





# Using Remote Patient Monitoring to Provide Data-driven Health Care

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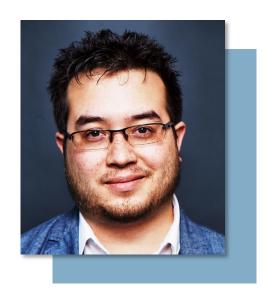
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#### Our Featured Speaker



#### **Timothy Aungst, PharmD**

Associate Professor of Pharmacy Practice Massachusetts College of Pharmacy and Health Sciences (MCPHS) Worcester, MA

Dr Aungst is an associate professor of pharmacy practice at MCPHS in Worcester, MA. He is also a clinical pharmacist at a home health care agency, with a focus on chronic disease medication management.

Dr Aungst is a digital health advocate for the pharmacy space. His focus is on digital medicines and adherence development, the use of digital biomarkers in research, and the integration of digital therapeutics in patient care.

He has served as an editor for iMedicalApps and as a writer for Pharmacy Times, with a focus on mobile apps and digital health. Dr Aungst has also spoken at national and international forums on these topics.

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### Objectives



Discuss RPM and how it can help HCPs improve patient care



Highlight technologies that can be used to collect RPM data and how this information can be integrated into traditional health care



Summarize the challenges facing implementation of RPM into health care systems



Explore possible future applications of RPM

HCP, health care provider; RPM, remote patient monitoring.





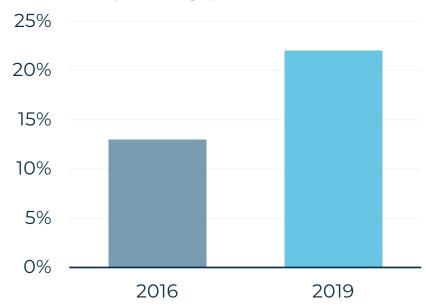
### Introduction To RPM



#### What Is RPM?

- RPM involves the technology-based collection of data for the purpose of monitoring patients outside the hospital and transmitting the data to HCPs<sup>1,2</sup>
- RPM tools can highlight potentially significant changes in patient data, which HCPs can use to guide clinical decisions<sup>3,4</sup>
- The number of surveyed physicians using RPM to improve patient care increased by 9 percentage points between 2016 and 2019<sup>4</sup>

## Physicians who used RPM for improving patient care<sup>4</sup>



HCP, health care provider; RPM, remote patient monitoring



Malasinghe LP et al. J Ambient Intell Human Comput. 2019;10:57–76.

Vegesna A et al. Telemed J E Health. 2017;23:3–17.

El-Rashidy N et al. Diagnostics. 2021;11:607.

<sup>4.</sup> American Medical Association Digital Health Research. Physicians' motivations and requirements for adopting digital health: Adoption and attitudinal shifts from 2016 to 2019. Published February 2020. Available at: <a href="https://www.ama-assn.org/system/files/2020-02/ama-digital-health-study.pdf">https://www.ama-assn.org/system/files/2020-02/ama-digital-health-study.pdf</a>. Accessed March 11, 2022.

#### Types Of Data Collected Via RPM

## (o) (o)

#### Behavioral data, including:

- Sleep duration and patterns<sup>1,2</sup>
- Phone usage patterns<sup>1,2</sup>
- Psychomotor agitation<sup>2</sup>
- Screen interaction<sup>2</sup>
- Social activity<sup>2</sup>
- $\mathsf{Mood}^2$
- Conversation frequency<sup>2</sup>
- Voice features<sup>2</sup>

#### Physiological data, including:

- Geolocation<sup>2</sup>
- Heart rate<sup>2,3</sup>
- Body or skin temperature<sup>2,3</sup>
- Blood pressure<sup>2,3</sup>
- Weight<sup>3</sup>
- Blood glucose<sup>3</sup>
- Respiration rate<sup>3</sup>
- EEG / ECG<sup>3</sup>
- Pulse oximetry<sup>3</sup>
- Physical activity<sup>3</sup>

 ${\sf ECG, electrocardiogram; EEG, electroence phalogram; RPM, remote patient monitoring.}\\$ 

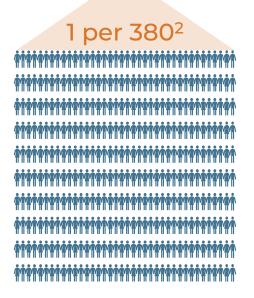
- . Baron KG et al. Sleep Med Rev. 2018;40:151-159.
- 2. Sheikh M et al. Front Dig Health. 2021;3:662811.
- Malasinghe LP et al. J Ambient Intell Human Comput. 2019;10:57–76.



#### Why Do We Need RPM?

- Due to the COVID-19 pandemic, in 2020 the global prevalence of MDD increased by 27.6% and for anxiety disorders by 25.6%
- There is a shortage of mental health providers across the US, with a median of 1 provider per 380 individuals<sup>2</sup>
  - A survey conducted by the National Council for Behavioral Health found that 38% of patients waited > 1 week for an appointment with a mental health provider<sup>3</sup>
- Real-time data collected via RPM can help providers prioritize care to at-risk patients<sup>4</sup>
  - Alerts prompted by missing or out-of-normal-range data and changes in symptoms related to health deterioration can help indicate which patients need to be seen in-office<sup>5,6</sup>





COVID-19, coronavirus disease-2019; MDD, major depressive disorder; RPM, remote patient monitoring; US, United States.

- Santomauro D et al. Lancet. 2021;398:1700–1712.
- Reinert M et al. The State of Mental Health in America 2022. Published October 2021. Mental Health America, Alexandria VA. Available at: <a href="https://mhanational.org/research-reports/2022-state-mental-health-america-report">https://mhanational.org/research-reports/2022-state-mental-health-america-report</a> Accessed March 11, 2022.
- National Council for Behavioral Health. America's Mental Health 2018. Published October 10, 2018. Available at: https://www.cohenveteransnetwork.org/wp-content/uploads/2018/10/Research-Summary-10-10-2018.pdf.
   Accessed March 11, 2022.
- Aungst T et al. J Am Coll Clin Pharm. 2021;4:514–524.
- Thomas EE et al. BMJ Open. 2021:11:e051844.
- American Medical Association Digital Health Research. Physicians' motivations and requirements for adopting digital health: Adoption and attitudinal shifts from 2016 to 2019. Published February 2020. Available at: <a href="https://www.ama-assn.org/system/files/2020-02/ama-digital-health-study.pdf">https://www.ama-assn.org/system/files/2020-02/ama-digital-health-study.pdf</a>. Accessed March 11, 2022.



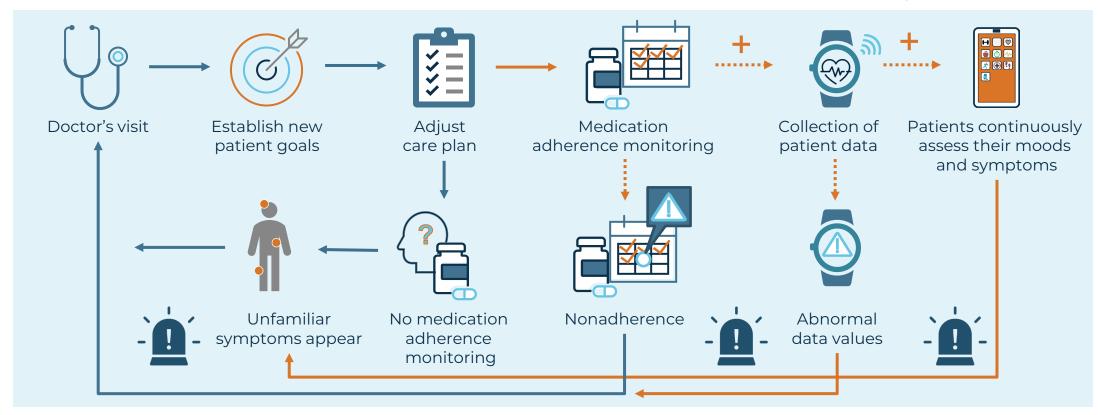
## The Current Health Care System Provides Episodic Patient Care<sup>1</sup>

#### **Current system: Intermittent patient care**

 Every new symptom or medical episode results in a visit to the doctor<sup>1</sup>

#### With integration of RPM data:

 Providers can review patients' health regularly and intervene when necessary<sup>2</sup>



RPM, remote patient monitoring.

1. Aungst T et al. J Am Coll Clin Pharm. 2021;4:514–524.

2. Taylor ML et al. BMJ Open. 2021;11:e040232

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## Changes To RPM Regulation And Reimbursement In Response To COVID-19

- In mid-2020, the FDA issued emergency use authorization for several RPM devices, including those
  that monitor<sup>1</sup>:
  - QT interval
  - Patient vital signs
  - Cardiac function (eg, ECG devices)
- A 2021 systematic review found that RPM within an acute care setting is applied most often to cardiology and pulmonary therapeutic areas<sup>2</sup>
  - Other applications of RPM include continuous monitoring of blood glucose in patients with diabetes and those with blood pressure concerns<sup>3</sup>
- Currently, 7 CPT® codes from the CMS permit reimbursement of remote monitoring of physiologic data digitally uploaded from an authorized device<sup>4</sup>
- In 2020, **5 CPT® codes were added to the Physician Fee Schedule** to enable billing for remote therapeutic monitoring of nonphysiologic data, including patients' medication adherence, patient-reported medication response, and care management<sup>4</sup>

CMS, Centers for Medicare & Medicaid Services; COVID-19, coronavirus disease-2019; CPT®, Current Procedural Terminology; ECG, electrocardiogram; FDA, Food and Drug Administration; QT, length of time between the beginning of the Q-wave and the end of the T-wave on an ECG; RPM, remote patient monitoring.

- FDA. Remote or wearable patient monitoring devices: EUAs. Accessed March 11, 2022.
   Available at: <a href="https://www.fda.gov/medical-devices/coronavirus-disease-2019-covid-19-emergency-use-authorizations-medical-devices/remote-or-wearable-patient-monitoring-devices-euas">https://www.fda.gov/medical-devices/coronavirus-disease-2019-covid-19-emergency-use-authorizations-medical-devices/remote-or-wearable-patient-monitoring-devices-euas.</a>
- 2. Taylor ML et al. *BMJ Open.* 2021;11:e040232

- Aungst T et al. J Am Coll Clin Pharm. 2021;4:514–524.
  - Department of Health and Human Services. CMS-1751-F. Published November 19, 2021. Available at: <a href="https://www.govinfo.gov/content/pkg/FR-2021-11-19/pdf/2021-23972.pdf">https://www.govinfo.gov/content/pkg/FR-2021-11-19/pdf/2021-23972.pdf</a>. Accessed March 11, 2022.





## Integrating RPM Data Into Patient Care



#### How Might RPM Data Benefit Patient Care?

Inclusion of RPM data in patients' care plans may:



Provide real-time monitoring of patient data to inform treatment recommendations<sup>1</sup>



Assess patient data collected at home<sup>1</sup> to create continuity between office visits<sup>2</sup>



Develop a longitudinal patient health profile to enable care coordination<sup>3</sup>



Trigger clinical communication in response to out-of-range data values<sup>4</sup>



Monitor and improve medication adherence<sup>5</sup>



Facilitate timely, patient-centered care<sup>6</sup>



Improve the efficiency of provider workflow via automated data entry into EHRs<sup>7</sup>



Evaluate sleep quality and duration<sup>8,9</sup>



Determine rest-activity cycles, including circadian rhythms<sup>2</sup>

EHR, electronic health record; RPM, remote patient monitoring.

- 1. El-Rashidy N et al. *Diagnostics*. 2021;11:607.
- 2. Hilty DM et al. J Tech Behav Sci. 2021;6:252–277.
- Genes N et al. npj Dig Med. 2018;1:23.

- . Taylor ML et al. *BMJ Open.* 2021;11:e040232.
- 5. Aungst TD. Expert Rev Med Devices. 2021;18:25–35.
- 6. Thomas EE et al. *BMJ Open*. 2021;11:e051844.2021.

- Kumar RB et al. J Am Med Inform Assoc. 2016;23:532–537.
- 8. Baron KG et al. Sleep Med Rev. 2018;40:151–159.
- Sheikh M et al. Front Dig Health. 2021;3:662811.



### Available Technologies To Collect RPM



Smartphones can provide information about users' activity, including screen state, numbers of incoming / outgoing calls, light sensing, and GPS location<sup>1</sup>



Apps can provide education, enable communication for providers and patients, and provide health tracking<sup>2</sup>

- Preinstalled (camera, accelerometer)<sup>2</sup>
- Downloadable<sup>2</sup>
- Web-based (require internet connection)<sup>2</sup>

Longitudinal health monitoring outside the clinical setting can be achieved using wearables,<sup>3</sup> including:

- Smart watches<sup>3</sup>
- Accelerometers<sup>3</sup>
- Heart rate monitors<sup>3</sup>



Smart glasses can expand the breadth of teaching experiences for medical trainees<sup>4</sup>

AI / machine learning can be applied to RPM:

- Ecological momentary assessments of behavior<sup>1,5</sup>
- Digital exhaust patterns and digital phenotyping<sup>5</sup>
- Algorithm-based risk determination<sup>6</sup>



Al, artificial intelligence; apps, applications; GPS, Global Positioning System; RPM, remote patient monitoring.

- Dogan E et al. J Med Internet Res. 2017;19(7):e262.
- Aungst TD et al. Int J Clin Pract. 2014;68:155–162.
- Dunn J et al. Per Med. 2018;15(5):429–448.

- Aungst TD. Int J Clin Pract. 2015;69:1179–1183.
- Hirschtritt ME and Insel TR. Focus (Am Psychiatr Publ). 2018:16:251–258.
- Martinez-Martin N et al. npj Digit Med. 2018;1:68.



#### Integrating RPM Data Into Clinical Care Decisions

- RPM data can be integrated into EHRs to deliver large amounts of continuously updated information to providers, which can collectively be used to develop clinical decision support systems
- Clinical decision support systems can:



Provide a comprehensive view of the patient's medical history



Help non-expert physicians by providing clinical guidelines, practice standards, and differential diagnoses



Remind patients to take their medications, refill prescription medications, take their correct medication dose, and maintain caution around potential interactions with other medications

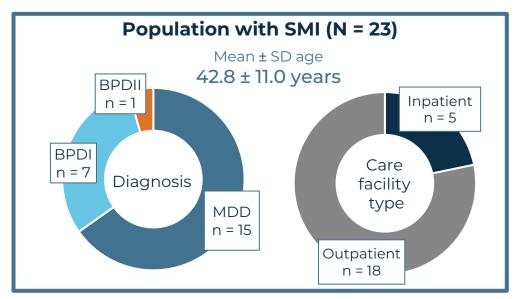
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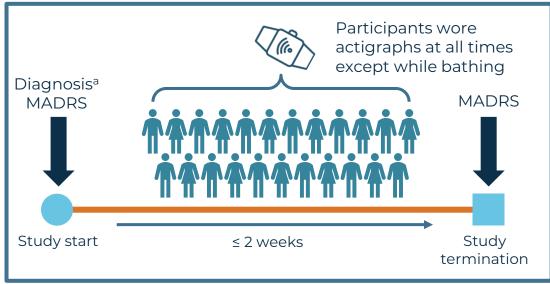
1. El-Rashidy N et al. *Diagnostics*. 2021:11:607.



#### Case Study:

#### Integrating RPM Into The Care Of Patients With SMI





- Digital biomarkers were extracted from passive actigraphy data
- Using solely actigraphy features, the machine-learning algorithm predicted the correct diagnosis (patients versus controls without mental illness<sup>b</sup>) 89% of the time
- The change in depression severity predicted by actigraphy features was highly correlated with the actual change from baseline in MADRS scores, with r = 0.782 and P < 0.0001

1. Jacobson NC et al. NPJ Digit Med. 2019 Feb 1;2:3. September 2022 CODE



<sup>&</sup>lt;sup>a</sup>Patients with mood disorders were diagnosed by a psychiatrist according to Structured Clinical Interview for DSM-IV criteria. <sup>b</sup>Healthy controls comprised N = 32 individuals without a history of mood or psychotic symptoms.

BPDI, bipolar I disorder; BPDII, bipolar II disorder; DSM-IV, Diagnostic and Statistical Manual of Mental Disorders – 4th edition; MADRS, Montgomery–Åsberg Depression Rating Scale; MDD, major depressive disorder; SD, standard deviation; SMI, serious mental illness.



## Challenges With RPM



### Challenges Facing The Implementation Of RPM

### Identification and use of RPM technologies

- Facilitating discovery and use of helpful devices and apps by providers and patients<sup>1</sup>
- Assessing quality and usefulness of mobile apps<sup>1</sup>
- Verifying accuracy and reliability of RPM data<sup>2</sup>
- Managing expectations about the rapidity of providers' responses to patients<sup>3</sup>

## Integration into patient records

- For clinicians, maintaining devices as medical tools (eg, devices kept secure with batteries charged)<sup>1</sup>
- Integrating different sources of health data with each other and within EHR infrastructure<sup>4,5</sup>

### Technological considerations

- Optimizing data flow, storage, transmission, and processing<sup>4,5</sup>
- Developing clinical protocols for patient enrollment and education, and for device tracking and support<sup>6</sup>

#### Privacy / security concerns

 Managing data privacy and security concerns for the patients<sup>5</sup> and for others with whom they interact<sup>7</sup>

EHR, electronic health records; RPM, remote patient monitoring.

- Aungst TD et al. Int J Clin Pract. 2014;68:155–162.
- Malasinghe LP et al. J Ambient Intell Human Comput. 2019;10:57–76.
- 3. Reading MJ and Merrill JA. J Am Med Inform Assoc. 2018;25:759–771.
- Abdolkhani R et al. Stud Health Technol Inform. 2018;252:1–7.
- El-Rashidy N et al. *Diagnostics*. 2021;11:607.
- 6. Casale PN et al. Am Coll Med Qual. 2021;36(3)139–144.

Aungst TD. Int J Clin Pract. 2015;69:1179–1183.



## Health Inequality In The Use Of Digital Technologies For RPM

Greater demand for mental health care and the COVID-19 pandemic have increased reliance on digital health technologies, which may reinforce preexisting systemic health inequalities in some populations<sup>1,2</sup>

**SDOH factors** that can contribute to the risk of health inequalities include:

- Limited health literacy<sup>1</sup>
- Low level of education<sup>2</sup>
- Race<sup>2</sup>
- Rural location<sup>2,3</sup>
- Advanced age<sup>3</sup>
- Low socioeconomic status<sup>3</sup>
- Limited access to digital devices<sup>3</sup>

Barriers to implementing digital interventions in at-risk groups include:

- Lack of culturally grounded interventions1
- Low confidence in the quality of digital technologies<sup>1</sup>
- Variation in providers' competency with using the technology<sup>1</sup>
- Low technology uptake<sup>1</sup>
- Underrepresentation of at-risk populations in care settings<sup>1,3</sup>

COVID-19, coronavirus disease-2019; RPM, remote patient monitoring; SDOH, social determinants of health.

- 1. Friis-Healy EA et al. JMIR Ment Health. 2021;8(1):e25456
- 2. Wang J et al. *Heath Place*. 2021;72:102678.

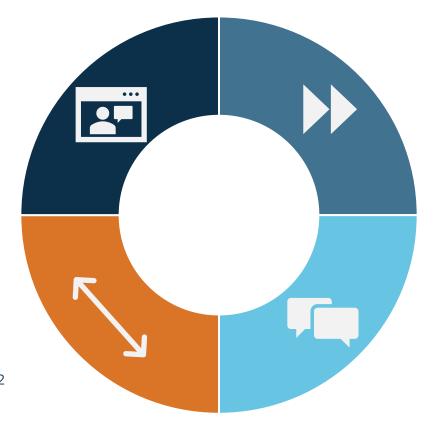
Ogbogu PU et al. J Allergy Clin Immunol Pract. 2022 Jan 25:S2213-2198(22)00026-5.

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### Strategies To Help Mitigate Health Inequalities

Use **technology** to its strengths (eg, a video depicting correct inhaler usage to overcome low literacy)<sup>1</sup>

Expand access and education regarding digital tools usage to historically vulnerable or underserved populations<sup>2</sup>



Employ real-world data to expedite the evaluation of outcomes compared with traditional clinical assessment<sup>2</sup>

Engage
underrepresented users
in the development
of RPM tools and apps<sup>2</sup>

RPM, remote patient monitoring

- 1. Ogbogu PU et al. J Allergy Clin Immunol Pract. 2022 Jan 25:S2213-2198(22)00026-5.
- 2. Friis-Healy EA et al. JMIR Ment Health. 2021;8(1):e25456
- Wang J et al. Heath Place. 2021;72:102678.





### RPM Into The Future



#### What Does The Future Hold For RPM?

- A recent scoping review found that wearable devices are being developed for several neuropsychiatric disorders<sup>1</sup>
  - Most devices focus on collecting data on motor symptoms and physical activity
  - As of that publication, there were no available devices to directly evaluate psychiatric symptoms
- As patients gain familiarity with RPM, it may become expected as part of their care plan<sup>2</sup>
- Other potential applications of RPM may include:

Hybridized care delivery<sup>2</sup>

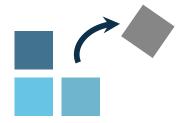


Leverage the strengths of care providers and automated systems<sup>2</sup>

Digital front door<sup>3</sup>



Manage health care demand by directing patients to the best resource for their concerns<sup>3</sup> Unbundling reimbursement<sup>4</sup>



Separate CMS reimbursement codes for RPM services in any geographic location (eg, the patient's home)<sup>4</sup> Public health surveillance<sup>5</sup>



Collect data from heterogeneous populations about daily experiences with illness outside the clinical setting<sup>5</sup>

- CMS, Centers for Medicaid & Medicare Services; RPM, remote patient monitoring.
- Sakamaki T et al. Telemed J E Health. 2022 Jan 24.
- 2. Casale PN et al. Am Coll Med Qual. 2021;36(3)139–144.

- Rastogi N. BMJ Innovations. BMJ Innovations 2022;8:129–132.
- 4. Nixon C, Gwilt RE. Telehealth Med Today. 2018; 3(1).
- 6. Al Knawy B et al. JAMA Network Open. 2022;5(2):e220214.



#### Summary

RPM involves the use of technology to collect data from patients outside a clinical setting and remote transmission to providers<sup>1,2</sup> RPM data can clarify medical decision-making and help identify at-risk patients who need additional intervention<sup>3,4</sup>

Several challenges face implementation of RPM, particularly for patient privacy and digital safety<sup>5,6</sup>

In the future, RPM holds promise to help facilitate continuous care of patients with chronic conditions<sup>7</sup>

RPM, remote patient monitoring

- Malasinghe LP et al. J Ambient Intell Human Comput. 2019;10:57–76.
- Vegesna A et al. Telemed J E Health. 2017;23:3–17.
- Martinez-Martin N et al. npj Digit Med. 2018;1:68.
- Taylor ML et al. BMJ Open. 2021;11:e040232.

- . Aungst TD. Int J Clin Pract. 2015;69:1179–1183.
- El-Rashidy N et al. *Diagnostics*. 2021;11:607.
- 7. Genes N et al. npj Dig Med. 2018;1:23.







## Closing







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