

# **Project ECHO- Nevada**

## **Extension for Community Health Outcomes**

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# The Mission of Project ECHO Nevada

- To improve the health and well being of Nevadans
- Increase the capacity of primary care clinicians in rural and medically underserved areas of Nevada to safely and effectively treat chronic, common, and complex diseases



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# Project ECHO Nevada

- **ECHO** = Extension for Community Health Outcomes
- Replication of the innovative and pioneering work of Dr. Sanjeev Arora and Project ECHO New Mexico



# Project ECHO Nevada uses Existing Technology

- ECHO uses off the shelf video conferencing tools to connect the specialty team with primary care providers across the state to co-manage complex patients
- ECHO is not telemedicine, i.e.- no patient-provider interaction, thus no HIPAA or licensure issues



# How Project ECHO Nevada Works

- ECHO links teams of UNSOM clinical faculty or voluntary community specialists in Reno and Las Vegas with primary-care providers in rural and frontier hospitals and clinics



# How Project ECHO Nevada Works

- 3-6 patient presentations in a 60-90 minute clinic
- 20 minute didactic presentation followed by discussion
- Presentation materials and references posted on the ECHO website
- Video recordings of clinics are posted
- CE credits awarded

# An example of a case presentation template



## CASE PRESENTATION TEMPLATE Diabetes/Cardiovascular Risk Reduction Clinic

Date: \_\_\_\_\_ Presenter Name: \_\_\_\_\_ Clinical Site: \_\_\_\_\_

Patient Name: \_\_\_\_\_ ECHO ID: \_\_\_\_\_

Age: \_\_\_\_\_ DOB: \_\_\_\_\_ Gender:  Occupation: \_\_\_\_\_

Educational Level: \_\_\_\_\_ Current Smoker: ☐ Yes ☐ No Amount: \_\_\_\_\_

Check One: ☐ New Patient ☐ Follow-up Alcohol Use: ☐ Yes ☐ No Amount: \_\_\_\_\_

WHAT IS YOUR MAIN QUESTION ABOUT THIS PATIENT?

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ BMI: \_\_\_\_\_ Waist Circumference: \_\_\_\_\_ BP: \_\_\_\_\_

Family History of DM? ☐ Yes ☐ No Family History of CVD? ☐ Yes ☐ No

| Problem List | Duration | Current Treatment/Amount/Dosage |
|--------------|----------|---------------------------------|
|              |          |                                 |
|              |          |                                 |
|              |          |                                 |
|              |          |                                 |
|              |          |                                 |
|              |          |                                 |

Glucose: \_\_\_\_\_ Chol: \_\_\_\_\_ LDL: \_\_\_\_\_ HDL: \_\_\_\_\_ Triglycerides: \_\_\_\_\_ TSH: \_\_\_\_\_

Creatinine: \_\_\_\_\_ HbA1C: \_\_\_\_\_ Urine/Micro Alb: \_\_\_\_\_ ALT: \_\_\_\_\_ Other: \_\_\_\_\_

Current medication list: ASA? ☐ Yes ☐ No Statin? ☐ Yes ☐ No ACE/ARB? ☐ Yes ☐ No

Prevention of diabetes complications:

Date of last foot exam: \_\_\_\_\_ Date of last dental visit: \_\_\_\_\_ Date of last eye exam: \_\_\_\_\_

Date of last depression screening: \_\_\_\_\_ Date of last diabetes education: \_\_\_\_\_



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# Rural Specialty Care Needs Identified by Project ECHO Nevada Team

- Addictions
- Allergy treatment
- Antibiotic stewardship
- Asthma & pulmonary care
- Cardiology
- Child, adult, & family mental health & psychiatry
- Chronic pain & headache management
- Dermatology
- Diabetes & cardiovascular disease risk reduction
- Ethics
- Hepatitis C
- High risk pregnancy
- HIV/AIDS
- Infection control
- Occupational health
- Palliative care
- Pediatric obesity & nutrition
- Rheumatology
- Women's health





# Project ECHO Nevada Clinics in 2014

- Diabetes & cardiovascular disease risk reduction
- ID/Antibiotic stewardship
- Sports Medicine
- Endocrinology
- Dementia
- Rheumatology
- Mental health professional development
- Autism evaluation



Diabetes Clinic, Caliente, NV  
4.5.12



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# Project ECHO sites

- Pahrump
- Beatty
- Hawthorne
- Yerington
- Gardnerville
- Carson City
- Incline Village
- Ely
- Caliente
- Nixon
- Lovelock
- Winnemucca
- Battle Mountain
- Crescent Valley
- Carlin
- Elko
- Owyhee
- Jackpot

# Project ECHO Nevada Partners

- University of Nevada School of Medicine
- Orvis School of Nursing, University of Nevada, Reno
- Nevada Office of Rural Health
- Nevada Rural Hospital Partners
- Lou Ruvo Center for Brain Health, Cleveland Clinic, Las Vegas, NV
- Project ECHO New Mexico
- Primary care physicians and clinicians in rural and frontier hospitals and clinics in Nevada



# Project ECHO- The company we keep

- **Meta-ECHO- An ECHO of ECHOs**
  - University of New Mexico
  - University of Washington
  - Harvard University
  - University of Chicago
  - University of Utah
  - VA Health System
  - Community Health Centers of Connecticut

# ECHO as a disruptive innovation

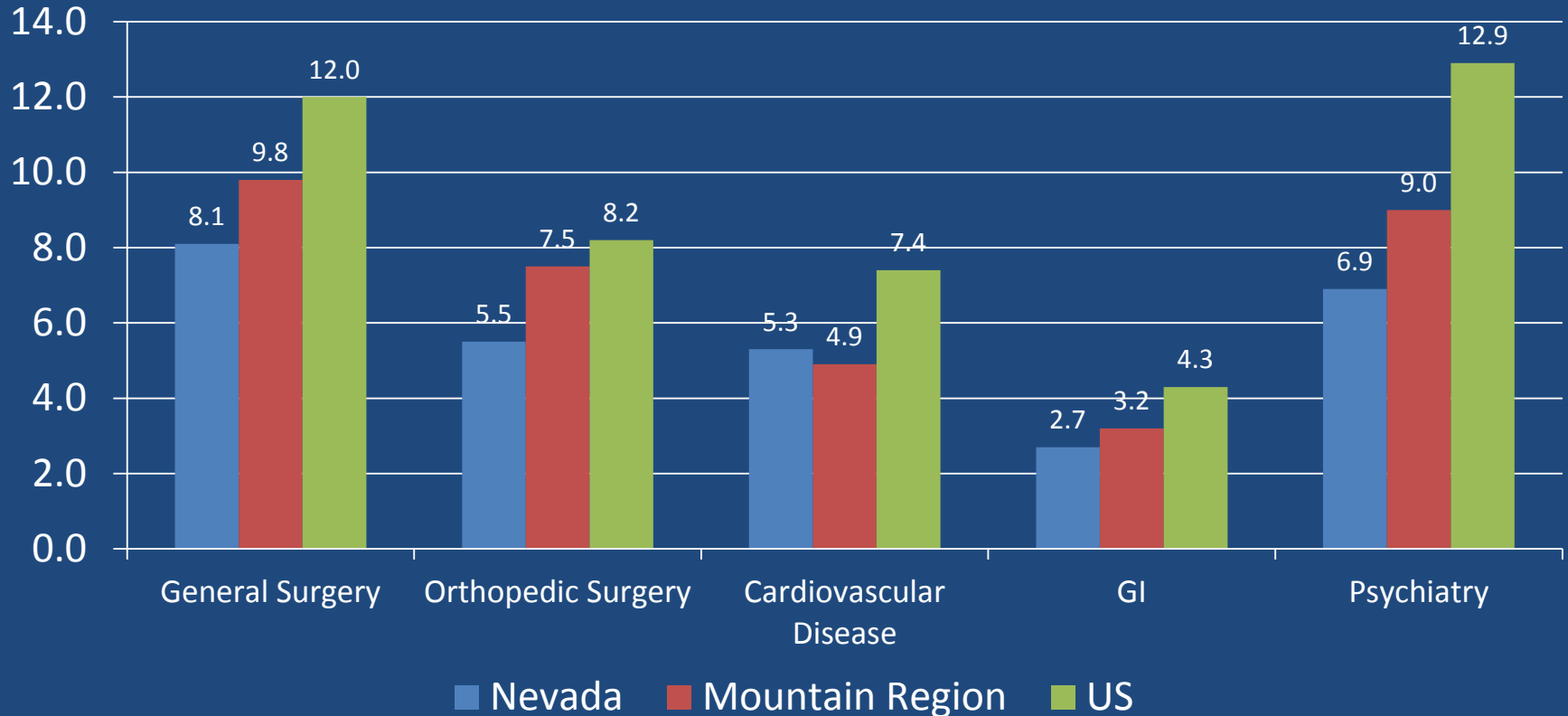
- A **disruptive innovation** is an innovation that helps create a new market and value network, and eventually goes on to disrupt an existing market and value network (over a few years or decades), displacing an earlier technology.
- ECHO recognized as such by Robert Wood Johnson Foundation grant

# ECHO- Demonopolizing Knowledge

- A successful model of medical education and health care addresses the disconnect between knowledge and practice and makes high-quality treatment available to more patients in diverse geographic

# Medical and Surgical Specialties

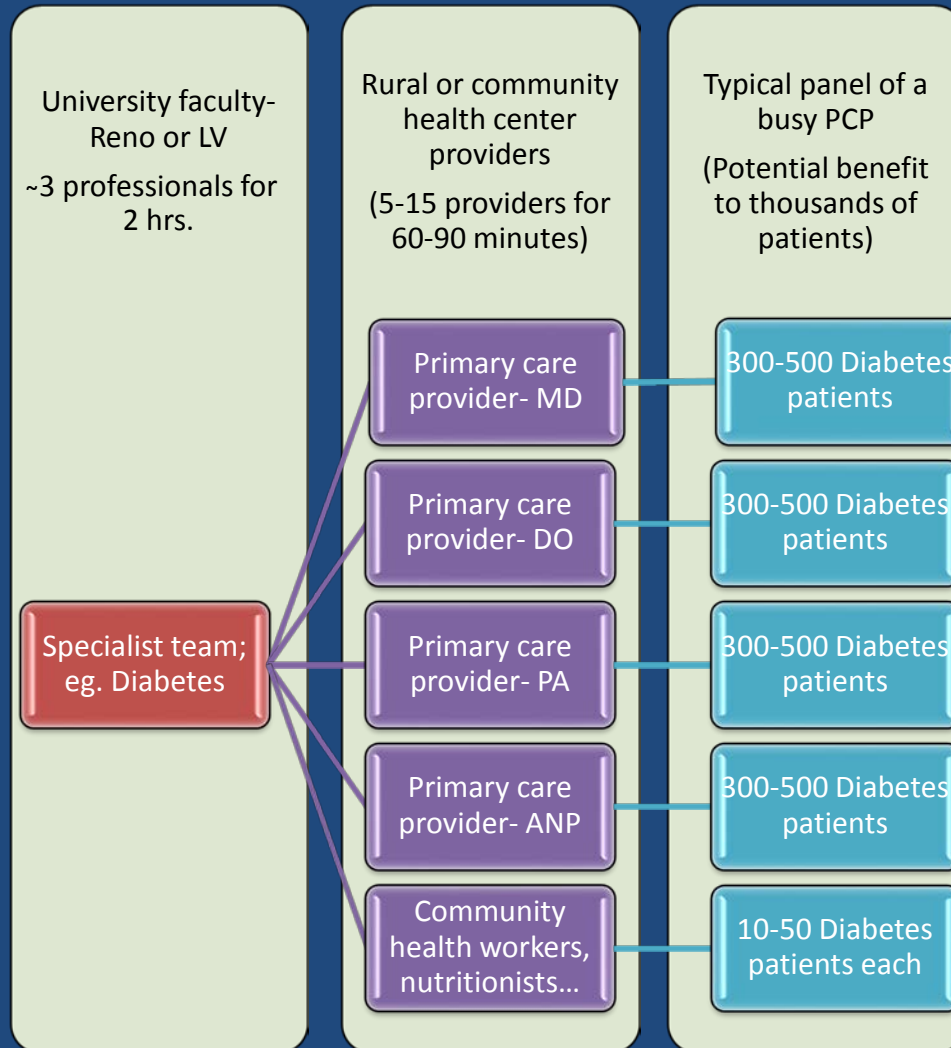
## Number of MDs per 100,000 Population – 2010



Source: AMA. *Physician Characteristics and Distribution in the US* (2012).

**Specialty care by Telemedicine is a zero sum game**

# Project ECHO- Force Multiplier





# Project ECHO- “Resource Multiplier”

- New York spends \$54 billion annually on Medicaid. “If the state decided to spend \$5.4 million, or 0.1% of its...(Medicaid) budget on sustaining ECHO projects, and if Project ECHO could improve the functioning of the system by even 1%, they would get a \$54 million dollar return on that investment.

— *Sanjeev Arora*

# Project ECHO- “Resource Multiplier”

- Nevada Medicaid (2012) Outlay:
  - \$1,661,287,000
  - 0.1% of this= **\$1,661,287**

**To reap a possible \$16,612,870 cost savings!!**

# Impact and Outcomes of Project ECHO Nevada

- **Improved access** to specialty care for rural and medically underserved areas of Nevada
- Improve patient outcomes and timeliness of care for chronic and complex disease states
- Rapid dissemination of practice changing information
- Track patient outcomes and treatment provided by participating rural clinicians



# Impact and Outcomes of Project ECHO Nevada

- Build the capacity of rural and frontier primary care workforce
- Reduce professional isolation and improve primary care recruitment and retention
- FREE CME and nursing CEU for rural physicians, nurses, P.A.s
- Improve reimbursement to participating rural hospitals, clinics, and providers



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# ECHO Costs

## Hub site

- Professional time for preparation, clinics
- Administrative/IT support time
- Secure fax, eventual HIE
- Video bridge, monitors

## Spoke site

- None
- Provider time to participate

# Vision for the future

- Add more clinics to meet identified needs- GI disease coming in March, 2014, Co-occurring disorders clinic summer, 2014
- Technology upgrades- improve “presence”
- Expand the use of the ECHO platform to meet other statewide needs- juvenile justice/adolescent psychiatry interface
- Universal video conferencing access

# Sustainability of Project ECHO Nevada

- Gifts and grants received to date
- Grants submitted
  - Rural Health Services Outreach (HRSA)
  - Health Care Innovation Challenge (CMS)
  - Telehealth Network Grant Program (HRSA)
- Medicaid matching funds
- Enhanced reimbursement to rural facilities



# Project ECHO Nevada Staff

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