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More Important Than Ever

Telehealth and Outreach in the Post COVID-19 World: The MU Show-Me ECHO Program as a National Model

by Karen Edison, MD



Our Show-Me ECHO program is one of seven ECHO Super Hub sites in the U.S., and we are training other states and other countries to begin ECHO in their regions.

Show-Me ECHO (Extension for Community Healthcare Outcomes) is an innovative and practical solution to the lack of access to specialty healthcare in rural and underserved areas of Missouri. (See Appendix 1) describing the model in detail. It is the brainchild of Sanjeev Arora, MD, hepatologist at the University of New Mexico. In 2003, he realized patients were dying from the complications of untreated hepatitis C and committed himself to training a larger healthcare workforce prepared to treat these patients. About five years ago, R. Wayne Cooper, MD, then state representative from Camdenton, Missouri, learned about Project ECHO and made sure the leadership of the Missouri Telehealth Network (MTN) was aware of it. A group of state

legislators and MTN leadership attended a Project ECHO conference in Albuquerque in 2013. We quickly realized that Project ECHO was needed in Missouri. Thankfully, with the help of Dr. Cooper and Missouri Representative Diane Franklin, our state's leaders agreed.

In this edition of *Missouri Medicine*, dedicated to Wayne Cooper, MD, you will learn about the Show-Me ECHO program, its growth, and the positive outcomes we are seeing: early indications of improvements in access to care, quality of care delivered, and early evidence that costs may be reduced in some diseases and geographic areas. You will also read about the perspectives of the Show-Me ECHO professional participants and the importance and promise of including the patient and patient caregivers' input and viewpoint. A thorough look at telehealth in Missouri is included, along with a discussion of the importance of creating health care learning collaboratives to encourage high quality patient outcomes.

The COVID-19 pandemic has made vividly clear the need for the availability of both telemedicine for safe patient care and the ECHO model for safe and effective continuing medical education. Because the Missouri Telehealth Network already had a highly effective team with experience and skill in creating and launching ECHOs, we were able to quickly assemble COVID-19 ECHO programs early in the unfolding coronavirus crisis. COVID-19 ECHO was created to provide timely education across the state to enable healthcare providers to make informed care decisions based on the latest pandemic evidence.

We have seen rapid growth of our ECHO programs over the past five years and are now



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reaching 93 of Missouri's 114 counties as well as the city of St. Louis. We envision continued growth and even better outcomes in the future as the program matures, we better understand how to assess patient outcomes in the various ECHOs, and we beneficially touch more lives in Missouri.

I have used telemedicine to care for rural and underserved dermatology patients throughout Missouri for the past 26 years. This has given me a unique perspective on the quality of care delivered. While rural Missouri has committed, high-quality healthcare professionals, in many areas there is a lack of specialty care for patients. This lack of access has serious consequences, including “unmet health needs, delays in receiving appropriate care, financial burdens, and preventable hospitalizations.”¹

Missouri has a loan repayment program called PRIMO (Primary Care Resource Initiative) designed to encourage primary care physicians (PCPs) to practice in underserved areas of Missouri, and this program has had some success. But, rural hospital closures (14 since 2014) have had a negative impact on access to care, putting a heavier burden on the remaining providers and clinics. Medical schools, especially the University of Missouri School of Medicine in Columbia, have promising educational programs that place students in underserved areas with the hope that some will stay. Thankfully, some do – but we struggle to place new doctors in rural Missouri where our current workforce is aging. In 2018, the average age of rural Missouri physicians was 60 years old, and 60% were over the age of 50.² As rural physicians are aging, care is shifting increasingly toward generalist advanced practice nurses and physician assistants, some with gaps in their training to care for the complex patients they see. Also, recommended best practice and evidence-based medicine is changing rapidly making it difficult for busy PCPs to keep up to date. Show-Me ECHO can be part of the answer for these challenges.

Missouri ranks 39th out of 50 states in recent health rankings. We do have high quality and committed health foundations, healthcare systems, academic health centers, and state health agencies; however, in the past two decades we have been unable to see a sustained improvement in the

healthcare outcomes reflected in the rankings.³

In 2008, the Institution for Healthcare Improvement (IHI) released their “Triple Aim” framework to evaluate new innovations in health care: 1) improve the patient experience (quality and satisfaction); 2) improve population health outcomes; and 3) decrease the per capita cost for healthcare.⁴ Nearly all the innovations in healthcare I have seen in my career have improved one aim, while making the others worse and some have arguably made all three worse. (The electronic health record comes to mind.) The ECHO model improves all of the Triple Aims, leading to increases in access to high quality care and better patient outcomes which decrease the per capita cost for healthcare. Also, with increasing recognition of the problem of physician burnout, many add the fourth aim of healthcare team well-being.⁵ Show-Me ECHO helps in these areas as well. It is frequently cited by hub team members and primary care participants alike as one of the most enjoyable activities they do at work.

Missouri should be proud! Our Show-Me ECHO program is one of seven ECHO Super Hub sites in the U.S., and we are training other states and other countries to begin ECHO in their regions. I hope you will read this issue of *Missouri Medicine* cover to cover and plan to join one or more ECHOs in the future. Simply go to showmeecho.org to register and the Missouri Telehealth Network will take care of the rest.

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