Planning Your Remote Patient Monitoring Strategy?

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Today, slow RPM growth is a thing of the past.

In 2016, the RPM market saw a 44 percent increase in remotely monitored patients, to 7.1 million patients worldwide, according to the market research firm Berg Insights. That follows similarly robust growth in 2015, and portends even greater growth to come, according to Berg, which projects more than 50 million patients worldwide using some form of an RPM device (clinical or personal) by 2021.

Whether your health care organization was an early adopter of RPM technology or you're just getting into the game, there remain a number of basic factors you should consider to ensure your RPM efforts are financially and clinically successful. Here are five key points to consider:

1. **Consider today's health care market** – In today's pay-for-performance era, RPM is no longer a nice-to-do,

but a need-to-do for providers of all kinds. That wasn't the case (to this degree) even just a half-decade ago. Given the multiple attributes of RPM, including aiding clinical outcomes, helping control costs, reducing admissions and readmissions, and improving overall access to health care, it's no wonder that health care providers are increasingly making RPM devices available to their patients – and, in some cases, making RPM a condition of long-term treatment, especially for those with chronic illnesses.

2. **Focus on your execution, not the technology** – It's easy to get caught up in the hoopla and excitement of RPM devices promising a host of benefits for patients with chronic illnesses – especially diabetes, heart disease and cancer – but don't let the technological tail wag the dog, so to speak. First ensure that your organization has the infrastructure, personnel and work processes necessary to provide a scalable RPM implementation that doesn't just meet, but exceeds, patient expectations. Don't be "that" health care organization that trips over its good intentions by prematurely rolling out an RPM tool only to see the initiative falter because the back-end execution suffered. Your organization's reputation is too precious to waste on delivering an ill-thought and/or ill-executed RPM effort.

3. **Learn from the experts and other organizations** – Don't squander precious time and capital by "trying out" an RPM tool via a pilot project when ample data and input on that tool's usefulness is readily available in the public domain. Patients nowadays expect turnkey technology and execution, and are not willing to wait for you to "iron out" any kinks that exist in a pilot project. You can ensure a greater degree of patient and staff satisfaction by rigorously conducting your due diligence early on, and ensuring that your RPM solution can and will hit the ground running.

4. **Identify your areas of greatest vulnerability/risk and opportunity** – There are marvelous RPM tools now available that significantly aid the ability of providers to regularly monitor the needs and interests of their remote patients. But if most of your patients are not remote, or if you already have a robust and well-functioning clinical system in place, why bother providing RPM tools that aren't really needed, or duplicate, the services you already provide? Pay attention to the areas of your organization with the greatest clinical and/or reimbursement risk (including clinically related penalties), and allocate your analysis, design and implementation efforts precisely on ways to address your most pressing needs. Doing so will create a win-win for your patients and your organization.

5. **Consider RPM as part of your cost-containment strategies** – As your organization considers ways to control service delivery costs while still providing high-quality care, think about how your available and most logical RPM technologies might benefit your cost-containment efforts. RPM allows providers to more specifically focus their most expensive resources (for instance, care nurses) on the places and patients most in need of high-cost resources. RPM tools, on the other hand, can easily supplement (or in some cases even supplant) staff members whose time can then be focused or redirected on other, more pressing clinical needs.

Consider Your RPM Strategy

Your organization's RPM strategy should not begin or be dictated by an RPM vendor offering an amazing technology – or even better, on a seemingly amazing deal on this technology. To help your organization objectively see the big-picture merits (and demerits) of RPM technologies, consider the benefits of working with a health care consulting firm well-versed in RPM technologies, as well on the strategic allocation and implementation of this technology. By taking the long view, you'll be more pleased with the overall results.