Prisma Health Pediatric Virtual Care Center – Primary Care

Ryan Hensley, MD, MPS, CPC, FAAP
Pediatrician and Physician Informaticist
C. Stuart Simko, M.D
Pediatrician at Prisma Health Pediatric Greer



Programmatic Presentation Abstract

Background Information:

The idea of having a "Pediatric Virtual Care Center" has been on Prisma Health's agenda for several years. However, it wasn't until 2025 that the physician champions, processes and support resources came together to make this program a reality.

The strategic decision to implement a Pediatric Virtual Care center was based on several potential use cases:

- Patient demand for same day video visits
- Increase in Winter Volume
- Behavioral Health Population
- Possible Future high ED utilizer program

Overview of Activity:

The recent opening of a "walk-in clinic" for pediatric care in the Upstate of South Carolina by Prisma Health gave us an opening to include an "all virtual aspect" for this clinic. This new department became the linked homebase for physicians willing to see patients same day or late day when their primary care provider had no availability virtually.

With some political movement and access to video interpreters; this also filled an unexpected higher need for our non-English speaking pediatric patients.

Our two physician champions, Dr. Ryan Hensley and Dr. Stuart Simko, met diligently with our Epic and MyChart departments along with others to build and finetune workflows. These two pediatricians assisted with website descriptions, schedules and process improvement efforts to make quality improvements.

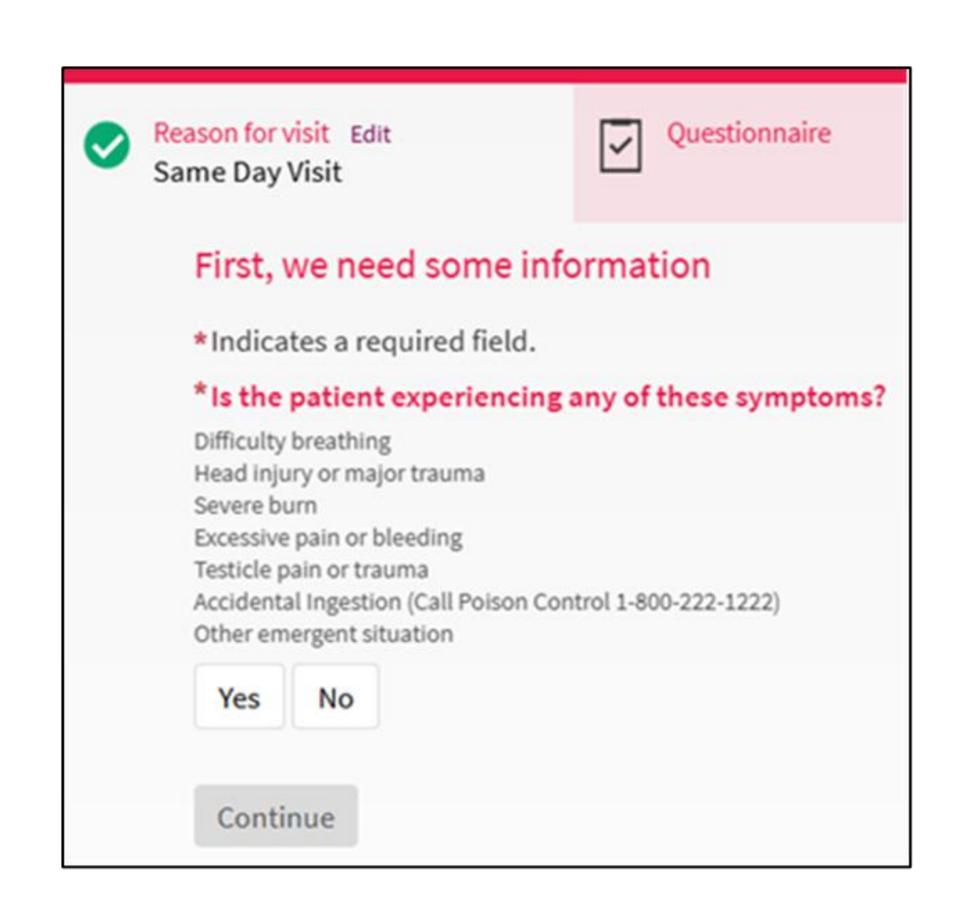
We went live on April 8, 2025 and without any marketing efforts have completed 273 visits to date 10/2/2025.

Due to current demand; marketing efforts are not needed at this time.

Objectives of Poster:

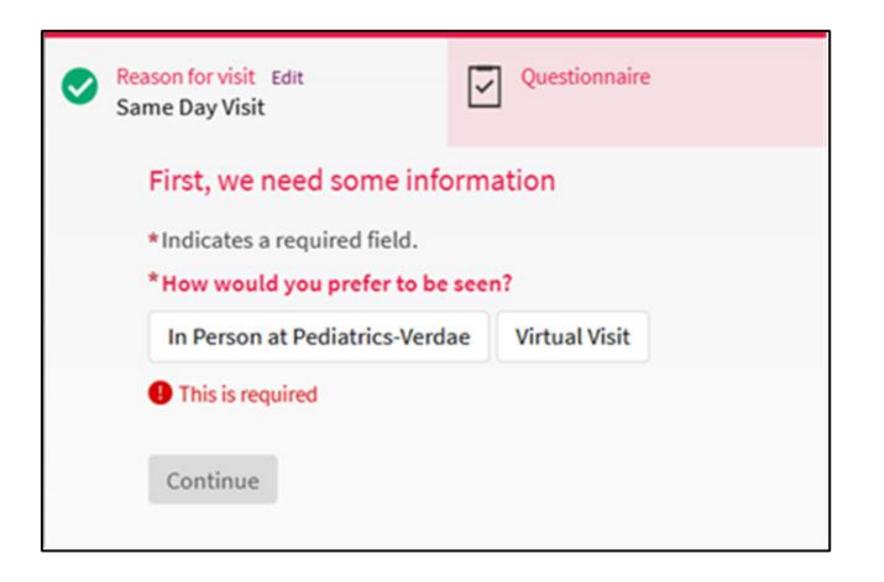
- 1) Identify the purpose(s) behind the creation of the Pediatric Virtual Care Center
- 2) Describe the process of creating and building the program.
- 3) List the process improvement efforts to improve the program's success from both the patient and provider perspectives.

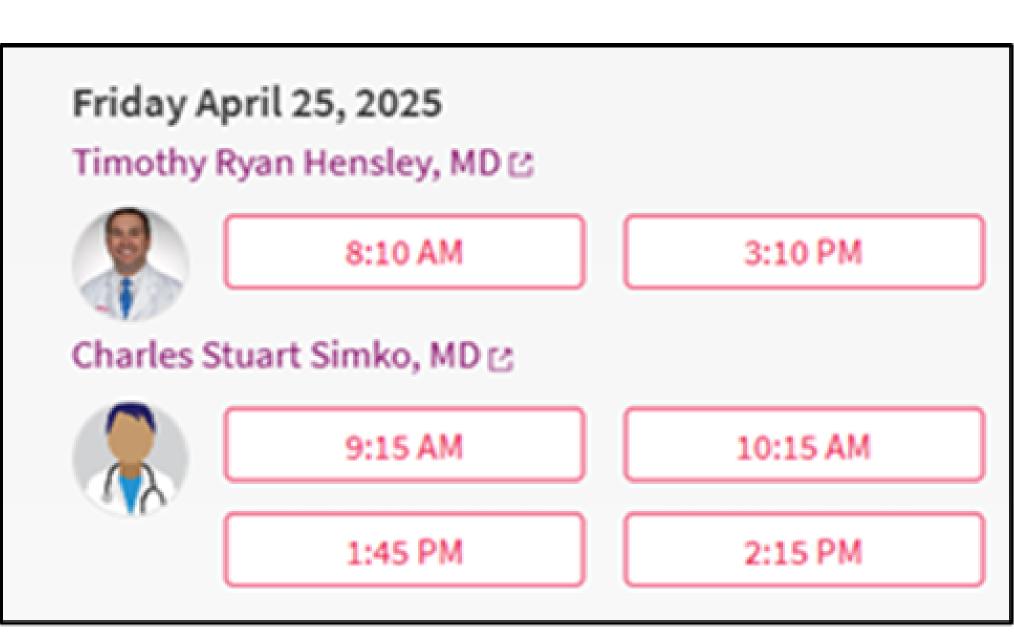




Results

- At the time of publishing this piece; there has been 273 visits through the center.
- Both Spanish and English video visits have taken place. (We have an embedded interpreter resource.)
- Patient surveys have been 100% to date for recommend, telehealth visit saved patient time and physician listened and is trusted.
- We have added over a dozen swab sites throughout both regions. (Urine and blood were not a recognized issue – only swabs.)
- Several process improvements were made such as replacing the original text of "Virtual Visit" with "Video Visit" as the Paediatricians felt uncomfortable in this format offering a phone visit.
- The consent language was adaptive to make sense for the pediatric patient. I.e. A 4-year-old cannot logically give consent to a medical visit.





Conclusion

This pilot program was pleasantly rolled out with no significant issues. The only identified issue was the need for more swab sites. After meeting with Medical Leadership; we have added a process for "lab only" appointments at our Family Medicine and Internal Medicine/Pediatric office.

With this and other small enhancements along the way; we believe we have positioned ourselves well to begin our discovery and fulfillment of our original goals. (Patient demand for same day video visits, Increased Winter Volumes, Behavioral Health Population and Future high ED utilizer use cases.)

Authors/Presenters:

Ryan Hensley, MD, MPS, CPC, FAAP

Pediatrician and Physician Informaticist

Prisma Health Pediatrics Easley

C. Stuart Simko, M.D

Pediatrician at Prisma Health Pediatrics Greer

Lisa Kopera, BS, MBA
Prisma Health
Pediatric Virtual Care Coordinator

