Telehealth Vs. In-Person Care:
HOW PROVIDERS CAN GET THE BALANCE RIGHT

By Donna McHale, Nikki Feucht and Martin Bloomenkranz

The coronavirus pandemic forced a surge in virtual healthcare, including telehealth services, nurse hotlines, video conferencing and remote patient monitoring. This shift to virtual care was necessary to protect patients and staff while maintaining the delivery of high-quality care. However, the return to in-person visits does not mean virtual care is going away. Before the pandemic, consumers made clear their demand for greater digital capabilities from providers; having since experienced the array of virtual options available to them, consumers aren't likely to accept healthcare as usual.

Healthcare organizations have lagged behind other industries in developing new services based on consumer and market data. This has hindered organizations' ability to offer what consumers want and need as well as attract and retain top talent.

Research from Huron shows that in the next three to five years the top trends impacting organizations will include cost reduction, managing health system capacity, care delivery changes, consumerism and revenue growth — all of which can be addressed in part by a strong telehealth strategy. Virtual care itself also earns a top spot on leaders' lists, which could indicate that leaders may still be thinking about virtual services as a tangential instead of a fully integrated growth driver.

With virtual care, healthcare organizations have a chance to get it right by strategically approaching new virtual offerings with the right data. The challenge now is for healthcare organizations to find the right balance of in-person and virtual care offerings. For leaders to create a strategy that is consistent with the supply and demand of their organization and market, they will need high-level visibility into the many factors that impact both current and future volumes of in-person and virtual services.

Determining the Balance of In-Person and Virtual Services

The disruption of the pandemic rendered many industry benchmarks unreliable, meaning it is all the more important for healthcare organizations to be flexible in how they manage capacity for both in-person and virtual services. Visibility into the multiple factors that impact patient volumes will enable leaders to predict fluctuations in demand by service line and answer that demand with the appropriate supply.

Look Beyond Stopgap Measures for Long-Term Growth

The backlog of referrals and coronavirus-driven cancellations or deferred services is a clear place for leaders to start using virtual care to make up revenue gaps and dissuade patients from seeking care elsewhere. At times, it may make sense to increase care via one mode of delivery over another to capture more revenue and retain greater rates of reimbursement.

However, to achieve long-term growth, leaders should approach virtual care as an additional revenue stream, not just as a replacement for existing services.

Be Better Prepared With Predictive Analytics

Predictive analytics models allow organizations to anticipate various needs for a variety of possible scenarios. For example, to meet specific metrics or financial goals, the organization needs to know how many patients to see across which service lines in a defined period of time. Predictive analytics reveal that number faster and more reliably across the market in a quickly changing industry where descriptive analytics are no longer sufficient. Predictive analytics can also help with scheduling to avoid capacity issues, ensuring the organization is adequately staffed to meet metrics.

Understanding Your Patient Populations and Their Care Needs

Healthcare leaders create better patient and business outcomes when they have a deep understanding of the communities they serve. Specifically, it is important for healthcare leaders to understand their patient populations' most common conditions and health risks, as well as their perceptions about telehealth and other virtual services. By knowing patients' care needs as well as their preferences in how they receive care, leaders will be better able to meet patient demand.

At its core, virtual care is about opening up access to care. Leaders should consider factors that can impact access to both in-person and virtual services, such as occupation, education, income and disabilities.

Deciding Which Services Can Be Virtualized

Healthcare organizations are relying more on virtual services to treat patients remotely in the form of telehealth screenings, monitoring blood sugar levels and even mental health counseling. As telehealth and virtual care grow in popularity, healthcare leaders need to be strategic about which services to virtualize, taking into account the capabilities of both the organization and its patient populations.

As with most strategic decisions, trusted data, forecasting and modeling should be used to inform the path forward. These tools help organizations answer big, complex questions such as how to right-size virtual care by breaking down the larger strategy into actionable steps that can be measured and adjusted in real time.

Ultimately, it is about what both patients and clinicians are willing to do in virtual settings. When deciding which services to virtualize, leaders should keep these things in mind:

· **Patient experience.** Whether the services are rendered in person or virtually, all patients deserve the highest level of care with exceptional experiences. Virtualized services should not impede clinicians' ability to provide the same level of quality care and compassion as they would face-to-face.

· **Reimbursement.** Fluctuating regulations and evolving payor priorities mean there is no clear answer for what reimbursement of virtual services will look like in the future. As they assess their care offerings, leaders will need to think about the potential difference in reimbursement and what that will mean to the bottom line.

- **Where to house virtual clinicians.** Virtual care does not eliminate care-setting concerns. Providers may be delivering care virtually, but they still need the same level of information technology (IT) infrastructure and leadership support that in-person providers need. It is important for leaders to determine if virtual clinicians will have space allocated for them within the organization or if they will work from home — and what their resource needs will be.

- **Third-party partnerships.** Despite the pandemic-induced boom in virtual care offerings, not all healthcare organizations are equipped to operate their own in-house virtual care programs. If that is the case, leaders can still provide their patients with high-quality virtual care by partnering with third parties to build and run a virtual care program that best fits the organization and its patients.

- **Likelihood of success.** Everything from timing and scope to agility and information technology support will impact the successful adoption of virtual care, not just by patients but also by clinicians. By introducing nonfinancial performance goals related to virtual care, leaders can persuade clinicians to invest in virtual care adoption and its outcomes. Those most likely to succeed will be leaders who remain realistic about goals, gain input from and engage all relevant stakeholders in the design and adoption of virtual offerings, and develop an informed strategy for implementation.

- **Regulatory compliance.** The ever-changing regulatory environment can be hard to navigate. By keeping up with state and federal mandates, maintaining valid licensure, and following HIPAA guidelines, leaders can keep virtual care programs compliant.

- **Information security and digital trust.** It does not matter how patient-centric an organization's virtual care services are if patients can't trust the organization with access to their devices and their health information. Strong data and information security practices can assist organizations in maintaining the integrity of their virtual services.

As the healthcare landscape continues to change, leaders are perpetually challenged to deliver highquality care in ways that meet patient preferences. By understanding their patient populations and the factors that influence demand for in-person and virtual services, healthcare organizations can find the right balance of both.

Key Takeaways

Healthcare leaders can establish the right mix of in-person and virtual care if they:

Think differently.

Understand who your patient populations are and what they need out of different care settings.

Plan differently.

Approach telehealth and other virtual services as growth opportunities, not as fillers for gaps in volume.

Act differently.

Utilize robust data and predictive analytics to create flexibility in the type and number of virtual versus in-person services.

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