



A collaborative, protocol-driven approach maximizes the utility of telehealth in Ophthalmology. We monitor chronic eye disease via a daily review of physiological and non-physiological data. Our remote care teams also host monthly patient check-in calls. During our patient check-in calls we share information, review symptoms, monitor adherence to medication and care plan guidance, assess patient's response to therapy, and prompt an escalation alert - when indicated. This helps to drive patient compliance and improve outcomes.

Our condition-specific, telehealth-based Care Plan template can be customized by the physician-led Care Team and integrated with our cloud-based monitoring platform. Our Ophthalmic Technicians, Registered Nurses, and Certified Medical Assistants will monitor a panel of approximately 125 patients using the Care Plan to document patient responses and engagement. These structured Care Plans are designed to support your Care Team in the management of glaucoma, diabetic retinopathy, age-related macular degeneration (AMD), cataracts, and other conditions.

General Telehealth Workflow Principles

- **Patient Consent & Education:** Obtain and document the patient's written or verbal consent to enroll in the telehealth services program. Educate the patient, family, and/or caregivers on the benefits of the program.
- **Technology Set-Up:** Ensure patients are comfortable with the safe and effective use of monitoring device(s).
- **Documentation:** Standard progress note documentation procedures apply including patient consent, phone encounters, data review/observations, and digital communications by email, text, and patient portal.
- **Escalations:** Promptly flag patients for escalation to the Physician-led Care Team for phone or in-person consultation if monitoring thresholds are breached, or if urgent evaluation is warranted.

Telehealth Roles & Responsibilities – Remote Ophthalmic Technicians and Support Team

- Prepare patient and equipment (assist with home vision test apps and/or remote monitoring devices).
- Collect relevant health history, current symptoms, and medication compliance.
- Instruct patients to use home-based visual acuity or other virtual tools.
- Facilitate image/data capture (supporting patient with photos via smartphones, guiding home-use devices, or directing store-and-forward imaging if available).
- Verify and update administrative details (insurance, pharmacy, emergency contacts).
- Communicate instructions for upcoming in-office or telemedicine visits with the Ophthalmologist.
- Assist in scheduling appointments, communicate to Care Team patient requests for Rx medication refills...
- Triage patient concerns for urgency before escalating to your physician-led Care Team.
- Educate patients about their chronic condition, their Physician's Care Plan, possible disease progression, symptom monitoring, and self-management (e.g., monitoring vision, recognizing acute symptoms).
- Reinforce compliance with medications (e.g., eye drops for glaucoma, anti-VEGF schedules for AMD).
- Support triage decisions and facilitate direct communication with the Ophthalmologist and other patient Care Team members, PCP or Medical/Behavioral Specialists, as needed.

Condition-Specific Telehealth Protocols

Condition	Remote Assessment Tasks	Red Flags for Escalation to In-person Care
Glaucoma	<ul style="list-style-type: none"> - Review home IOP (if home tonometry available) - Assess symptoms (visual field changes, eye pain, redness) - Review medication adherence - Guide in using apps for visual field testing if available 	<ul style="list-style-type: none"> - Sudden vision loss - Severe pain - Marked increase in IOP readings
Diabetic Retinopathy	<ul style="list-style-type: none"> - Guide/interpret remote photos (store/forward) - Monitor blood glucose/HbA1c data - Instruct in using vision self-assessment tools - Review systemic diabetes management 	<ul style="list-style-type: none"> - Distorted vision - New floaters or flashes - Eye pain
AMD	<ul style="list-style-type: none"> - Amsler grid monitoring - Collect home vision changes - Review compliance with home self-monitoring - Encourage at-home lighting and environment optimization 	<ul style="list-style-type: none"> - Sudden central vision loss - Distortion worsening - Difficulty reading/driving
Cataracts	<ul style="list-style-type: none"> - Assess visual complaints (glare, blur, night driving issues) - Guide home vision checks - Review daily functioning impact 	<ul style="list-style-type: none"> - Sudden vision loss - Suspected lens dislocation - Acute ocular pain

Additional Notes

- **Hybrid Models:** For glaucoma and diabetic retinopathy, hybrid models (in-person imaging/testing with remote follow-up) are often optimal for monitoring progression and compliance.
 - **Store-and-Forward:** Store-and-forward imaging is crucial in diabetic retinopathy and can support glaucoma, AMD, and cataracts for remote diagnostic review by the Ophthalmologist.
 - **Quality and Billing:** Maintain telehealth standards-of-care, adhere to state/federal regulations, and use appropriate billing codes as per current payer policies.
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Here are evidence-based telehealth Care Plan elements for our Ophthalmic Technicians and Registered Nurses to support patients with glaucoma, diabetic retinopathy, macular degeneration, and cataracts.

General Structure for Telehealth Care Plans for each condition.

- **Initial assessment and data collection by Physician-led Care team** (may include visual acuity testing, intraocular pressure measurements, imaging or photo submission, symptom checklists).
- **Regular monitoring and follow-up** by remote care team.
- **Ongoing patient education and symptom review**
- **Prompt escalation** if progression is detected or symptoms worsen.

Ophthalmic Technician's Responsibilities

Glaucoma Patients

- Facilitate remote collection of visual acuity and patient-reported outcomes.
- Assist with scheduling and technology set-up.
- Train patients (when feasible) to use at-home tonometry devices, if available.
- Upload home-acquired intraocular pressure (IOP) or visual field results to the EMR for Care Team review.
- Review patient data (IOP, visual acuity, symptoms) prior to telehealth check-in calls.
- Perform virtual triage; escalate to Ophthalmologist if IOP is uncontrolled or there is vision deterioration.
- Provide disease management education (medication adherence, eye drop technique, symptom alertness).
- Monitor for side effects or vision changes and coordinate referrals as needed.

Diabetic Retinopathy Patients

- Schedule and prepare patients for remote retinal imaging, either onsite with tele-ophthalmology equipment or in the patient's home (with mobile services).
- Upload retinal images to secure system for specialist review.
- Conduct reminders about routine diabetic eye screening.
- Review retinal image reports and communicate results to patients (if requested by Ophthalmologist).
- Deliver diabetes management education (glycemic control, schedule for periodic eye exams).
- Provide counseling on modifiable risk factors and self-monitoring.
- Coordinate follow-up virtual consultations or expedite in-person visits if disease progression or sight-threatening pathology is identified.



Macular Degeneration Patients

- Support patients with self-administered or assisted visual testing at home (e.g., Amsler grid, home-based devices).
- Collect and enter self-monitoring results or help with uploading device-generated data.
- Identify and flag patients with new or worsening symptoms.
- Review self-monitoring data for visual changes; escalate as needed for urgent tele-consultation or in-person care.
- Reinforce education on symptoms that require immediate attention (sudden vision loss, distortion).
- Guide patients in medication adherence, self-monitoring routines, and digital literacy for telehealth tools.

Cataract Patients

- Support remote visual acuity checks and collect patient complaints regarding vision impacts (glare, night driving).
- Assist with obtaining and uploading photos if required.
- Ensure follow-up for deterioration in functional status.
- Assess self-reported visual changes and functional impairments.
- Educate on cataract progression, safety (fall risk), and indicators for surgery or in-person evaluation.
- Reinforce adherence to follow-up and coordinate surgical referrals when necessary.

Key Telehealth Strategies

- **Store-and-forward tele-ophthalmology:** OT's collect images/data, communicate results, escalate when needed.
- **Synchronous Patient-Check-in Calls:** our remote care team will call patients at least once per month.
- **Asynchronous care:** Data is reviewed remotely, allowing the Care Team to facilitate care coordination.
- **Home-based monitoring:** Increasing use of at-home devices and applications for chronic conditions.
- **Documentation:** Thorough documentation of all actions, education provided, and escalation steps are essential for care continuity.

Note: Telehealth is intended to supplement - not replace comprehensive in-person eye assessments.

These telehealth workflows are shown to be effective for screening, monitoring, early escalation, and handling patient education in chronic eye diseases managed - improving access to care especially for underserved or mobility-limited populations.



Telehealth Chronic Care Management (CCM) Care Plans

CCM services provide structured, ongoing care for patients with multiple chronic conditions—such as the major vision-threatening diseases: **glaucoma, diabetic retinopathy, macular degeneration, and cataracts**. Ophthalmic Technicians can implement CCM to efficiently deliver and coordinate workflows under the supervision of the Ophthalmologist.

Key Components of CCM Care Plans in Ophthalmology

- **Individualized Care Plan:** Each patient has a personalized, electronic care plan that addresses physical, mental, cognitive, psychosocial, functional, and environmental needs, designed and updated in collaboration with the supervising clinician.
- **Medication Management:** Continuous review and reconciliation of medications to optimize adherence and minimize side effects, which is especially critical for maintaining eye health in these conditions.
- **Remote Monitoring & Virtual Visits:** Regular in-home visual assessments, review of self-reported symptoms, reminders, and status checks. Digital imaging and visual field tests may be performed at remote sites or using home devices (when available), with images and data sent to specialists for review.
- **Care Coordination:** Seamless communication and coordination among ophthalmologists, primary care providers, specialists, and community resources. Ophthalmic Technicians can gather information, relay updates, and facilitate referrals as needed.
- **Patient Education & Self-Management Support:** Empowering patients with resources to manage their condition, use assistive technologies, and track symptoms. Education may include instruction on medication use, recognizing warning signs, and using telehealth platforms for virtual check-ins.
- **Access and Support:** Patients have ongoing access to healthcare staff for urgent needs and questions, improving adherence and reducing complications.
- **Documentation for Billing:** All activities including encounters, time spent on care management, and communication will be documented to meet Medicare and insurance billing requirements.

Role of Ophthalmic Technicians in CCM, RPM, PCM, and RTM

- **Ophthalmic Technicians** play critical roles in data collection, patient education, regular check-ins, medication reconciliation, and documentation.
- Tasks include calling patients to review symptoms, retrieving and relaying remote monitoring data, coordinating care, and uploading images and documents for Physician review.
- All care is performed under the oversight of an eligible supervising Ophthalmologist, the responsible party for care plan establishment and clinical decisions.

Best Practices for CCM

- Use certified electronic health records integrated with telehealth platforms.
- Develop disease-specific protocols for virtual assessments and escalation thresholds.
- Regularly train staff on teleophthalmology tools, patient privacy, and new technologies.
- Engage patients in their care by providing education and easy access to providers and resources.



This approach enhances **continuity of care, access, and patient outcomes** for chronic eye diseases - allowing for individualized outreach, proactive management, and reduced disease progression, all billable within the CCM framework.

Ophthalmic Technicians conducting Chronic Care Management (CCM) monthly check-in calls for patients with glaucoma, diabetic retinopathy, macular degeneration, and cataracts should use structured care plans and standardized questions (approved by the Physician-led Care Team) tailored to each condition. Successful practice involves consistent documentation, patient-specific assessment, and ensuring protocol adherence for telehealth visits.

Key components and sample questions for CCM care plans:

1. Core Components for Telehealth CCM Care Plans

- **Patient Identification:** Diagnosis, comorbidities, and recent clinical findings.
- **Visit Modality:** Note if the call is video or phone, and document explicit patient consent for telehealth.
- **Chief Complaint and Symptom Review:** Ongoing or new vision changes, pain, medication side effects...
- **Chronic Disease Status:** Disease-specific monitoring and trend analysis (visual acuity, adherence, complications).
- **Medication Review:** Adherence, side effects, refill needs.
- **Lifestyle and Safety:** Home safety, fall risk, diabetes control, or dietary modifications as applicable.
- **Education and Counseling:** Reinforce importance of adherence and routine follow-up.
- **Triage:** Flagging urgent issues requiring immediate in-person evaluation or specialist involvement.
- **Documentation:** Modality, start/stop times, consent, findings, and any troubleshooting as per telehealth standards.

2. Standardized Monthly Check-In Questions by Condition

General Eye Health for All Diagnoses

- Have you noticed any new or worsening vision changes since our last call (blurry vision, floaters, flashes, double vision)?
- Have you experienced any eye pain or discomfort?
- Are you having any difficulty with your prescribed eye drops or oral medications? Any side effects or trouble with administration?
- Do you have any difficulty performing daily activities because of your vision?

Glaucoma

- Are you using your glaucoma drops as prescribed? Any difficulty accessing or using them?
- Any halos around lights, increased eye pressure sensation, or headaches?
- When was your last intraocular pressure check?



Diabetic Retinopathy

- How is your blood sugar? Any recent changes in your hemoglobin A1C or blood glucose readings?
- Have you had any updates to your diabetes medications?
- Any new or increased floaters, spots, or areas of lost vision?

Macular Degeneration

- Are you experiencing more difficulty seeing central objects or reading than before?
- Any new or increased distortion/waviness in your vision (Amsler grid changes)?
- Any trouble recognizing faces or distinguishing colors?

Cataracts

- Is there increased glare or trouble with bright lights, especially when driving at night?
- Any worsening of cloudy/blurry vision?
- Any difficulties affecting independence, such as increased falls or trouble identifying objects?

Social/Support and Functional Assessment for Any Diagnosis

- Any new difficulties with home safety, falls, or need for additional support?
- Do you have transportation for follow-up appointments or procedures?
- Are there barriers to following medical recommendations (cost, support, side effects)?

3. Additional Telehealth Protocol Reminders

- Always re-confirm the patient's identity and consent for a telehealth visit at the start of each call.
- Ask if there are any urgent or emergent complaints—refer immediately if so.
- Document all questions, responses, and any advice or triage actions taken.
- Schedule next check-in and ensure understanding of home monitoring tools if provided.

Caveat: Telehealth visits do not substitute for comprehensive in-person eye exams when indicated. Patients must be educated about the limitations of remote evaluation and triaged for in-person care as needed.

These structured check-in templates help ensure comprehensive CCM, consistency for various staff roles, and regulatory compliance as telehealth expands in ophthalmology.