Antibiotic Stewardship in a Total Virtual Care™ Model

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Agenda

- Total Virtual Care[™] Delivery
- Antibiotic Stewardship: Education vs Clinician Feedback for Acute Respiratory Infections in Telemedicine
- Telemedicine During COVID-19
- Responsible Virtual Care Delivery

*Speaker Disclosure:

Kristin Dean, MD is an employee of Doctor On Demand

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Doctor On Demand Virtual Care



Employed Clinician Model

- Employed practice with virtual care expertise
- Average 17 years experience
- Diverse clinical practice:
 - o 43% BIPOC
 - o 20% LGBTQ
 - o 60%+female



Credentialing, Ongoing Training and Certification

- · Virtual care training
- Double-blind peer review
- Antibiotic stewardship
- Continuing Medical Education Program
- NCQA, URAC, ADA



Virtual Care Delivery

- · Synchronous video visits
- · Continuity of care, follow-up visits
- · Self-guided clinical examination
- Evidence-based telemedicine guidelines to ensure high-quality care
- Integrated labs, electronic prescribing, referrals, imaging
- · Primary care, urgent care and behavioral health



Study Design

Education vs Clinician Feedback for Acute Respiratory Infections in Telemedicine: a Randomized Controlled Trial

Timeline

Jan 1, 2018 to Nov 30, 2018

Measure

 Antibiotic prescription for visits with any of the target conditions

Target conditions

- 。 URI
- Bronchitis
- Sinusitis
- Pharyngitis

Control arm

Education (n= 30,521)

Intervention arm

 Education + Antibiotic Prescribing Dashboard (n= 24,843)

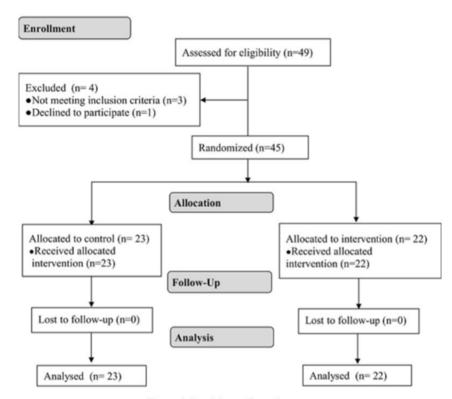


Figure 1 Participant flow diagram.

Du Yan L, Dean K, et al. Education vs Clinician Feedback on Antibiotic Prescriptions for Acute Respiratory Infections in Telemedicine: a Randomized Controlled Trial. J Gen Intern Med. 2020:10.

Intervention

Antibiotic Prescribing Dashboard

- Personalized for each clinician in the intervention group
- Distributed monthly
- Practice Summary: practice-wide antibiotic prescription rates for target conditions
- Your Results: individual clinician prescription rates

Chart Icd Antibiotics Stewardship Diagnosis Category Antibiotics Prescription Rate 1 BRONCHITIS 2 PHARYNGITIS 3 SINUSITIS 56% 4 URI 5 URI 6 6%

Your Results

Provider Last Name	Provider First Name	Chart Icd Antibiotics Stewardship Diagnosis Category	Call Prescriptions Aggregate Antibiotics Calls	Count	Antibiotics Prescription Rate	n
		BRONCHITIS		2	50	496
		PHARYNGITIS		2	7	29%
		SINUSITIS		1	6	17%
		URI		3	150	296

Your Difference From Practice

Last Name	First Name	Antibiotics Stewardship Diagnosis Category	Email	Difference From Practice
		BRONCHITIS		-29%
		PHARYNGITIS		-27%
CO.		SINUSITIS		-53%
	Ţ	URI		-4%

Results

Significant decrease in antibiotic prescriptions post-intervention versus pre-intervention in both control and intervention groups:

URI

Intervention 95% CI [0.32, 0.73] Control 95% CI [0.69, 0.95]

Bronchitis

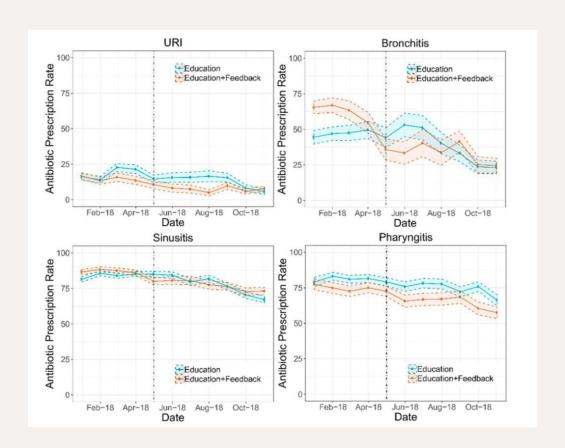
Intervention 95% CI [0.15, 0.40] Control 95% CI [0.49, 0.73]

Sinusitis

Intervention 95% CI [0.51, 0.81] Control 95% CI [0.56, 0.67]

Pharyngitis

Intervention 95% CI [0.48, 0.90] Control 95% CI [0.64, 0.83])



Antibiotic Stewardship Continued

- Patient satisfaction ratings remain high when antibiotics are not prescribed for an ARTI.
- Antibiotic Prescribing Dashboards provided practice-wide on a monthly basis.
- Study evaluating geographic variability of antibiotic prescribing patterns across a national telemedicine practice.
- Continuing education on antibiotic stewardship best practices.



Figure 2: Mean star patient satisfaction rating on a 5-point scale with and without antibiotic prescriptions (n=51,272)

Access to Care during COVID-19

- New patients increased from 40% in Feb to 53% in Apr 2020
- · Overall growth 59% above baseline:
 - Behavioral health and chronic illness contributed
 - 。 ARI / ILI / COVID-19 did not contribute
- Difference in visit trends by patient location observed:
 - Urban residents: 58% above baseline
 - Rural residents: 64% above baseline
- Individuals residing in low-income regions accounted for:
 - 47% of all visits in Jan and Feb 2020
 - 50% of all visits in Apr 2020

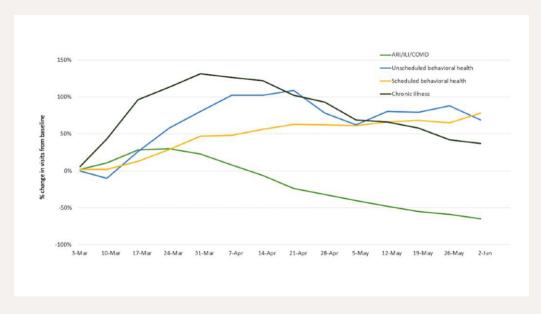


Figure 2: Percentage change in the total volume of virtual visits by type of visit from the baseline week in 2020. ARI: acute respiratory infection, ILI: influenza-like illness.

Uscher-Pines L, Thompson J, Taylor P, et al. Where Virtual Care Was Already a Reality: Experiences of a Nationwide Telehealth Service Provider During the COVID-19 Pandemic. J Med Internet Res. 2020;22(12):e22727.

Responsible Virtual Care Delivery

Areas of Concern

- Care fragmentation; disintegration of patient-provider relationship
- Reduced focus on preventive care
- Increased focus on antibiotic drug prescribing instead of comprehensive care management and consideration of alternative treatments/interventions
- Business models offering subscription-based services

Future Directions

- Clinical quality improvements through oversight and enhanced quality measure programs that discourage and penalize the improper use of antibiotics
- Viewing telehealth as part of wider ecosystem
- Alignment with accrediting bodies
- Trained virtualists with accountability
- Reformed telehealth coverage and payment policy under Medicare to hold all providers accountable for the same gold standard

Thank You