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**Eagle Telemedicine Initiative Delivers Better Care-for South Central Kansas Medical Center**  
*ER collaboration with remote telehospitalists brings timely admission care with enhanced documentation to ER staff, along with better communication and tighter teamwork among staff at Arkansas City facility*

KANSAS CITY, MO.—Sept. 30, 2015—Eagle Telemedicine, an independent, physician-led company that develops and manages inpatient telemedicine practices for hospitals, will share information about its services and successes with rural hospitals at the 14<sup>th</sup> Critical Access Hospital Conference in Kansas City, MO, Sept. 29-Oct. 2. The gathering is sponsored by the National Rural Health Association.

In particular, Eagle will discuss the breakthroughs achieved with its Kansas physician group, Sunflower Telemedicine, a “By Kansans, For Kansans,” telemedicine initiative that is helping the 37-bed South Central Kansas Medical Center (SCKMC) in Arkansas City achieve numerous gains in timely, quality hospitalist care. Eagle Telemedicine is helping rural hospitals reduce patient transfers and improve communication between physicians and nursing staff around the clock.

**Documentation accuracy vital for rural hospitals**

“As a pioneer of the telemedicine industry, we have spent the past five years honing our practice model to meet specific hospital needs,” said Talbot “Mac” McCormick, MD, President and Chief Executive Officer of Eagle Telemedicine. “We support the work of NRHA members everywhere, and we are eager to share the breakthroughs our Sunflower initiative has helped SCKMC achieve. Our telemedicine specialists have greatly improved documentation accuracy in the ER during the admissions process. In doing so, our program helps ensure the hospital gets all the Medicare and private insurance reimbursement it deserves for the services it performs.”

Brian Hunt, MD, and two other Kansas hospitalists staff the telemedicine program at SCKMC. They are passionate about the contribution they are making to the hospital through their remote visits. “We interface electronically in the ER with the physicians and physician assistants who staff it, and on a 24x7 basis we are available to ensure care is timely and documentation is thorough when they are admitting patients,” said Hunt.

“For example, we can be sure that sepsis or pneumonia present at admission is accurately noted with the correct Diagnostic-Related Group (DRG) code, and thereby increase the hospital’s reimbursement by thousands of dollars. Most physicians just want to care for patients. Documentation is sometimes an afterthought, and our telemedicine team ensures that it gets done correctly, too.”

**Understanding what full communication can be**

Virgil Watson, SCKMC’s CEO, said that after one month of the telemedicine program, it is too early to produce metrics showing increased reimbursement rates, but he is confident that the program is

helping improve them. “Our medical director is elated at the documentation she is getting,” he said. “There are two sides of patient care—the care side, and the reimbursement side. As they guy who stays up at night wondering how we can pay our bills, I have confidence now that we are doing an exceptional job ensuring we get all the reimbursement we are due.”

In addition, Watson sees a marked drop in the number of patient transfers. “We have only had to transfer one patient this month, and that was for good cause. We’re able to keep more patients now and be confident they will get the care they need from our telehospitalist team.”

John Jones, who functions as Director of Nursing at SCKMC, sees additional benefits from the telemedicine program. The telehospitalist physicians are available to provide immediate response to nurses on duty from 7 p.m. to 7 a.m. Their quick accessibility makes a big difference.

“Even if it’s the middle of the night, our nurses can get a live demonstration from our telehospitalists that is carried via teleconnection to the monitor on the telemedicine robot at SCKMC,” Jones said. “Good communication is the single biggest factor determining a patient’s outcome, and our nurses and telehospitalists have fully rounded communication now from a team perspective. As a result, our nurses are learning to think like the doctors they work with, and they get comfort and assurance from the physicians that they are doing the right thing.” The telehospitalist physicians are also available to talk by phone and to text with nursing staff when their advice is needed.

#### **A quicker solution to the physician shortage**

Jason Kimball, MD, grew up and went to school in Kansas. After his hospitalist career took him to Atlanta with Eagle Hospital Physicians, he is happy to be back in Kansas, where he can be closer to his family and work with the Sunflower initiative as one of the SCKMC telephysicians.

“It’s all about the patients and keeping them close to their homes for exceptional medical care,” he said. “It’s great for the nurses, too. More than one have told me how amazing the technology is and how they wish they had had it years ago. For us physicians, it’s a pleasure to be supporting them, as well as nurse practitioners and physicians. Telemedicine helps them play a bigger role in their hospitals and become really cornerstones in the care that is provided.”

For patients, the response has also been positive. “They appreciate immediate access to a physician,” Watson said. “What we’re offering is a quicker solution to the physician shortage than anything else that is available. Patients can see it. And it’s a revelation for our employees.”

#### **Pioneers in inpatient telemedicine**

As a pioneer in inpatient telemedicine, Eagle has spent more than five years perfecting its telemedicine service models of care and tailoring them to specific settings, such as rural hospitals where telemedicine can bring specialized care to the bedside where it might otherwise be unavailable.

Benefits to rural hospitals include:

- Provision of care to patients in their home communities
- Around-the-clock access to expertise
- Improved quality of care
- Reduced out-transfer of adult medical patients
- Increased admissions and revenue

- Hands-on access to education and training for NPPs and other staff

“Telemedicine is most effective when applied where physician resources are scarce and patient care is time sensitive,” said Dr. McCormick. “And it is providing hope to rural hospitals in an era when closure is a very real possibility unless new models of care are deployed. We look forward to sharing information about our new services and successes with attendees at the NRHA conference.”

### **About Eagle Telemedicine**

Founded in 2008, Eagle Telemedicine was one of the first companies to emerge in the telemedicine physician service arena and continues to serve as a pioneer in the industry today, leading practical solutions, management tools and innovation through the use of telemedicine. Eagle currently offers telemedicine programs and solutions in: Hospitalist Medicine, Stroke and Acute Neurology, Psychiatric Care and Critical Care. The company was launched through Eagle Hospital Physicians, which develops and supports hospitalist physician practices serving hospitals in more than a dozen states. For more information, visit [www.eagletelemedicine.com](http://www.eagletelemedicine.com).

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