The Virtual Reality: 2021 Is the Time to Transform Your Virtual Health Capabilities

The healthcare industry is certainly no stranger to change. But in the face of a global pandemic, the changes came at a rapid-fire pace. The Centers for Medicare and Medicaid Services (CMS) moved quickly, implementing multiple temporary waivers and new rules, providing flexibilities to increase access to telehealth and keep people safely at home.

Almost overnight it seemed, the industry had to create or expand virtual health capabilities to continue providing much-needed services. And business operations were quickly altered to accommodate new ways of communicating with and delivering care to patients and members.

The adjustments and the pace with which we made them were called "unprecedented" for a reason. Who could have imagined how far we'd have to come in just one year's time?

Timeline of a Rapid Digital Transformation

2020

March
To illustrate how dramatic the ramp-up was, consider that in the first week of March, just before the national emergency declaration, CMS was receiving 13,000 claims for telehealth per week. By mid-June, over 9 million beneficiaries had received a telehealth service in a three-month period.[1]

May
By May, CMS was considering making telehealth expansion permanent.[2] On May 22, they finalized requirements that would increase access to telehealth for seniors in Medicare Advantage plans.[3]

June
Seema Verma, administrator for CMS, said, "I can't imagine going back."[4] Consultancy McKinsey & Company released its estimate that up to $250 billion in healthcare spending could be digitized.[5] And CMS proposed a rule that would make temporary flexibilities on home health providers' use of telehealth permanent after the pandemic.[6]

July
The U.S. Department of Health and Human Services released a report showing the utilization trends of virtual health for primary care delivery between January and early June. One of the report's findings showed that in April, 43.5 percent of Medicare primary care visits were provided through telehealth compared with less than one percent (0.1 percent) in February before the public health emergency (PHE).[7]

August
The Executive Order on Improving Rural and Telehealth Access was signed to ensure expanded access to telehealth services for Americans living in under-served rural areas would continue after the national PHE is declared over. And CMS announced its proposed changes to expand telehealth services for Medicare beneficiaries permanently.[8]

December
On December 1, CMS issued final changes to the CY 2021 Medicare Physician Fee Schedule (PFS), including adding more services to the Medicare telehealth list on a Category 1 basis, and finalizing a temporary Category 3 list of services that will remain in effect through the calendar year in which the COVID-19 PHE ends.[9] On Dec. 11, the U.S. Food and Drug Administration (FDA) issued the first emergency use authorization (EUA) for a COVID-19 vaccine, the Pfizer-BioNTech vaccine.[10] Within days, the first vaccinations in America were given. On December 18, the FDA authorized the second vaccine for emergency use, Moderna's COVID-19 vaccine.[11]

Timeline of a Rapid Digital Transformation (contd.)

2021

January

CMS announced its intent to expand the Home Health Value-Based Purchasing (HHVBP) Model, with Seema Verma stating that the pandemic "has tragically illustrated how important it is for elderly Americans to have a robust set of options outside of nursing homes."[12]

February

On February 27, the FDA issued EUA for the third COVID-19 vaccine, the single-shot Johnson & Johnson COVID vaccine.[13]

Clearly, we've faced some historic challenges in just over a year. But we've also seen changes in policies that demonstrate greater flexibility for the future, and advances in recent months, including the distribution of vaccinations, that give us reason to celebrate.

The question becomes what do we do with what we've learned so far? What are the biggest takeaways from our experiences, particularly those around the use of virtual health technology and the digital engagement of patients and members? How has virtual health reshaped the industry, consumer demand and consumer expectations in a year's time? And what steps can you take to ensure your virtual capabilities are ready for what's next?

The Virtual Reshaping of an Industry: What We've Learned So Far from Our Experiences

Virtual Care is Here to Stay

Certainly, there's a need for virtual care for the foreseeable future as we continue through the pandemic. But there's also strong support for keeping the momentum of virtual care going. As Verma explained, "Countless clinicians and beneficiaries received important care while avoiding unnecessary exposure to the virus. Now that providers and patients have had a taste, it's difficult to imagine the telehealth genie going back into the bottle."[14]

There is Clinical Appetite for Virtual Care

As reported by Healthcare Finance News, "Hospitals, physicians, insurers, and others have been wanting the federal government to take action to make telehealth permanent"[15] and recent proposals outline how the government plans to do so. These actions, along with the volume of virtual care visits billed, and the investments many in the industry continue to make to expand their virtual capabilities reinforce that there is significant interest in virtual health, as well as expectation that it will continue post-pandemic.

In addition, research shows there's growing appreciation for virtual health among providers. In one study, **57 percent of providers said they view virtual health more favorably than they did before COVID-19, 64 percent said they're now more comfortable using it, and 74 percent report high satisfaction using it.**[16]

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There is Consumer Appetite for Virtual Care

Results from Accenture's 2020 Digital Health Consumer Survey show consumers want a variety of virtual health services. "If given the choice, many healthcare consumers would choose virtual for basic care services, and even for specialty care," reports Accenture. Of those surveyed, **62 percent indicated they would "definitely" or "probably" receive health and wellness advisories virtually and 57 percent reported the same level of interest in remote monitoring of ongoing health issues through at-home devices.**[17] The survey was conducted prior to the PHE, so it's possible interest will rise based on actual virtual care use now and in the months to come.

Employer Interest in Virtual Care Has Increased

As reported by Healthcare Dive, an annual survey from nonprofit Business Group on Health showed that some of the nation's largest "employers are increasingly welcoming virtual care options." Approximately 80 percent of respondents said they believe virtual care "will play a significant role in how care is delivered in the future, compared with 64 percent in 2019 and 52 percent in 2018. **More than half said they will offer more virtual care to employees" in 2021.**[18]

Post-Acute Care Needs Will Continue to Drive Use of Virtual Care

Experts agree there will be a dramatic rise in post-acute care needs, which will require even more use of virtual care. Health Affairs estimated the post-acute care needs of COVID-19, basing their estimation on the SARS-CoV epidemic in the early 2000s. They project **an additional 10 million people will need post-acute care over and above the 12 million who already need care today.**[19]

Virtual Care Can Help Prevent More Costly Care

Virtual health has demonstrated that it facilitates greater capacity to meet surge volumes during times of crisis. In turn, this enables access to the right level of care, reducing unnecessary urgent care and ED visits, mitigating issues of over-capacity, and helping to prevent more costly care. It can also be used to manage post-discharge needs more effectively and to manage chronic conditions successfully between in-person visits, which can also reduce unnecessary costs.

The Commonwealth Fund notes that virtual care "may decrease spending if it is deployed in settings where there is a costly and preventable downstream event, such as an emergency room visit, inpatient admission or specialty referral." They cite one example of nursing home residents whose after-hours virtual health visits decreased spending by deterring costly emergency department transfers and inpatient admissions.[20]

The Taskforce on Telehealth Policy (TTP), a team of experts brought together to evaluate digital health care delivery and develop consensus recommendations for policy makers, also cites preventing more costly care as one way virtual health can impact costs. As reported by the National Committee for Quality Assurance (NCQA), the TTP's final report in September 2020 shows that virtual care:[21]

- **"Facilitates access to healthcare for individuals who might otherwise skip or avoid important services"**

- **"Allows care delivery more quickly and efficiently in lower cost settings"**

- **"Can help reduce more costly urgent and emergency department care"**[22]

Some of the data the TTP used to conclude that virtual care can prevent more costly care included both recent data and pre-COVID-19 studies. One example of recent data came from Ascension Health, which found that from March to May 2020, **nearly 70 percent of patients would have turned to urgent care or the emergency room if they had not had access to virtual care.**[23] And in one pre-COVID-19 study, Cigna compared the experiences of 20,000 beneficiaries who used virtual care services to 20,000 who did not. They found that **virtual care users had 17 percent lower total medical costs and experienced a 36 percent net reduction in ED use** per 1,000 individuals by comparison.[24]

Virtual Care Improves Access to Care

Virtual health can remove some of the barriers to care many individuals face on a daily basis, such as living in remote areas or having to rely on public transportation. As Catherine Moore, MBA, BSc, writes, "Having healthcare services so accessible offers the potential promise of encouraging people to attend to their health needs in a more timely manner and more frequently. By addressing health concerns when they first appear and checking in frequently on progress, patients can actively participate in improving treatment outcomes. This makes virtual care a perfect solution for specialists who need to remotely monitor situations or procedures, while it also makes quick consultations, second opinions, and meetings possible where they might otherwise be cost-prohibitive."[25]

In August 2020, expert panelists at the Office of the National Coordinator for Health IT's Tech Forum discussed how virtual health "has acted as a way to reach patients who had been unable to get medical care – including before social distancing measures made it imperative to try and reduce in-person contact."[26]

"If you have a lot of social determinants of health constricting your ability to get to a federally qualified health center, or you have childcare needs that prevent you from being able to leave the home," telemedicine can be an ideal option, said panel participant Lisa McLaughlin of Workit Health.[27]

4 Steps to Ensure Your Virtual Capabilities are Ready for What's Next

The healthcare industry has learned a great deal about virtual health in a very short time. But we must also recognize that virtual visits in and of themselves are not a panacea. There is work to be done to improve virtual care experiences for the benefit of all users. Next, we provide four recommended steps you can take now to turn lessons learned into a competitive advantage for your future in the virtual health space.

1. Move from "Where You Are" with Virtual Care to "Where You Want to Be"

In a Medecision client survey, when we asked healthcare professionals how they expect virtual health will factor into patient appointments after COVID-19, 77 percent said they expect a minimum of 20 to 50 percent of patient appointments to take place virtually.

McKinsey & Company analysts project 35 percent of home health services, 24 percent of office visits/outpatient encounters, and 20 percent of ED visits could move to virtual. And an additional nine percent of office visits/outpatient encounters are expected to be "near virtual."[28]

These expected shifts to virtual care suggest that whether you're leveraging virtual health capabilities for the first time or expanding on them, you need to **consider how you plan to sustain a healthcare delivery system that involves both in-person and virtual care.** This is the perfect opportunity to determine what's working and what's not so you can create a cohesive, integrated strategy for moving forward. It's also a good time to define a set of guiding principles and best practices that leverage the strength of both virtual and in-person approaches.

Questions to ask yourself and your teams include:

? Is your virtual care delivery seamless, efficient, and appropriate for billing and reimbursement purposes? Is it safe, secure, and satisfying?

? Are there areas where patients/members are underserved that could benefit from increased digital engagement, such as providing post-discharge support?

? Which types of interactions are currently being facilitated well virtually? Are there areas for improvement based on your experiences since the pandemic began? Are there certain physicians, caregivers, case managers or support staff members who are performing better than others with virtual visits? This can help inform which resources to direct to virtual encounters in the future and to determine which types of appointments can or should be virtual moving forward.

? How will you get or keep individuals engaged in virtual health services so the capabilities and technology you implement are used to their benefit and yours?

? If you're in an acute care setting or managing post-acute care, how can you develop post-acute care strategies in anticipation of future surges? How will follow-ups completed virtually support discharge planning needs, better health outcomes and better utilization management?

2. Enable Seamless Digital Sharing of Patient and Member Information

Ensure virtual care experiences become a seamless part of an individual's healthcare journey. In an article in Healthcare Innovation, Rich Birhanzel wrote, "What we need is a marriage of digital-physical to provide effective, safe care." He notes that virtual care often happens episodically, as a one-off visit. But there can be implications when singular interactions don't make it into the care history.[29]

It's essential that we break down data silos to ensure critical information is available for all providers at the point of care, regardless of how and where that care takes place. All care experiences should be connected and the data associated with them should end up as part of the individual's longitudinal record, ready to be shared across the care ecosystem.

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3. Ensure Virtual Capabilities Work for a Broad Set of Providers and Consumers

Analysts from McKinsey & Company note that continued growth in or a strong shift toward virtual health "will require new ways of working for a broad set of providers, step-change improvements in information exchange, and broadening access and integration of technology. The potential impact is improved convenience and access to care, better patient outcomes, and a more efficient healthcare system. **Healthcare players may consider moves now that support such a shift and improve their future position.**"[30]

Consumers also have high expectations around virtual care delivery and technology that will need to be met. Recent surveys conducted by Press Ganey found that when virtual visits are delivered effectively, these visits "can achieve similar ratings for patient experience as in-person visits." Opportunities to improve experiences included addressing technical barriers that impede consistent and reliable communication and a need for more information sharing.[31] Additionally, it was shown that a patient's likelihood of recommending video visits "is driven more strongly by process considerations, such as care coordination around the virtual visit and technology issues."[32]

Providing seamless care coordination and avoiding technology issues that would get in the way of both provider and consumer satisfaction will require:

- A platform that can support integrated sharing of accurate, up-to-date health data across the entire care ecosystem – from physical, mental, behavioral, and community-based providers, to patients and members and their trusted circle of support

- Making virtual engagement a seamless and satisfying experience for patients and members, including offering self-scheduling convenience and communicating based on patient and member preferences

- Providing a convenient path to engage with individuals or populations to invite them to take advantage of virtual care options, provide guidance and educational content, and close gaps in care

- Enabling care managers to scale their abilities so they can effectively support patient and member populations, while also managing increased demand for services

- Meeting the need for new and integrated workflows that leverage the capabilities of an integrated omnichannel digital solution

- Ensuring your team is able to assist patients and members remotely without interfering with their ability to build support plans and track reimbursement from Medicare or Medicaid

- An easy, integrated way to manage the interactions involved in care delivery, such as allowing care managers to not only see upcoming appointments, but also video and text interactions in a unified way

- Timely feedback on the effectiveness of outreach and engagement activities, to not only measure success, but use those insights to further optimize programs, engagement, and satisfaction

4. Rethink Care and Engagement Processes

On a broad scale, **the healthcare industry needs to rethink its approach to care and engagement processes and identify which care models can be supported well virtually or virtually enabled.** For example, McKinsey & Company researchers identified and analyzed these five options that could help deliver on the full potential of virtual health:

- On-demand virtual urgent care, which would serve as an alternative to lower acuity ED visits, urgent care visits and after-hours consultations

- Virtual office visits for consultations with an established provider that do not require physical exams or concurrent procedures

- Near-virtual office visits, such as a combination of virtual access to physical consultations and "near-home" sites for testing and immunizations
- Virtual home health services that combine virtual visits with remote monitoring and digital patient engagement tools
- Tech-enabled home medication administration[33]

Additionally, the industry must look at virtual health's ability to support value-based care models. "In addition to serving the needs of a broader consumer base, **virtual health can provide an opportunity to improve care and healthcare value for chronic disease patients in a way that could also position health systems to succeed in risk-based reimbursement models,**" reports McKinsey & Company.[34]

On a smaller scale, how will you reimagine the patient and member experience? What existing touchpoints could be handled virtually? What unmet needs can be addressed with omnichannel communication? How can you leverage omnichannel communication capabilities (synchronous and asynchronous) to better meet patient and member expectations and preferences, provide expanded access to general or specialized care, and improve the experiences and health of patients and members even when they are between in-office visits?

Your answers to these questions and the actions they prompt are essential for improving consumer experiences, an imperative that takes center stage with the new Medicare Advantage Star Ratings formula for contract year 2021. **Consumer Assessment of Healthcare Providers and Systems® (CAHPS) scores are quadruple-weighted this year, representing 32 percent of an overall Star rating for 2023.**[35]

An efficient, safe, and meaningful virtual health program can help you positively impact the experiences consumers consider when completing those CAHPS surveys, such as how easy it was to access care and how well providers communicated with them.

What is Next?

The rapid expansion of virtual health quickly showed how the use of digital tools and systems could reduce costs, increase operational efficiencies, boost consumer satisfaction and improve care coordination. But success with such tools and systems depends on how comprehensive and integrated they are.

In many cases, fast response to the PHE meant piecing together disjointed point solutions that were expected to be temporary measures. Now that it's clear virtual health is here to stay and having robust virtual capabilities will be a competitive necessity, it's time to replace those disjointed point solutions with an integrated virtual platform architecture that's ready for the long haul.

A system that can better integrate virtual health capabilities and omnichannel communication into clinical workflow, contribute to a holistic, 360-degree view of individual health, and help you deliver exceptional consumer experiences is an essential find.

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Remember These Keys to Virtual Health Success

One final tip as you move forward transforming your virtual capabilities to meet market demand: Keep in mind these keys to success that leaders from Medecision and ChristianaCare shared during Modern Healthcare's Virtual Health Summit in September 2020:[36]

- Ensure that anything that can be done at home is done at home. Evaluate your current offerings and identify where virtual care can be leveraged.

- Recognize that healthcare has evolved to continuous management, not episodes of care. How will you leverage virtual health to support continuous management?

- Care management is the glue between visits. Whether it's delivered in-person or virtually, robust care management that addresses whole-person care, including social determinants of health (SDoH), is essential.

- Communication methods should take on many forms and should be available within foundational workflows.

- Patients and members must feel connected to their care delivery team with no scheduling or communication barriers.

It's time to secure your first-mover advantage, uplevel your virtual capabilities and future-proof virtual health engagement so you can remain competitive and resilient. We can help.

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