



Clinical Integration in the Era of Virtual Care

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Nearly every U.S. health system has implemented some type of telehealth infrastructure, most doing so in response to the federal relaxation of regulatory and reimbursement constraints during the pandemic. Since that time, an industry that's been historically slow to embrace technology has quickly gained an appreciation for the effectiveness of virtual visits compared to in-person visits, and patients, payers, and providers alike see value in telehealth solutions.

But a number of non-traditional competitors are already disrupting the healthcare space. Well-funded start-ups and market entrants are advancing telehealth solutions and seeking partnerships with health systems, health plans, employers, and direct-to-consumer models. In addition to their technology platforms, national telehealth companies like AmWell, MDLive, Teladoc, etc. have a large network of providers (often licensed in multiple states) who can deliver telehealth. They also support a range of patient needs using telehealth platforms—from low-acuity urgent care visits to condition-specific primary care and targeted specialty use cases.

These non-traditional players may have the benefit of private equity funding and the ability to produce slick, user-friendly technological solutions, but local health systems and provider organizations have something they don't—familiarity. Personal bonds between patients and their physicians cannot be easily replaced, and a well-known hospital can have deep roots in its community. According to a recent survey, 65 percent of patients still trust and prefer their traditional health system and the relationship with their local providers.¹

1 NRC Health Market Insights Disruptors 2020 survey.

It is on this basis that traditional health systems can effectively compete with national telehealth vendors—by expanding their telehealth capabilities and developing a cohort of community providers (both independent and employed) to render telehealth visits.

Developing Local Provider Integration Strategies

Several emerging trends are driving health systems to develop local provider partnerships:

- **Emergence of “virtual first” strategies:** Health insurance companies are launching virtual-first models that make telemedicine a foundational part of the patient’s care. These models contemplate a digital front door that permits patients to quickly and easily access healthcare services. They will virtually connect patients with in-person local healthcare providers who will guide patients to specialty care and other ancillary services, as needed. Health systems (using their cohort of local providers) have an opportunity to become the preferred source of in-network care delivery for these virtual-first models.
- **Redesigned value-based benefit options:** Employers are negotiating large-scale, direct contract deals with national healthcare vendors and designing their health benefits and care delivery offerings based on value. Some of these vendors

→ Key Board Takeaways

- Think about how your health system can effectively compete against the national telehealth vendors by developing an integrated cohort of community providers.
- Recognize that partnerships with these non-traditional organizations will also be essential to achieve scale and elevate capabilities.
- Consider utilizing local providers to support “virtual first” health plan initiatives and partner with local employers to become the preferred provider of telehealth services.
- Require standard clinical protocols and performance goals, and monitor individual providers against these standards.
- Utilize a consumer-centric approach with a deep understanding of the patient journey to seamlessly facilitate all aspects of the patient’s virtual visit.

facilitate virtual visits, provide care navigators, offer expert second opinion services, and so forth. Health systems with high-performing provider networks can do the same, engaging in discussions with employers to develop arrangements to share in the risks and rewards and secure more of the premium dollar in value-based contracts.

- **Care coordination across the continuum:** This requires integrating data and applications across care settings—ambulatory, acute, and post-acute—to exchange real-time data among providers. The goal is to provide the right insights and the right care at the right time and in the right setting. Again, health systems with local providers have an advantage here: the data from virtual visits can be integrated into their core EHRs to provide a longitudinal medical record across the enterprise (including all in-person and telehealth visits). In contrast, third-party national vendors typically share a limited continuity-of-care document for individual episodic visits.

Partnering with Disruptors

It's not all or nothing with these third-party disruptors. While health systems need to focus their telehealth strategies on integrating with affiliated community providers, partnerships with non-traditional organizations will also be essential to achieve scale and elevate capabilities.

Health systems could consider partnering with a third-party telehealth vendor to provide scalable, HIPAA-compliant technology platforms to facilitate virtual visits that are white-labeled to promote the health system brand. In these partnerships, health systems could still rely on their affiliated local providers but use the vendor partner's providers for overflow coverage or to fill gaps (e.g., mental health provider shortages or after-hour support). The key to successful partnerships must include tight integration and sharing of data, creating a frictionless, clinically informed, and satisfying experience for patients.

A Consumer-Centric Approach

At the center of any telehealth arrangement should be convenience for patients and providers. Ensuring that consumers can use their preferred channel of communication (such as Web-based versus mobile app) will enable organizations to attract, engage,

and build a trusted relationship with patients and offer stakeholders convenience, ease of use, and increased adoption. Health systems should also:

- Create structured programs that include FAQs, technical support, scheduling algorithms, and back-end support to document and code correctly, as providers will be at varying stages of readiness for telehealth visits.
- Identify a physician champion to serve as the liaison between project leadership and the physician community to ensure provider buy-in and adoption.
- Adopt standardized workflows, clinical protocols, and service-level agreements (with waiting and turnaround times clearly defined) with established performance goals to enhance care and ensure a consistent patient experience.
- Develop a resource model that aligns provider availability and capacity with demand for telehealth services, based on expected volumes.
- Understand how various telehealth coverage models (i.e., on-demand versus scheduled visits) will affect provider productivity.
- Develop professional service agreements with independent community providers participating in telehealth initiatives; employed providers are typically covered within their employment agreements.
- Consider a clinical integration network (CIN) umbrella that will allow the health system and independent provider groups to align and collaborate, refer, and share a population of customers for which they have co-contracted (including value-based contracts).

Finally, health system board and senior leaders must be constantly mindful of the patient experience as they contemplate these strategies. Seamlessly facilitating all aspects of a virtual visit (e.g., registration, check-in, bill-pay, checkout) requires a deep understanding of the patient journey.

Building on Brand Strength

As the use and popularity of telehealth grows, so too will the field of well-funded disruptors offering innovative solutions to patients and employers. Health system boards and senior leaders need to know when to compete and when to collaborate; the right vendor can supplement a system's service offerings and help fill gaps in coverage.

But health systems also need to appreciate the value of their own brands and the relationships their community providers have established with patients. With a cohort

of community providers to facilitate virtual visits, health systems can engage patients at the earliest stages of their health journeys, connecting them with the system's healthcare products, services, and information that help them achieve their health goals.

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