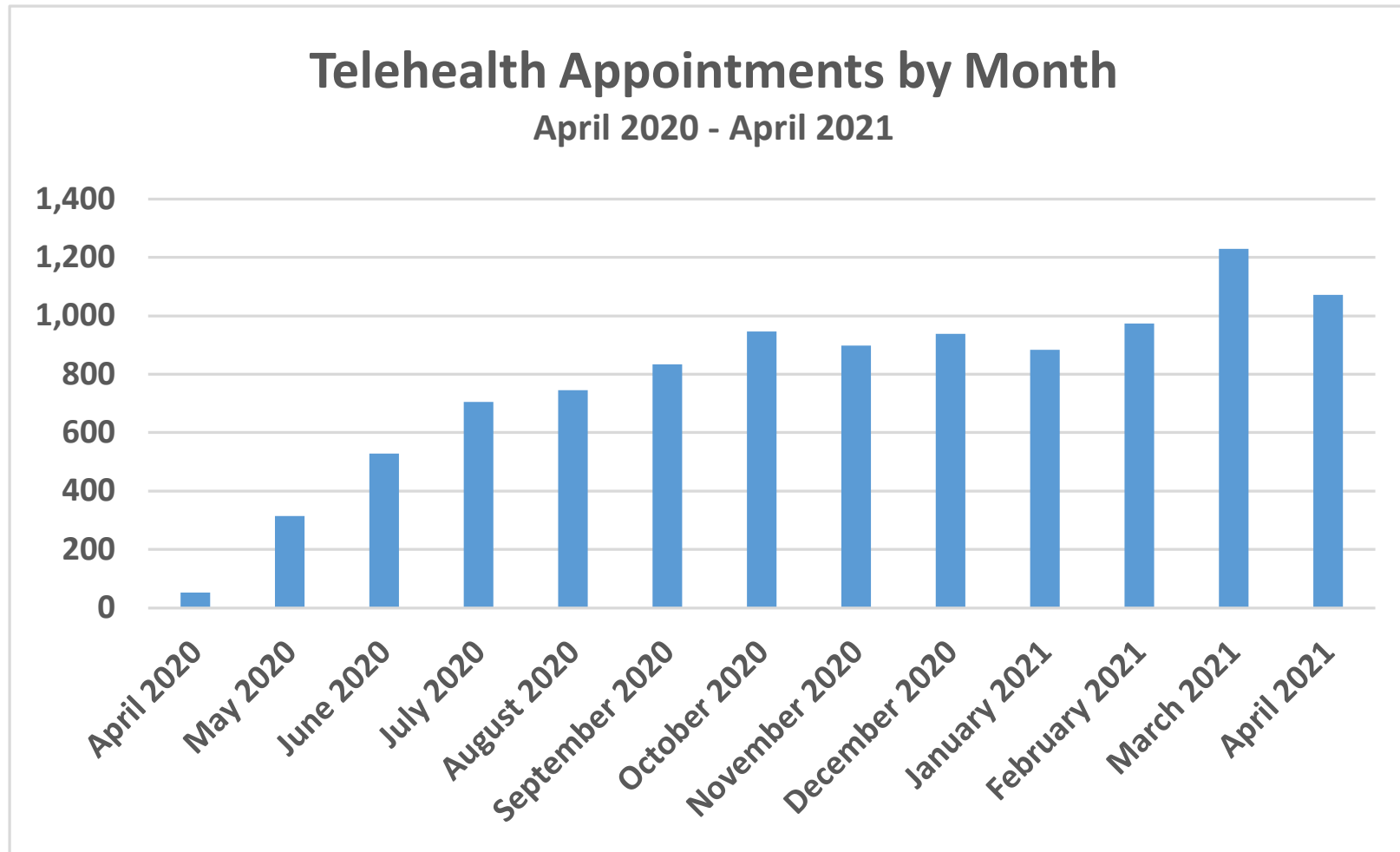
CC Health Information Management Department provides telehealth concierge services:

- Concierge services are necessary in order for the effort to be successful and provide important support services.

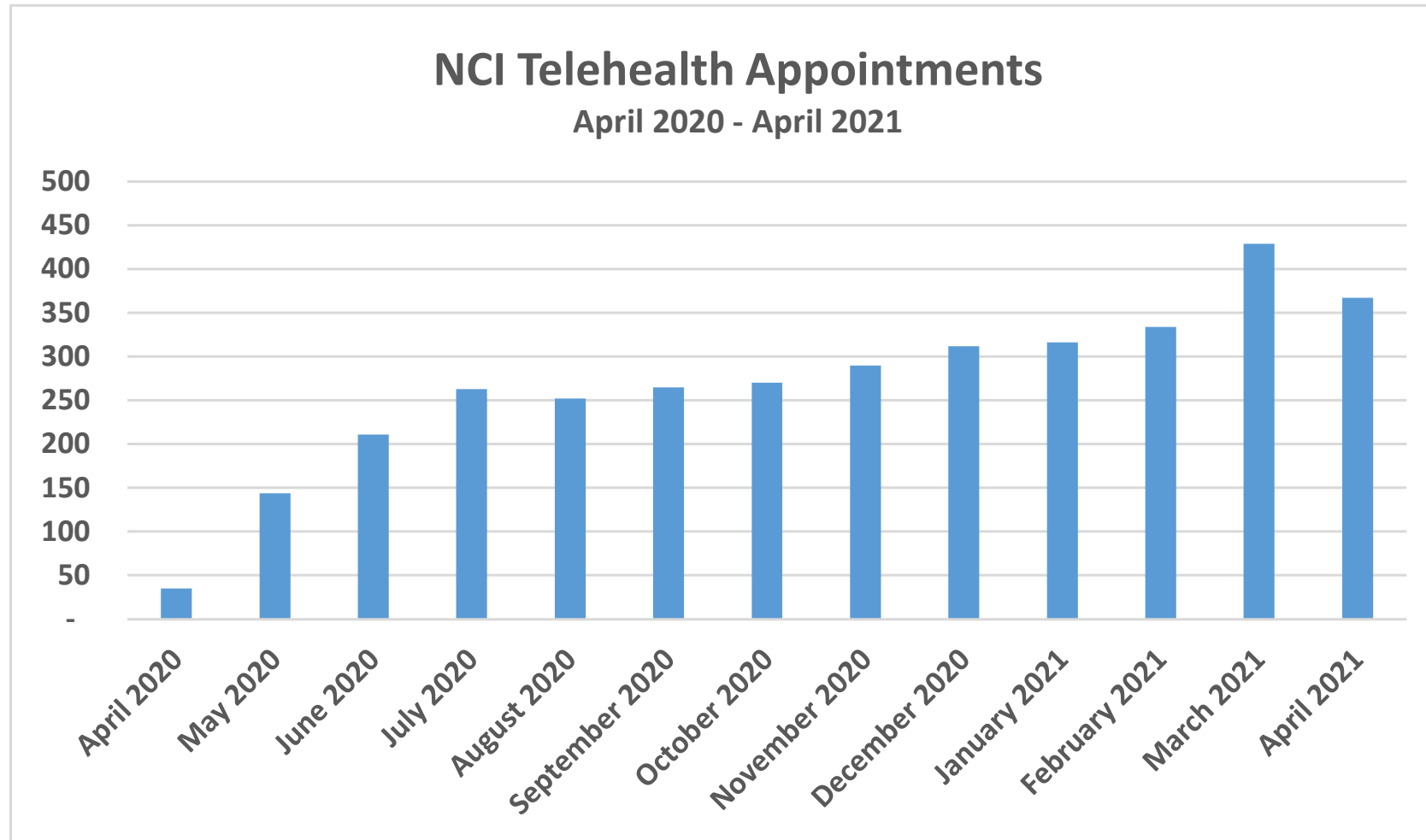
Concierge services include:

- Coordinating appointment scheduling in MS[®] Teams.
- Providing educational materials for patients and NIH staff.
- Contacting and educating patients about the telehealth (MS[®] Teams) process.
- Conducting technical check with patients day prior to appointment.
- Assisting patients with technical issues.
- Arranging language interpreters for visits as needed.
- Assisting providers with technical issues and documentation-related questions.
- Providing iPads for inpatients for telehealth visits.

NIH Telehealth Visits



NCI Telehealth Visits



Lessons Learned from Telehealth

- Research protocols need to be amended
 - Decrease frequency of visits to Bethesda and allow telehealth visits
 - Decrease requirements for physical exams
 - Batch correlative blood work when scientifically feasible
- Shipping of commercial agents is much easier than IND agents
- Facilitate the ability for patients to obtain clinical or research labs outside of Bethesda
- Need to work closely with sponsor, IRB and FDA

Improving Diversity of Patients with Telehealth

- Although we cover transportation and provide a stipend for housing the economics of traveling to Bethesda may impact certain groups disproportionately
- Telehealth has the potential to lessen these burdens
- Best done in collaboration with local institutions
- We are looking critically at our protocol design, correlative laboratory and biopsy schedule as well as “concierge services” to ensure access to our clinical trials is enhanced

Future Directions for Telehealth at the CC

In 2021, transition to a long term solution that fully integrates with our Clinical Research Information System (CRIS/CC EHR)

- **Enable comprehensive use of FollowMyHealth, the CC patient portal**
- **Create a virtual check-in and waiting room**
- **Create virtual telehealth visits in outpatient clinics and day hospitals or consultations**
- **Provide electronic signature capability for protocol consents and patient registration consents**
- **Leverage advanced security posture of CRIS**