



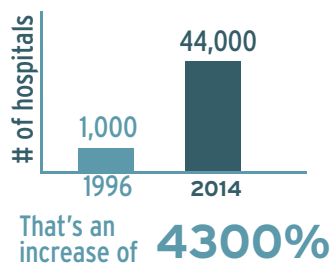
COMPLETE CARE REMOTELY THERE

Eagle Telemedicine provides an efficient, highly functional alternative to nighttime care in rural hospitals

EXPLOSIVE GROWTH

The hospitalist category is the fastest growing physician specialty in history¹

In 1996, there were fewer than 1,000 hospitalists. Today, there are more than 44,000²

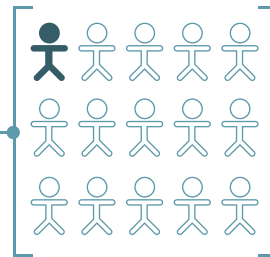


YET THE DEMAND STILL OUTPACES THE SUPPLY



72%

of hospitals now employ hospitalists³
BUT ONLY



1 IN 15

internal medicine students specialize as hospitalists⁴

STIFF COMPETITION

To remain competitive, hospitals have to offer hospitalists higher salaries and more flexible schedules



Overall hospitalist compensation has more than **DOUBLED** in the last fifteen years⁵



67%

Hospitalists often work long hours to maximize income.

67% reported that career burnout was "significant" or "very significant"⁶

DAY TIME

VS

NIGHT TIME

In-Person

\$100-\$140+ per hour

\$125-\$150+ per hour

Telemedicine

N/A

\$50-\$75+ per hour

Consequently, hospitals pay more for nighttime coverage⁸

12:00 PM

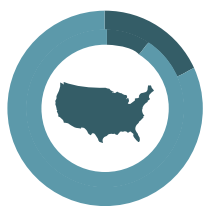
and

7:00 AM

Night shifts are draining and are dissatisfying to physicians because low nighttime admission rates mean fewer billable hours. The fewest admissions occur between 12 pm and 7 am⁷

RURAL REPERCUSSIONS

The competitive market makes it particularly challenging to retain and recruit hospitalists in rural areas



20% of US citizens live in rural areas

BUT ONLY

10% 10% of doctors practice there⁹

WHY? in part because rural hospitalists have a high burnout rate



LONG HOURS

Lower admission rates do not warrant an FTE nocturnist, so rural hospitalists often work more night shifts



MORE RESPONSIBILITY

Physicians in rural communities have smaller care teams with fewer resources but must meet the same standards as their urban counterparts



Some rural hospitals are increasing hospitalist pay **5%-6% every 6 months** just to retain their physicians¹⁰

TELEMEDICINE: A NEW SOLUTION

Eagle Telemedicine provides an alternative to costly nighttime staffing models: the telehospitalist

TELEHOSPITALIST



HOW IT WORKS



1 The telehospitalists can access EMRs and diagnostic scans to review patient history



2 Using the latest in communication technology, the telehospitalist interacts with and evaluates patients



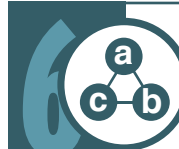
3 The telehospitalist communicates face to face with the patient to discern needs and symptoms



4 On-site nurses assist with physical exam under the telehospitalist's direction



5 The telehospitalist makes a diagnosis and prescribes treatment



6 If there are not current admissions, the telehospitalist may be leveraged across the network, creating cost savings

TELEMEDICINE: A NEW SOLUTION



CUSTOMER SATISFACTION

State-of-the-art care and improved response time increase customer satisfaction



QUICK ACCESS

Instead of waiting for the daytime hospitalists, patients receive real-time diagnoses and treatment



COST SAVINGS

Leveraging telehospitalists saved one Eagle partner **40%** of nightly physician costs¹¹



REDUCE BURNOUT

Physically present hospitalists can focus on daytime responsibilities



GROWTH POTENTIAL

Access to the care provided by telehospitalists increased one Eagle partner's hospital nighttime admissions by 50%¹²

FOR MORE INFORMATION ON HOW **EAGLE TELEMEDICINE** CAN HELP PROVIDE CONSISTENCY IN COVERAGE IN YOUR HOSPITAL VISIT WWW.EAGLETELEMEDICINE.COM



SOURCES: 1. www.aspr.org 2. www.the-hospitalist.org 3. www.the-hospitalist.org 4. jtt.sagepub.com 5. www.todayshospitalist.com 6. www.todayshospitalist.com 7. jtt.sagepub.com 8. www.eagletelemedicine.com 9. datawarehouse.hrsa.gov 10. www.todayshospitalist.com 11. www.eagletelemedicine.com 12. www.eagletelemedicine.com