BREAKOUT SESSION DISCUSSION QUESTIONS

SESSION 1: USE OF TELEHEALTH IN CARDIOLOGY PRACTICE DURING THE COVID-19 ERA

Start Time: 8:20 a.m.

End Time: 9:55 a.m.

Group 1, 3, 5: Managing patients with heart failure via telehealth

Discussion Questions:

1. How does telemedicine impact the care of highly complex patients, such as our heart failure transplant and LVAD patients? How can we work towards making telemedicine as feasible for advanced heart failure patients as it is for general heart failure patients? What technologies could clinicians leverage to help manage more complex HF patients?

2. What elements of the physical exam do you consider most important for patient management via telehealth? How can clinicians monitor vital signs and incorporate lab work to deliver care or titrate/optimize medications through video visits at a rate comparable to the quality and safety of inpatient care? For patients who do not have the means to support a video visit, how do you offer an equitable telehealth visit and optimize patient care in the absence of a physical exam?

3. What can clinicians do to empower their patients to promote self-monitoring through telehealth? Are there opportunities for insurance companies to reward patients for good self-monitoring (such as they do with weight control & tobacco cessation)?

4. How do we leverage existing ACC patient-facing tools and educational resources (e.g. My HF Action Plan and My Plan for Heart Healthier Living) for the telehealth visit? Is there an opportunity to enhance these tools? How do we conduct discussions around these types of tools when having conversations with patients virtually?

5. If the ACC were to pilot a project in October to demonstrate the value of telehealth for HF patients, what are achievable clinical endpoints and the important design/workflow features to include? Who are the key stakeholders that need to be involved? What are important elements that are likely to have the most influence on determining the value of telehealth to further necessitate its role in care?

Group 2, 4, 6: Secondary prevention for high-risk ASCVD patients via telehealth

Discussion Questions:

1. How does telemedicine impact the care of highly complex patients, such as high-risk ASCVD patients? How can we work towards making telemedicine as feasible for those at high-risk as it is for those who are at lower risk of an ASCVD-related event? What technologies could clinicians leverage to help manage more complex ASCVD patients?

2. What elements of the physical exam do you consider most important for patient management via telehealth? How can clinicians monitor vital signs and incorporate lab work to deliver care or titrate/optimize medications through video visits at a rate comparable to the quality and safety of inpatient care? For patients who do not have the means to support a video visit, how do you offer an equitable telehealth visit and optimize patient care in the absence of a physical exam?

3. What can clinicians do to empower their patients to promote self-monitoring through telehealth? Are there opportunities for insurance companies to reward patients for good self-monitoring (such as they do with weight control & tobacco cessation)?

4. How do we leverage existing ACC patient-facing tools and educational resources (e.g. My Plan for Heart Healthier Living) for the telehealth visit? Is there an opportunity to enhance these tools? How do we conduct discussions around these types of tools when having conversations with patients virtually?

5. If the ACC were to pilot a project in October to demonstrate the value of telehealth for high-risk ASCVD patients, what are some important design features that should be considered? Who are the key stakeholders that need to be involved? What are important elements that are likely to have the most influence on determining the value of telehealth to further necessitate its role in care?

SESSION 2: USE OF TELEHEALTH IN CARDIOLOGY PRACTICE BEYOND THE COVID-19 ERA

Start Time: 10:15 a.m.

End Time: 11:00 a.m.

Discussion Questions:

1. How can telehealth be better positioned as an important aspect of health care delivery in a post COVID-19 health care ecosystem? What can the ACC do to promote high-value strategies to support sustainable telehealth programs? How might we work with payers and other key stakeholders to help support this vision?

2. What are the key facets of telehealth care that lead to the reduction of health care costs? What data is needed to measure the clinical and societal (ex. caregiver) cost effectiveness of telehealth?

3. Telehealth has been shown to offer both benefits and challenges for patients and caregivers in underserved populations. In thinking about some of the challenges you face with regards to these patient populations, what are some solutions to overcoming those challenges and enhancing those benefits?