The rush to embrace virtual care
Sustaining the momentum
When the global pandemic of 2020 first took hold, widespread concerns about safety necessitated urgent changes in how and where clinicians delivered care. Familiar ways of working disappeared overnight, replaced by models that may have been tried but not proven, scaled, or generally accepted. For many clinicians and their patients, it was virtual care — televisits, in particular — or no care at all.

Even now, months later, much out-of-hospital and some inpatient care remains virtual, driven by patients with ongoing safety concerns, growing acceptance by clinicians, and relaxed rules by regulators and payers (including Medicare). More and more ingrained as time passes, virtual care is here to stay — an undeniable part of our health system’s reality today.
In this e-book, we look at how the acceleration of technology adoption makes new models of care delivery possible. How can the momentum be sustained — continuing healthcare’s digital transformation — while raising the bar on outcomes, patient experience, system costs, and clinician well-being?

Research by the global consultancy firm Accenture,¹ before and during the pandemic, highlights the barriers and provides a pathway for moving forward.

A word about words

There is a confusing array of terms in the marketplace for digital and virtual healthcare. As the segment becomes more ubiquitous, no doubt the language used to describe it will standardize. Here’s how Accenture differentiates between the broad category of digital healthcare and the slightly more specific virtual care sub-category.¹

**DIGITAL HEALTHCARE**
Includes tools and technologies like electronic health/medical records; mobile solutions; wearables that track fitness, lifestyle, and vital signs; smart scales; AR/VR solutions; surgical robots; and chatbots.

**VIRTUAL CARE**
Includes services and support needed for wellness, diagnosis, and treatment. Care is available regardless of a patient’s location. The provider and patient are in different places, with support and care provided through videoconference, mobile device apps, secure email, text messaging, and online social platforms.
Healthcare’s stop-and-go march toward digital transformation

Beyond wearable fitness gadgets, from 2018 to 2020 patient use of digital health tools was surprisingly limited. Accenture’s 2020 Digital Health Consumer report cited these top three patient issues:

- Negative experience
- Concerns about privacy, security, and effectiveness of the tools
- Lack of guidance from clinicians

Virtual care’s adoption was even more modest. One pre-pandemic survey found that seven out of 10 consumers wanted to try remotely delivered care, but fewer than one out of 10 actually did.

Was low awareness of how to access care from home a root cause? Likely, yes. Although about 25% of internal medicine or family practices offered video visits pre-pandemic, fewer than one out of 10 consumers knew those visits were available from their providers.
The pandemic surge

The statistics on virtual care adoption are startling. Prior to the pandemic, virtual interactions by fee-for-service (FFS) Medicare beneficiaries hovered around 13,000 per week. In the last week of April 2020, virtual interactions reached nearly 1.7 million.²

Total virtual healthcare interactions are on pace to be around 480 million by the end of 2020.³ More than 90% of nearly 1,400 physicians surveyed are now treating patients remotely.⁴ And 70% of patients are interested in receiving care virtually.⁵ McKinsey reports providers are seeing 50% to 175% more patients via telehealth than before.⁷

Nearly 90% of physicians surveyed are treating patients remotely.

A virtual dozen

Here are just some of the growing number of use cases and services now being delivered virtually.⁸

Offering them virtually expands clinicians’ access to patients with more flexible scheduling, wider geographic areas, and ease of specialist consults. And providers can spend more time with patients at convenient times, from convenient locations of their choice.

- Primary care virtual visit
- In-hospital virtual rounding
- Post-discharge check-ins
- Chronic care management
- Pharmacy services
- Telestroke services
- Tele-ICU tools
- Virtual ED triage
- Specialist triage
- Diabetes screening for eye disease
- Sleep disorders
- Telepsychiatry
Staying current

Because so much had changed, Accenture revisited its survey to compare previous insights with new ones emerging during the pandemic. The results revealed that many patients and providers were having a more positive experience than expected.9

In fact, a survey by Kyruus revealed "overwhelmingly positive" virtual care patient experiences, with 75% of respondents very or completely satisfied. And nearly 75% want virtual care to be a standard part of their care.10

On the provider side, 57% view telehealth more favorably than they did before the pandemic, and 64% are more comfortable using it.7

Nearly 75% of patients surveyed want virtual care to be a standard part of their care.
Riding the wave

This fast, widespread adoption of remotely delivered care was a forced circumstance. Accenture believes that when COVID-19 restrictions and fears subside and patients again have a choice, the same issues that originally surfaced could potentially reemerge.

What can clinicians and other health leaders do to address earlier adoption issues, remove barriers, and sustain digital and virtual care gains?

Design for user experience

For digital tools and virtual services to play a role in healing and well-being, they need to be designed with a deep understanding of user needs and wants — human-centered for both patient and provider.

Virtual services must be easy to use and relevant to the user. For consumers, convenience and being able to take control of their health are top of mind.

High on the list for providers is integration with clinical workflows. Seamlessly linking virtual visits with EHRs and the clinical applications providers use every day streamlines access and documentation, saving time throughout the day. Collaborating on design to check for technology feasibility and business viability is an important step in the planning phase.
Motivate with guidance and coaching

Pre-pandemic, nearly 25% of healthcare consumers surveyed said they would be motivated to take a more active role in managing their health if they had secure, reliable digital tools to help them understand their health habits. “Trusted healthcare professionals” ranked even higher, cited by 55%. But only 11% of respondents said their healthcare providers recommend digital tools for patient health management."
Build trust by designating security leadership

Security is a prime concern for patients and one of the main barriers to adoption. With any new care model, there will be some worry. Patients need to be reassured that their healthcare organizations are doing everything possible to protect privacy and sensitive information. Transparency about how data is collected and used is key to trustworthiness and will strengthen the relationship between patient and provider. And experience with the device or service helps. Confidence levels among consumers who have received virtual care are significantly higher than those of consumers who did not (45% vs. 19%).

Accenture recommends designating a leader within the organization who is responsible for building and maintaining trust, digital ethics, and security with vendors, partners, and consumers. This should be a highly respected executive within the organization — like the chief security officer, chief digital officer, or chief ethics officer. These critical initiatives need to be steered by top management and should not be delegated.
Equalize access

Socio-economic barriers prevent access to telehealth solutions. Organizations can work toward closing the digital divide to equalize access for patients who don’t have devices or broadband, especially rural residents. Understanding the population served, considering social determinants of health (SDOHs) as well as clinical issues, and exploring collaborations and services that reach out to them are increasingly recognized as important ways to connect with the community.
Regulations and revenues

There are two other factors that will affect the future of digital and virtual care. The first is political. A recent Congressional hearing before the US Senate Health, Education, Labor, and Pensions (HELP) Committee began the process of evaluating telehealth regulations. Congress is looking at what can be done to sustain this momentum on the regulatory, legislative, and private sector fronts.¹¹

The hearing, “Telehealth: Lessons from the COVID-19 Pandemic,” explored which temporary changes in federal policy should be maintained, modified, or reversed — and what’s needed to increase patient and provider use. The AMA is advocating for making many of the emergency policy changes permanent.

There is also a compelling economic incentive to make virtual healthcare an integral, permanent part of care delivery. McKinsey reports that pre-pandemic, US telehealth providers’ annual revenue totaled an estimated $3 billion. The largest vendors were providing virtual urgent care. As telehealth adoption grows and extends beyond urgent care, the potential exists to virtualize about $250 billion (20%) of the US healthcare spend.⁷

New models of care enabled by healthcare digital transformation have not only become possible, they are in many cases preferable. Pushed to digital and virtual care delivery by dire necessity, patients and providers alike are now embracing it and experiencing the benefits. As healthcare evolves, virtual is here to stay.
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SOURCES
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