April 2017

Dear Colleagues:

I hope you’re enjoying these first few weeks of spring. I’d like to devote my April letter to organ donation and the impact of technology on the practice of medicine.

**Organ Donation:** If you were in New York City, Albany or Syracuse on April 21, you may have noticed blue and green lights were ablaze on several state structures to commemorate “Donate Life Month” and, more specifically, “Blue Green Day”, to promote organ, eye and tissue donation. According to the federal Organ Procurement and Transplant Network, of the 118,000 people nationwide currently waiting for organ transplants, about 10,000 of them are New Yorkers. Yet, just 29 percent of eligible New Yorkers are registered with New York State Donate Life Registry. As a physician, you know how vital organ donation is to saving lives. Every organ donor has the ability to save up to eight lives. Tissue and eye donations can help improve the lives of up to 50 people.

There are now more opportunities to register to become an organ donor than ever before. In addition to traditional resources such as the websites for the Department of Health, Department of Motor Vehicles, and organizations like Donate Life, New Yorkers buying insurance on the New York State of Health exchange, the state’s official health insurance Marketplace, can now enroll as organ donors in the New York State Registry through the Marketplace. Since the launch of this option, more than 6,300 New Yorkers have consented to enroll in the New York State Donate Life Registry via the health plan marketplace.

As of February 2017, 16- and 17-year-olds can register their intentions to become organ donors at the time they apply for their first driver’s licenses, learners’ permits or non-driver IDs, which will automatically make them official organ donors when they turn 18. It is also the fifth anniversary of “Lauren’s Law”, the legislation initially enacted in 2012 that linked organ donor registration with driver’s license renewals. New Yorkers are required to check one of the two boxes related to organ donation in order to process their application.

I encourage you to talk to your patients about organ donation. Talk to your friends and family, too. Organ donation can also be included in discussions about end-of-life care, advanced directives, and health care proxies. If you are not yet a registered donor yourself, take this opportunity to set an example. Go to [http://www.health.ny.gov/professionals/patients/donation/organ/](http://www.health.ny.gov/professionals/patients/donation/organ/) and help us save more lives.

**Technology:** Electronic medical records (EMR), telehealth, and remote monitoring devices have become important tools in the practice of medicine. However, some devices can intrude on our relationships with patients. The February session of my Commissioner’s Medical Grand Rounds series explored the impact of technology on the patient-physician relationship. While technology often enhances the practice of medicine, it can also be detrimental to the way
physicians interact with their patients, which can result in poorer health outcomes. However, that doesn’t have to be the case.

Our guest speakers suggested that physicians place the computer screen equidistant from both the physician and the patient. Physicians can reduce any negative impact of the screen by using orienting statements that introduce the purpose of a computer - how it helps with patient care, safeguards confidentiality and verifies information. Move away from the screen when it is not in use. Computer use during the office visit should be limited and the focus should remain on the patient.

A vast array of other technologies, such as telehealth, remote monitoring devices, and wearables, are making their way into patient care. More than half of all U.S. hospitals now have some form of telehealth, and the numbers are expected to grow. Telehealth is especially viable in the treatment of behavioral health and for chronic health conditions, enabling providers to peer inside patients’ homes and see their living conditions. Here in New York, the Medicaid program is working on implementing the requirements of the telehealth parity statute that went into effect in January 2016. This includes expanding the scope of services and providers for which telemedicine will be reimbursed, as well as incorporating “remote patient monitoring” and “store and forward” technologies into the benefit package for both fee-for-service and Medicaid managed care.

Research suggests that these new technologies may be improving health outcomes. One study looked at the use of remote monitoring in the care of patients with heart failure. It found a 50 percent drop in readmissions and a 40 percent decline in mortality. There is another reason to embrace these technologies: patients like them. One survey found that about 30 percent of adults would switch practices if they found a doctor who used virtual visits. In another, 60 percent of patients say technology improved their relationship with their doctors. Even providing an email address can make a difference. Many patients say they ask questions in email that they would never ask in person.

Integrating new technologies into a practice can be a challenge. Some new technologies are complicated to set up and difficult to learn. But health care technologies are here to stay, and when used appropriately can enhance health care. Consider learning more about them and making them a viable part of your practice. For more information, watch the archived webcast at http://www.health.ny.gov/commissioner/grand_rounds/technology_changes/. CME credits are available.

Thank you, as always, for the work you do to improve the health of New York residents.

Sincerely,

Howard A. Zucker, M.D., J.D.