

**Michigan Medicine MOC Part IV Program
COVID-19 Project Report
(Wave 1)**

Project Title: COVID-19-driven Expansion of Virtual Visits at Michigan Medicine

Project Leader: Jessica DeVito, Virtual Care Operations Director

Clinical Leader: Margaret Punch, M.D., Medical Director, Virtual Care

Start/End Dates: March 1, 2020 – Open Ended Wave Project
End Date for Wave 1: December 31, 2020
Anticipated End Date for Wave 2: December 31, 2021

Patient Population: Patients (all ages) of Michigan Medicine primary care and specialty clinics.

General Aim: Expanding video visits to preserve: 1) safe patient access to essential services, and 2) continuity of care, under pandemic conditions.

Measure: % of total ambulatory care visits accomplished as video visits

Baseline: Less than 1% of ambulatory care visits were video visits in February, 2020.

Target: Increase percent of video visits to the extent feasible during the pandemic months. [Specific target rates varied by clinical department/division].

Key Interventions:	Who Participated:
Deploying technical infrastructure for video visits (e.g., platform and devices)	Virtual care program staff; HITS (Health Information Technology Services) staff; Information Technology Services (UofM campus IT); Health Information Management staff and patient portal support desk; clinic staff
Developing criteria for patients appropriate to be seen virtually.	Providers
Redesigning workflows to support video visits and meet regulatory requirements (e.g., scheduling, medication reconciliation, billing...)	Clinical champions, Virtual Care program staff, call centers and clinic support staff, revenue cycle, Office of General Counsel, corporate compliance, Office of Patient Experience
Training providers on how to provide an effective video visit (Using Train the Trainer approach)	Trainers, including peer trainers, and providers
Preparing patients for video visits	Providers and clinic staff, patient portal support desk

Results: In April and May 2020, 32% of total visits were video visits, exceeding expectations. We anticipate being able to ramp back up rapidly to meet patient demand, as needed, in the fall.

Data:

	Feb 2020 (Baseline)	Mar 2020	April 2020	May 2020	June 2020	July 2020
# of virtual visits	N=443	N=6,870	N=30,142	N=37,152	N=34,670	N=28,987
Total # of visits	N=199,598	N=148,079	N=92,991	N=114,605	N=188,324	N=192,605
% virtual visits	.22%	4.64%	32%	32%	18%	15%

Keys to success were:

- Collaboration of multiple partners (Ambulatory Care Units, Medical Group, Clinical Departments, Clinic Leadership and Staff, HITS, Revenue Cycle, Corporate Compliance, Office of General Counsel, Office of Patient Experience, Quality Department...).
- Michigan Medicine Virtual Care Program had expertise and small scale experience with virtual visits, including technology and billing infrastructure already in place.
- Planning and goals for video visit expansion were in place pre-pandemic, positioning us well to ramp up rapidly when COVID hit.
- Providing virtual, “at the elbow” training.

For more information about documenting your participation in video visits for MOC Part IV credit,

contact: partivmoc@umich.edu