

EXTENDING THE REACH AND IMPACT OF PRIMARY CARE

In the face of growing demand for healthcare, you're tasked with the quadruple aim of improving patient experiences, clinician experiences, and business outcomes while lowering overall costs. With the constant evolution of how services are delivered, you need healthcare technology that helps you achieve these goals. With early detection, 95% of vision loss caused by diabetic retinopathy can be prevented, but patient compliance with annual retinal exams is about 60%. Patients often find it difficult to obtain an annual diabetic retinal exam for several reasons: lack of insurance or healthcare access, limited knowledge of the risk, or cultural and language barriers.

Implementing a diabetic retinopathy solution for primary care such as the **RetinaVue** care delivery model can help healthcare providers increase patient access⁵ to diabetic retinal exams in primary healthcare settings to help improve patient outcomes and lower population healthcare costs ²



A DATA-DRIVEN, VALUE-ORIENTED, PATIENT-CENTRIC EXPERIENCE

In less than five minutes during routine primary healthcare visits, the **RetinaVue** care delivery model enables healthcare providers to conveniently examine and identify patients with signs of diabetic retinopathy on fundus images.

The convenience and affordability of the care delivery model permits timely identification and intervention earlier in the disease course, ultimately resulting in better long-term patient outcomes, and better patient management by the primary healthcare provider.

- DR. EDWARD CHAUM, MD, PHD, MARGY ANN AND J. DONALD M. GASS CHAIR, PROFESSOR OF OPHTHALMOLOGY, VANDERBILT EYE INSTITUTE



EXPANDING PRIMARY CARE SERVICES WITH DIABETIC RETINAL EXAMS

Traditional retinal imaging technology limited the availability of diabetic retinal exams. The **RetinaVue** care delivery model makes access to the diabetic retinal exam in primary care settings simple and affordable.⁷



RetinaVue 700 Imager. The **RetinaVue** 700 Imager is simple to use and affordable. Image capture takes less than five minutes and generally does not require chemical dilation.



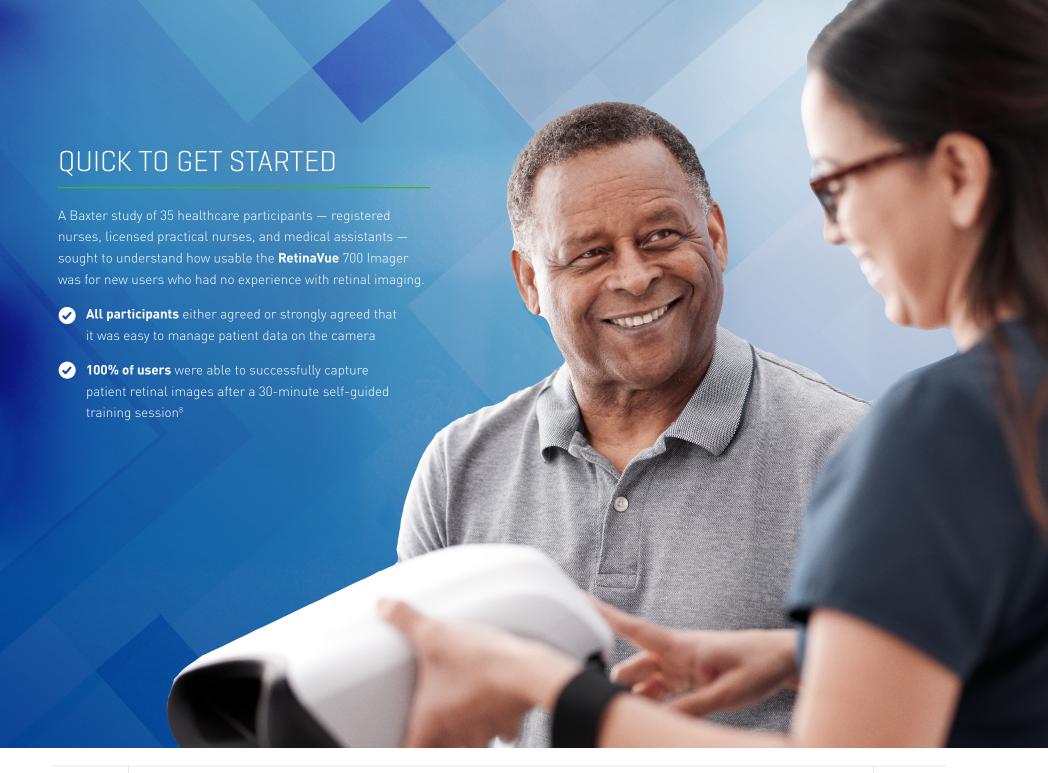
RetinaVue Network Software. Hosted on the highly secure **Microsoft Azure** platform, **RetinaVue** Network software transmits encrypted retinal images to ophthalmologists for review, diagnosis, and report generation. HIPAA compliant, SOC-2 Type II and HITRUST R2 certified, and FDA-cleared, the **RetinaVue** Network software manages image transmission, documentation, and workflows with EMR systems. It also gives healthcare providers population health data on their diabetic retinopathy program by clinic and patient.



Professional medical services. Image analysis and reporting is conducted by a nationwide team of state-licensed, board-certified ophthalmologists and retina specialists at **RetinaVue**, P.C., the first tele-ophthalmology provider to earn **The Joint Commission's** Gold Seal of Approval. Or if you choose, you can send images to your preferred local eye specialists.

Support and service. Baxter's nationwide **SmartCare** support services give you the coverage options to maintain your successful teleretinal program. There are even protection options for when a camera is dropped.





ECONOMICAL, FOR MORE PATIENTS

Early detection and treatment are essential to reduce the risk of vision loss for patients living with diabetes.¹ The **RetinaVue** care delivery model includes all the hardware, software, and medical services needed to perform diabetic retinal exams effectively and affordably⁷ in a primary care setting.

Clinical staff acquire retinal images with the **RetinaVue** 700 Imager and transfer the images with secure HIPAA-compliant software to board-certified ophthalmologists at **RetinaVue**, P.C., or your preferred eye specialist. The results are transferred back into the referring physician's EMR within one business day, complete with a diagnostic report, ICD-10 codes, and a referral plan.

Did you know?



Diabetic retinopathy programs can help primary care organizations **achieve up to 90% documented compliance in 12 months.**Accurate documentation of chronic conditions helps inform

care planning, care delivery, risk adjustment, appropriate coverage, and quality performance.

Increasing patient compliance with the diabetic retinal exam may also **qualify for financial incentives under quality programs**such as Medicare Advantage Star and the CMS Quality Payment Program.



REDUCE COSTS² AND IMPACT FINANCIAL PERFORMANCE

Once complications such as diabetic retinopathy develop, the average cost of care triples. ¹² Offering diabetic retinal exams through teleophthalmology increases access and lowers costs. ⁵ Today, most commercial healthcare plans provide coverage for diabetic retinal exams in primary care settings.

The AMA has updated CPT Code descriptions for retinal imaging codes 92227 and 92228 to specify retinal exams performed in primary care settings with remote interpretation. As of January 1, 2021, Medicare will cover with CPT Code 92228 for the **RetinaVue** care delivery model.

29%

of health system CFOs say care delivery transformation has the potential to achieve improved profitability in 2024.¹⁰





A study of Summit Medical Group (SMG) published in Telemedicine and e-Health¹² showed a primary care-based diabetic retinopathy program resulted in high compliance rates along with accurate referrals to an eye-care specialist.

- ✓ More than 75% of SMG patients followed the recommended care plan within one year, while earlier studies showed compliance rates ranged between 49 and 60%. ^{13, 14, 15}
- Of 83 referrals described in the SMG article who attended follow-up visits within one year, 52 of them (62.7%) had vision threatening diabetic retinopathy according to International Clinical Diabetic Retinopathy Disease Severity (ICDRS) scale criteria.¹²



THE VALUE AND EFFICIENCY OF AN INTEGRATED CARE DELIVERY MODEL

The RetinaVue care delivery model consists of four key activities.



#1 ORDER AND ACQUIRE

Place an order in the EMR for patients who are candidates for their annual retinal exam. A medical assistant or other clinician easily acquires patient retinal images with the handheld **RetinaVue** 700 Imager.



#2 TRANSMIT

Clinic staff sends retinal images online to an ophthalmologist for diagnosis and manages returned retinal exam reports and data with the **RetinaVue** Network software.



#3 ANALYZE

Accessing retinal images in **Azure**, the ophthalmologist creates a diagnostic report including a referral/care plan.



#4 REPORT

The primary care provider views the report of exam diagnosis and results including fundus images, ICD-10 codes, and a recommended referral/care plan.

To maximize efficiency and workflow, the **RetinaVue** Network software includes fully integrated, bidirectional interfaces with many popular EMR systems. This integration makes it seamless for clinic staff to place diabetic retinal exam orders and access diagnostic reports as part of their normal clinical workflow.



DATA SECURITY IN AZURE

RetinaVue imagers and RetinaVue Network software were designed from the ground up with security in mind, including end-to-end AES-256 encryption of data both in transit and at rest. Our controlled secure software development life cycle (SSDLC) incorporates cybersecurity risk management at all stages to ensure security is a cornerstone of all products throughout their entire life cycle. To ensure ongoing deployment of security best practices, the RetinaVue Network software undergoes regular third-party penetration testing and vulnerability scans. The RetinaVue Network software is also cleared as a Class II device by the FDA, a designation that requires strict design and risk mitigation controls.

We use an independent third party to perform annual SOC-2 Type II audits to enforce controls that protect the security and privacy of customer data. Your hosted data is secure, protected, and resilient on the trusted **Azure** platform. The **RetinaVue** Network software is built on **Azure**, which maintains compliance with over 90 different standards, including HIPAA, HITRUST R2 certified, and SOC-2 Type II.

If quality and value-based programs are something your organization is interested in, or if you are struggling on diabetic retinopathy measures and have the resources to implement this program in-house, it's worth it — for your providers and their patients.

 JON GARRETT, VICE PRESIDENT OF OPERATIONS, RENDR CARE



AN OPPORTUNITY WHERE EVERYONE BENEFITS

The **RetinaVue** care delivery model makes it easy for primary care providers, healthcare organizations, and eye specialists to increase access⁵ to diabetic retinal exams for patients living with diabetes.

- Ensure patients living with diabetes consistently receive timely diabetic retinal exams.⁵
- Help improve patient outcomes with better care planning and delivery.
- Allow eye specialists to focus on delivering higher-value services and sight-saving procedures to patients who need expert care.
- Accurately document chronic conditions to help inform care planning, care delivery, risk adjustment, and appropriate coverage.
- Improve quality measure performance. The NCQA HEDIS quality measure for annual diabetic retinal exams (NQF #0055) is included in Medicare Advantage Star Ratings and CMS Quality Payment Program measures.

You'll realize the most value from the **RetinaVue** care delivery model if it is well integrated with your systems and processes. Baxter consultants will work with your team to customize and operationalize a patient-centered system across your organization.

38.4 MILLION AMERICANS

have diagnosed diabetes, with 1.2 million new cases per year.¹⁶

60% OF PATIENTS

comply with completing their annual diabetic retinal exam.³

50%

OF HEALTHCARE EXECUTIVES

say "affordability issues" (based on medical inflation, combined with rising coverage costs) are most likely to impact their strategy in the year ahead.¹⁷

Integrating diabetic retinal exams into primary care has significantly improved quality score performance, patient access to the diagnostic, and early detection of eye disease for patients with diabetes.

- ED CURTIS, CEO OF SUMMIT MEDICAL GROUP





A FAST, AFFORDABLE SOLUTION FOR DIABETIC RETINAL EXAMS

Now part of Baxter, **Welch Allyn** solutions have been trusted by many primary healthcare providers in the United States to deliver reliable and innovative medical technology. **RetinaVue**, P.C., is the largest tele-ophthalmology service provider in the U.S. and the first and only to receive **The Joint Commission's** Gold Seal of Approval.

The **Microsoft Azure** platform is trusted by 90% of Fortune 500 companies. And with over 70 offerings for data security, **Azure** boasts the largest compliance portfolio in the industry.

Baxter and **Microsoft** have come together to help eradicate a leading cause of blindness in patients living with diabetes. Baxter offers a turnkey solution for diabetic retinal exams that runs on the power and security of **Azure** for transmitting and storing images. Diabetic retinopathy programs such as the **RetinaVue** care delivery model help primary healthcare providers improve patient outcomes with the exams that lead to timely, potentially vision-saving treatment.

Learn how you can expand primary care services and reach more patients at

RETINAVUE.COM

Rx Only: For safe and proper use of the products mentioned herein, please refer to the appropriate Operator's Manual or Instructions for Use.

References

- 1. Monitoring Visual Status: Why Patients Do or Do Not Comply with Practice Guidelines," Frank A. Sloan, Derek S. Brown, Emily Streyer Carlisle, Gabriel A. Picone, and Paul P. Lee. HSR: Health Services Research 39:5 (October 2004).
- 2. Newman, M. (2009) Fiscal Impact of AB 175: Analysis of the Cost Effectiveness of Store and Forward Teleophthalmology, Blue Sky Consulting Group for California Health Care Foundation, www. chcf.org/wp-content/uploads/2017/12/PDF-FiscalImpactAB175AnalysisTeleophthalmology.pdf.
- 3. Diabetic Retinopathy Preferred Practice Pattern® from the American Academy of Ophthalmology, http://dx.doi.org/10.1016/j.ophtha.2019.09.025, ISSN 0161-6420/19. Accessed July 29, 2020.
- 4. Comparing the Effectiveness of Telemedicine and Traditional Surveillance in Providing Diabetic Retinopathy Screening Examinations: A Randomized Controlled Trial; Mansberger et al, Telemedicine and e-Health, Vol. 19 No. 12, Dec. 2013.
- 5. Liu Y, Swearingen R. Diabetic eye screening: knowledge and perspectives from providers and patients. Curr Diab Rep. 2017 Aug 31; 17[10]:94.
- 6. Centers for Disease Control and Prevention. Vision Health Initiative (VHI). https://www.cdc.gov/visionhealth/basics/ced/ Published September 29, 2015. Updated June 3, 2020. Accessed September 9, 2022.
- 7. Cuadros J, Bresnick G. Can commercially available handheld retinal cameras effectively screen diabetic retinopathy? J Diabetes Sci Technol. 2017 Jan; 11(1): 135-7.
- 8. "Out of the Box: Easy Testing the Usability of the Welch Allyn RetinaVue 700 Imager" Baxter 2019. MC16429.
- 9. Mansberger SL, Gleitsmann K, Gardiner S, et al. Comparing the effectiveness of telemedicine and traditional surveillance in providing diabetic retinopathy screening examinations: A randomized controlled trial. Telemed J E Health. 2013 Dec; 19(12): 942-8.
- 10. Deloitte Insights. How CFOs can help transform health care organizations amid an uncertain economic environment. https://www2.deloitte.com/us/en/insights/industry/health-care/health-care-cfos-help-transform-organizations.html Accessed May 28, 2024.
- 11. "Vojta D, De Sa J, Prospect T, Stevens S. "Effective Interventions for Stemming the Growing Crisis of Diabetes and Prediabetes: A National Payer's Perspective." Health Aff (Millwood). 2012; 31: 20–26.
- 12. Stebbins K, Kieltyka S, Chaum E. Follow-Up Compliance for Patients Diagnosed with Diabetic Retinopathy After Teleretinal Imaging in Primary Care. Telemed J E Health. 2020 Jun 15.
- 13. Newman R, Cummings DM, Doherty L, Patel NR. "Digital Retinal Imaging in a Residency-based Patient centered Medical Home." Fam Med. 2012; 44(3): 159-63.
- 14. Jani PD, Forbes L, Choudhury A, Preisser JS, Viera AJ, Garg S. "Evaluation of Diabetic Retinal Screening and Factors for Ophthalmology Referral in a Telemedicine Network." JAMA Ophthalmol. 2017 July; 135(7): 706–714.
- 15. Keenum Z, McGwin G, Witherspoon CD, Haller JA, Clark ME, Owsley C. "Patients' Adherence to Recommended Follow-up Eye Care after Diabetic Retinopathy Screening in a Publicly Funded County Clinic and Factors Associated with Follow-up Eye Care Use. JAMA Ophthalmol. 2016; 134(11): 1221–1228.
- 16. American Diabetes Association Statistics About Diabetes. www.diabetes.org/resources/statistics/statistics-about-diabetes Accessed September 16, 2024.
- 17. Deloitte. 2024 Outlook for Health Care Planning for the Future of Health: Top trends for 2024. https://www2.deloitte.com/us/en/blog/health-care-blog/2023/outlook-for-health-care.html. Accessed May 28, 2024 Baxter.com.

Baxter.com

Baxter, RetinaVue, SmartCare and Welch Allyn are trademarks of Baxter International Inc. or its subsidiaries.

Azure and Microsoft are trademarks of Microsoft Corporation.

HEDIS is a registered trademark of the National Committee for Quality Assurance (NCQA).

The Joint Commission is a trademark of the Joint Commission enterprise.

US-FLC147-220050 (v2.0) 10/2024

