

Avel eCare Telemedicine

Information for Primary Care Providers



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My name is Dr. Vicki Walker and I am a family practice doctor by background, and have been working exclusively in post-acute and long-term care medicine for more than a decade. I have a special interest in working with seniors that have mental illness or who have dementia with behavioral issues. I also have a special interest in policy and how the health and aging policy interact to influence the kind of care people are able to get. And I think that is one of the things that drew me to telemedicine: we know there aren't enough geriatricians, there aren't enough primary care doctors focused in this area, and so whatever we can do to think outside the box to help everybody get access to excellent care that is really what we at Avel are all about.

On behalf of our entire team, please know how excited we are to partner with you and help provide high quality care in support of your residents. This FAQ document was prepared to help answer any questions you may have about Avel eCare or our Senior Care program. If you have additional questions, please do not hesitate to contact me at **victoria.walker@avelecare.com.**

What is Avel eCare?

Avel eCare is a telemedicine provider (think virtual health care center) based out of Sioux Falls, South Dakota. We have a team of expert providers, nurses, and clinicians who are all trained in telemedicine and deliver services to support local care teams and caregivers. With nearly three decades of experience with telemedicine our team serves a variety of customers including hospitals, clinics, senior care facilities, schools, and more. We believe every person and every community deserves access to care, and our mission is to deliver high quality care when and where it's needed.

More specifically, our Senior Care service line came into existence over a decade ago with a focus on taking care of seniors that live in nursing homes and assisted living centers. We do that by supporting the staff that are on-site with high quality telemedicine services. We're able help augment the traditional care for these seniors and save time for the resident, their families, the staff members, and the primary care providers.

What are the benefits of this telemedicine service to PCPs?

It can be difficult for PCPs to take care of people living in assisted living or nursing homes because they get a lot of information and things they need to sign and respond to, and it's difficult to do that if they are in a busy clinic. We are able to help respond to these issues quickly and send a note over to the PCP so they can feel assured their residents are receiving a high-quality evaluation and they are getting some support. We always make sure to communicate directly back to the PCP so they never feel out of the loop and are available 24/7 if they have any questions.



How does it work?

The senior care facility is equipped with telemedicine carts—high tech, two-way video units which allow local clinicians and caregivers to instantaneously communicate with Avel providers and nurses hundreds of miles away. Whenever the local team has a question, they push a button and quickly connect with an Avel expert who is available to help. From providers who can support advance care consultations, to nurses who can help conduct nursing assessments, our geriatrictrained team augments the existing services resulting in better outcomes for residents.

This model also allows for us to take some of the burden off of a PCP. For example, let's say a PCP has a resident who is on medication that requires lab work that gets done every three months and it comes back at a critical level. That can be difficult to deal with when the PCP is in the middle of the clinic day. If they call us, we're able to address the issue, get treatment started, and note back to the PCP to let them know what steps we had taken and hand the treatment back to them.

What is the importance of collaboration to the success of this service?

It is **absolutely critical**. Avel respects and is so grateful when residents have a PCP that has that sense of really caring deeply for the people they are responsible for, and we are not interested in disrupting this relationship at all. We make a point of looking through any records that are available so that we are following the care plans that have been laid out by the PCP who knows the residents best. Ultimately, our goal is to help out in the interim until the PCP can come back and assume care again. It's also important to note that we are never billing the residents over Medicare or insurance for any of the visits. For example, if we called and see one of a PCP's residents and they want to stop by in the afternoon and see the same resident, they can still bill for that visit.



Link to video: https://vimeo.com/manage/videos/797054762

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