

My name is Nasry Michelen and I am the Chief Strategy Officer for ImagineMic, a health innovation company based in the Hudson Valley. ImagineMIC's™ program is a complete and comprehensive model of care that integrates cutting edge technology with critical care clinicians to improve patient outcomes and reduce total cost of care for the most chronic and costly individuals living at home or residing in skilled nursing facilities. ImagineMIC™ integrates FDA-cleared, wearable Patch technology transmitting real-time, clinically actionable hemodynamic data to a Monitoring Intervention Center (MIC) staffed by ER board certified physicians, NPs, RNs and other allied health professionals. Our program is a ready now solution available for deployment throughout NY state.

Our Founder and CEO, Dr. Anthony J. Bacchi, M.D. has a proven track record as a healthcare innovator; demonstrated by the results of the Restorative Care Unit grant he received from NY state in 2016. That grant was centered on reducing hospital admissions from skilled nursing facilities by leveraging telemetry technology with enhanced nurse staffing ratios. The results were dramatic, demonstrating a reduction for all cause readmissions from 21% or greater to below 6%. The NYSDOH contracted with an independent auditor to assess the program performance over the 3 year period and concluded that the state could achieve over \$500 million dollars in savings, if implemented on a statewide basis.

The final audit report on the Restorative Care units is mandated to be delivered to the legislature by March 31, 2020. Given the urgency of implementing solutions that have an immediate positive impact on the 2021 budget, the legislature should request NYSDOH to circulate the report immediately in order to begin discussions through the MRT process asap.

As effective as the RCU model was, new technology developments have made the program far more economical and scalable, such that it can now be applied to chronically ill individuals living at home or residing in rural SNFs or other community based settings.

Working with Silicon Valley partners over the past 2 years, Dr. Bacchi has developed best-in-class Remote Patient Monitoring technology that has already demonstrated even greater savings potential than the original nursing home monitoring program. ImagineMic's comprehensive chronic care management program integrates health IT, AI and interdisciplinary teams of clinicians housed in our Monitoring Intervention Center. The new program is already being used to reduce unnecessary hospital admissions and ER visit costs for PACE (Program for All-Inclusive Care for the Elderly) members living in their communities.

We would welcome the opportunity to work with the new Medicaid Redesign Team reconvened by the Governor, to explore the potential of leveraging technology solutions to dramatically bend the Medicaid cost curve, primarily driven by expenses associated with care for the most frail and elderly population. **We propose to accomplish this with a minimal investment of \$15 million, in a value based agreement that not only reduces short and long term costs, but also generates significant ROI revenue back to the state through a shared savings component.**

The Governor's proposed budget has identified the most critical cost drivers of Medicaid spending:

*"MLTC spending growth overall -- and CDPAP within it -- have been the biggest drivers of spending growth in New York's Medicaid program"*

*“From FY 2013 to FY 2019, MLTC spending grew by 301 percent. Much of this spending growth was driven by the increase in use of the Consumer Directed Personal Assistance Program (CDPAP), which is designed to divert members from high-cost nursing homes and institutional settings to less costly in-home care that keeps them in their communities. From FY 2014 to FY 2019 CDPAP enrollment grew by 88 percent, well beyond the 23 percent increase in mainstream managed care enrollment. Between 2017 and 2018 alone, spending through CDPAP grew by 85 percent from \$1.3 billion to \$2.4 billion.”*

ImagineMic is singularly focused on addressing the unsustainable growth for this population cohort, set to grow exponentially along with the associated home health costs. ( NY state’s 65+ population has grown by nearly 24% vs the national average of 15% growth).

MLTC plans, including the CDPAP component, have the admirable policy goal of diverting members from high-cost institutional settings to less costly in-home care. While there are now some incentives for the MLTC’s to control unnecessary hospital admissions, in fact, MLTCs are not financially incentivized to address total cost of care and the resulting state share of these expenses. MLTCs are primarily focused on controlling home health care hours telephonically, rather than providing the intensive chronic care management that improves health outcomes and reduces unnecessary utilization of hospitals and nursing homes.

The Governor’s proposed budget rightly targets program eligibility compliance as a vehicle for reducing costs through program integrity initiatives, but limiting future growth does not immediately or dramatically address the unsustainable existing and projected costs.

It’s time to apply available health technology solutions that reduce total cost of care, improve quality and member satisfaction, and are in alignment with state and DSRIP policy goals. Our solution does not rely on benefit or eligibility restrictions and has member quality of life as a central component.

**The ImagineMic program is NOT just a “telemedicine” application.**

While there are dozens of telemedicine companies, only ImagineMic provides a proven and comprehensive solution. Almost all telemedicine products in use today are audio-visual communication devices that are essentially fancy versions of “Skype” or “Face Time”. These products have some value, primarily in the behavioral health and in diagnosing dermatological conditions, sore throats and other minor illnesses.

They are not intended or capable of transmitting real-time hemodynamic data (2-lead ECG, heart rate, pulse, blood pressure, oxygen, weight and glucose) that is critical in diagnosing medical conditions most relevant to older individuals suffering with multiple co-morbidities.

ImagineMic transmits all this critical data through a small, FDA-cleared, disposable patch applied to the chest. Members at home are also equipped with a tablet that can, with a touch of a button or voice command, put them in immediate audio/visual contact with a critical care provider in our Monitoring Intervention Center (MIC). The providers in the MIC are simultaneously reviewing all the hemodynamic data being streamed from the patch in real-time. Most diagnoses and treatments can be provided/coordinated without having to be transported to an emergency room or clinic for evaluation.

ImagineMIC™ confronts serious and growing gaps in healthcare delivery, including:

- After discharge from a nursing home or a hospital to the patient's home it is difficult to monitor their health status and cumbersome for them to visit a doctor's office. This contributes to lapses in compliance with treatment regimens.
- Without technology, there is no way to monitor hemodynamic functions 24/7/365 to detect or anticipate changes in patient's condition requiring medical intervention.
- Compounding the above, is the shifting of the US geriatric population aged 65 and over, from 28 million to 79 million in the next twenty years, with a high prevalence of chronic diseases and the need for improved quality of services at affordable rates.<sup>1</sup>
- Currently, \$26B is spent annually on hospital readmissions within 30 days, at least \$17B of which is considered avoidable and unnecessary.<sup>2</sup> This statistic only references 30 days post-discharge, not considering admissions from the home that could have been avoided altogether. Given the shifting geriatric population into the home setting, these costs will exponentially increase.
- Daily wellness calls from the MIC staff provide the social interaction to alleviate feelings of anxiety and isolation that are main drivers of trips to the ER that result in unnecessary hospital admissions.

## The Evolution of Chronic Care Management

### ImagineMIC™

**Proprietary Patch Technology Working in Tandem with a Monitoring Intervention Center (MIC)  
Allowing Clinicians To Monitor Patients 24/7/365 IN ANY SETTING**

Proprietary FDA-cleared patch technology streams <b>real-time hemodynamic data</b> to the clinicians in the MIC	The MIC, a remote unit located in New York State, is <b>staffed 24/7/365</b> by Board Certified ER Physicians, PAs, NPs and specialty trained RNs	<b>Cyber-secure, proprietary telemedicine devices</b> allow for immediate audio-visual intervention between individuals and clinicians within the MIC	<b>A more cost-effective model with improved clinical outcomes and easily scalable</b>
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ImagineMIC™ has the following components:

<sup>1</sup> An Aging Nation: The Older Population in the United States, May 2014

<sup>2</sup> How Obamacare Could Save Taxpayers \$17 Billion, October 26, 2014

- **MonitorMe™ App:** A downloadable, proprietary application that transforms any mobile device, laptop, tablet, or television into a functioning, cyber-secure telehealth communication tool. Features include real-time telemedicine, hemodynamic monitoring, medication management, and caregiver and patient education.
- **Patch Technology:** A small, proprietary FDA-cleared, hypoallergenic patch containing several biosensors. The patch is placed on a patient's chest and sends multiple hemodynamic signals in real time from the patient to a monitoring center. Currently, the patch transmits 2-lead ECG signals, respirations, heart rate, and skin temperature through a proprietary gateway device via cellular transmission. The patch is disposable and lasts 5 days. Additional hemodynamic information, such as oxygen level, are scheduled for release with FDA clearance in Q2 2020.

## The ImagineMIC Remote Monitoring Patch



Physical Characteristics  
Approx Dimensions: 10cm X 8cm  
Weight: 18gm

A small, proprietary FDA-cleared, water-resistant, hypoallergenic patch containing several biosensors is placed on a patient's anterior chest wall.

This device sends multiple hemodynamic signals in real time from the patient to the Monitoring Intervention Center (MIC).

The Patch streams 2 leads of ECG, is disposable, lasts 5 days and tracks:

- Heart rate
- Respiration rate
- Skin Temperature
- Movement/Fall Detection
- SPO2 (Available in Q2 2020)

Also connects with Bluetooth enabled blood-pressure cuffs, pulse-oximeters, weight scales, and glucometers (if required).

- **Gateway Device:** A proprietary device which gathers, processes and encrypts data from the patch. Additionally, through Bluetooth technology, it automatically gathers information from other electronic measuring devices in the patient's home such as glucometers, weight scales, blood pressure machines and pulse oximetry. This hemodynamic data automatically populates the Electronic Medical Record ("EMR") in the MIC.
- **Monitoring Intervention Center (MIC):** The MIC is a centralized resource for remotely monitoring an unlimited number of patients. The MIC is outfitted with proprietary MonitorMe™ software and staffed 24/7/365 with a multidisciplinary team of healthcare providers including board certified Emergency physicians, NPs, RNs and other allied health professionals.
- **Application Integration:** Through the app on their mobile device, laptop, tablet or through TV integration, the patient can interact with a member of their multidisciplinary team with any

health concerns. The healthcare professional within the MIC who receives the call has immediate audio/visual communication with the patient and, **for the first time, can simultaneously see the hemodynamic information streamed from the patient's gateway device on their screen.**

**Additional benefits of our Remote Patient Monitoring program:**

**Provide rural SNFs and individuals in upstate** counties that lack clinical resources and medical facilities, with the ability to access critical services and specialists without having to travel great distances for evaluation and treatment. With new patch technology, the ImagineMic program is easily and economically scalable for immediate implementation.

Medication compliance and guidance to ensure optimal health potential.

In summary, we believe that applying the Remote Patient Monitoring capabilities and the clinical chronic care management program of ImagineMic will yield immediate and significant savings to the state, while greatly improving quality of care for at home or rural based frail individuals.

We welcome the opportunity to participate in the Medicaid Redesign Team process so that this innovative approach can be more fully considered in a shared savings model partnership with NY state.

Thank you for the opportunity to submit this proposal for your consideration.