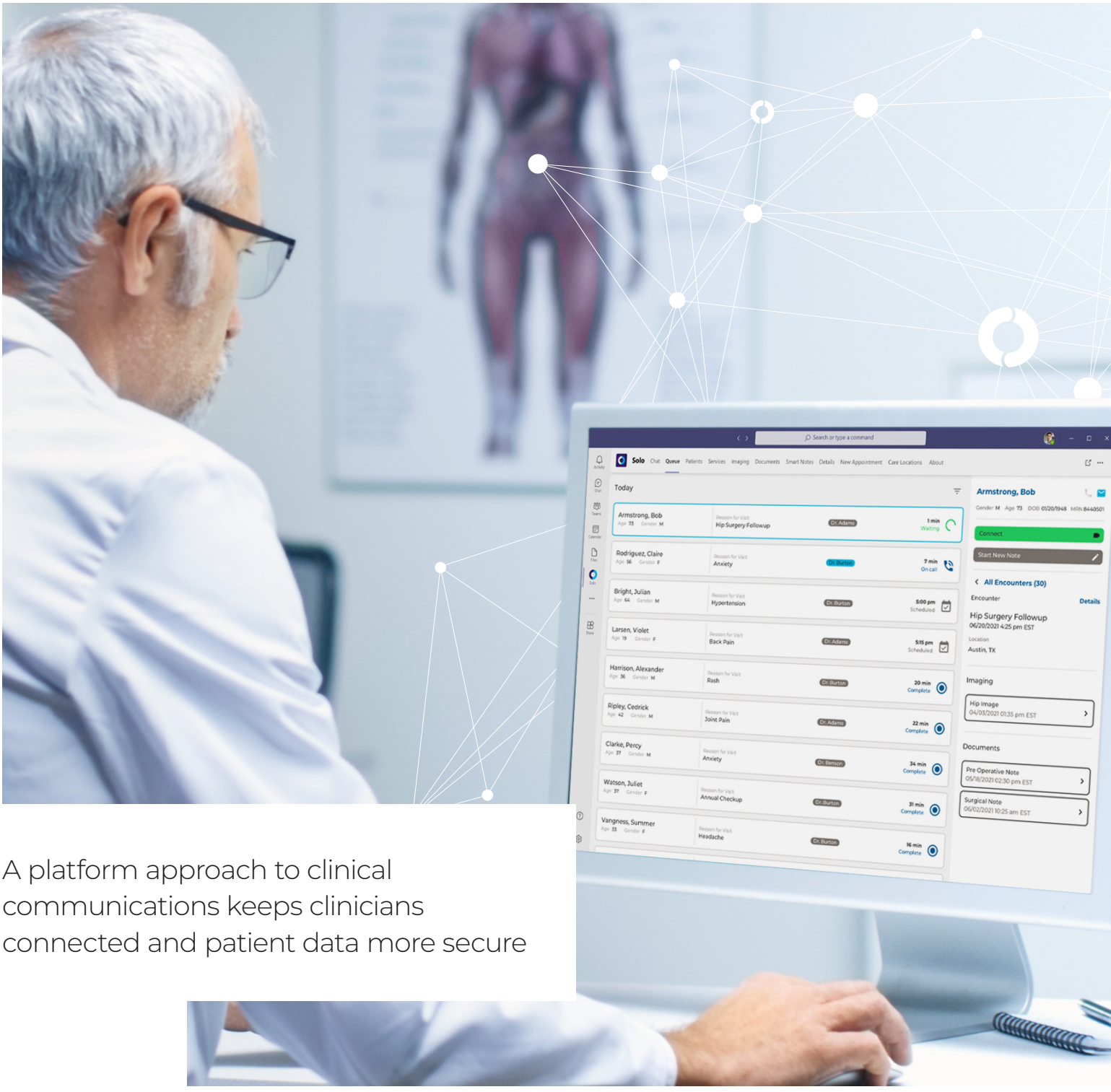
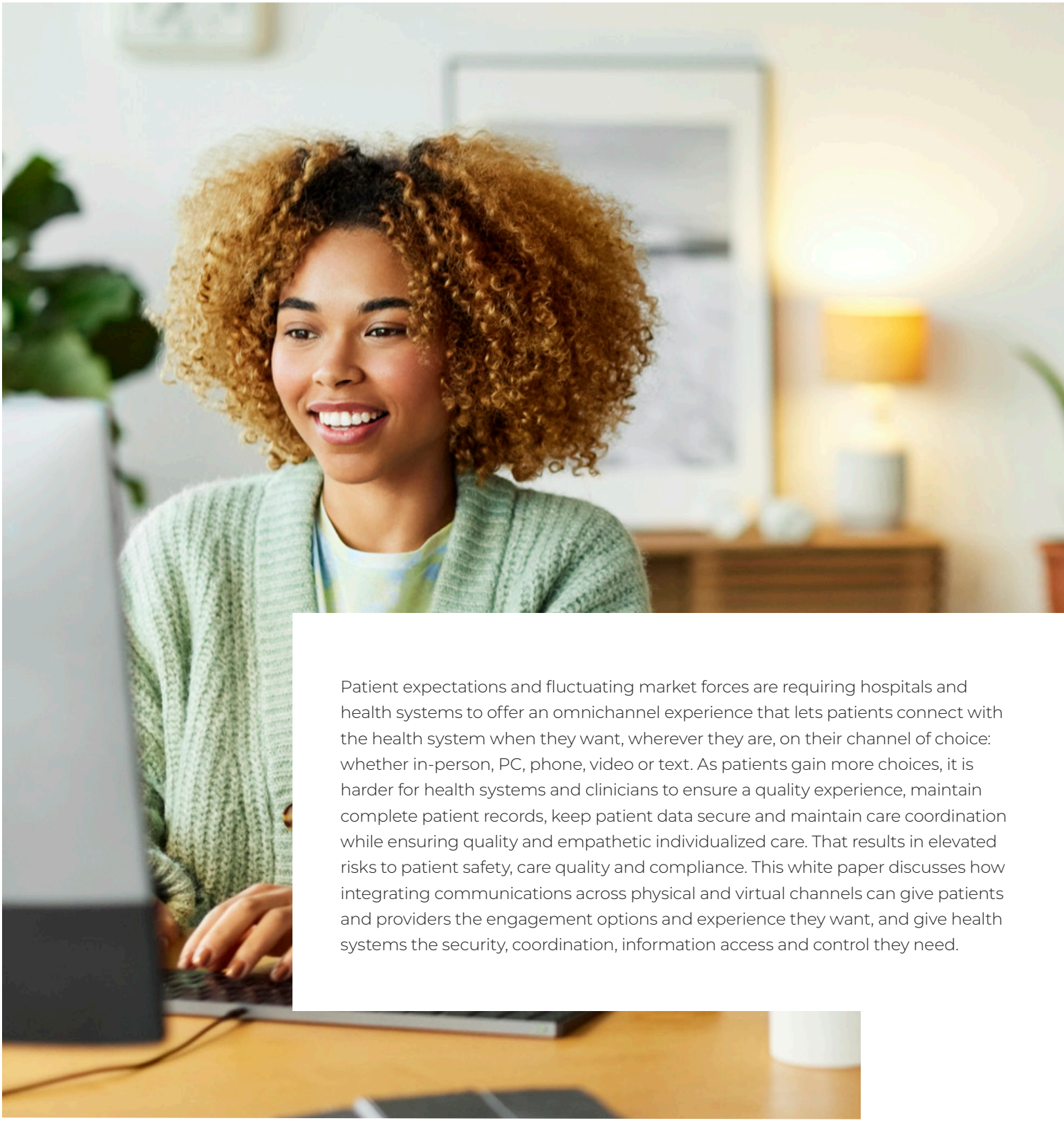
Teladoc HEALTH

WHITE PAPER

As Patient Care Channels Become More Fragmented, Communications & Coordination Can Become Integrated



A platform approach to clinical communications keeps clinicians connected and patient data more secure



Patient expectations and fluctuating market forces are requiring hospitals and health systems to offer an omnichannel experience that lets patients connect with the health system when they want, wherever they are, on their channel of choice: whether in-person, PC, phone, video or text. As patients gain more choices, it is harder for health systems and clinicians to ensure a quality experience, maintain complete patient records, keep patient data secure and maintain care coordination while ensuring quality and empathetic individualized care. That results in elevated risks to patient safety, care quality and compliance. This white paper discusses how integrating communications across physical and virtual channels can give patients and providers the engagement options and experience they want, and give health systems the security, coordination, information access and control they need.

Introduction

Providing more channels for patient care and communication—patient portals, partnerships with retail pharmacies to establish clinics, telehealth services, etc.—has often resulted in even more channels than health systems intended or can effectively manage. For example, patients have become more likely to email or text their clinicians; in 2021 each message received from a patient was associated with a 2.3-minute increase in the amount of time a physician spends in the EHR system. If connection or other problems come up during a telehealth visit, patients and clinicians may call each other directly. These practices provide the convenience that patients crave, but at the expense of the consistency, control and security that healthcare IT and telehealth teams need to maintain. Information from encounters using non-sanctioned devices or basic video-conference software isn't always recorded or can get trapped in siloes and never make it to the EHR or analytical dashboards, resulting in gaps that can be detrimental to care quality and costs.

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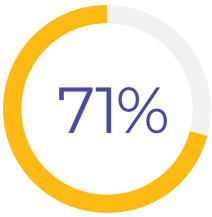
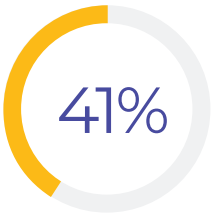
in the amount of time a physician spends in the EHR system

Despite the new flexibility that health systems offer, their patients and even clinicians want them to offer more than what video-conferencing tools or entry-level telehealth platforms can provide. A look into current patient attitudes shows there is some urgency for doing so. Consider:



of patients have a (perhaps unfair) expectation that their healthcare experiences be more like online shopping[1]



of consumers said they'd consider switching to a provider that offered a better digital experience[2]

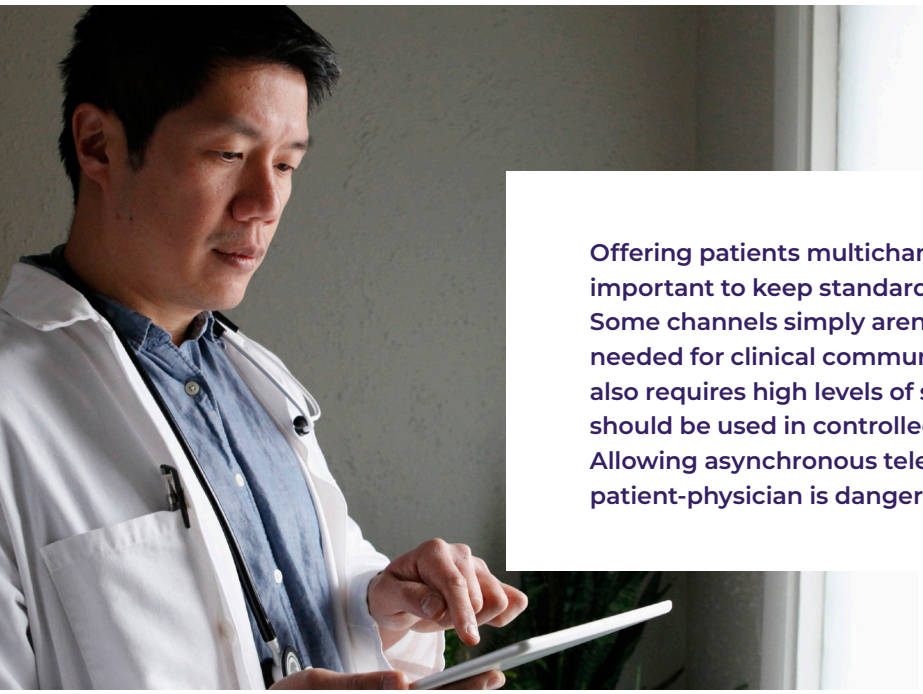
of patients say their providers do not offer the communications channels they would like to use[3]

Healthcare organizations need to find ways to extend more conveniences to their clinicians because communications stress, including the need to work with multiple tools, is a contributor to burnout.[4] One study found a majority of physicians still spend most of their work time on desktop computers, but now believe the ideal devices for their operational areas are tablets (70%) and smartphones (58%).[5] From a frontline clinical perspective, augmenting desktop computers with devices like tablets and smartphones encourages the use of innovative technologies and applications such as AI-enabled dictation, and further supports omnichannel and multichannel healthcare delivery. This is a great example of why Northwell Health selected Teladoc Health as its new virtual healthcare partner.

The majority of physicians[5] believe the ideal devices for operational areas are:

70%	58%
TABLETS	SMARTPHONES

More care is occurring outside the hospital, and thus potentially beyond the level of communications quality and information security that the hospital controls. We say potentially, because it doesn't need to be that way.



Offering patients multichannel support shouldn't mean any channel—it is important to keep standards and controls in place, especially for security. Some channels simply aren't up to the security and performance standards needed for clinical communications. Delivery of high-quality medical care also requires high levels of standards and control. Asynchronous healthcare should be used in controlled known patient-physician relationships. Allowing asynchronous telehealth without a previous established bonafide patient-physician is dangerous.

Preparing for a changing care delivery environment

Future care is likely to be more hybrid and less centralized around hospitals and physicians' offices, with telehealth and other digital exchanges accounting for a higher proportion of patient encounters than they have in the past. This phenomenon is one seen in industries such as retail. Corporations that did not have a thoughtful, long-term transformative vision in place, were unable to successfully navigate changing consumer buying habits and failed to survive. Healthcare organizations are subject to the same fate if they do not implement strategies to help them transition from standard in-person visits to a healthcare omnichannel experience. Non-hospital provider settings could account for nearly 65% of profit pools by the end of 2022, with ambulatory surgery centers and at-home care accounting for a growing share, according to analysis by McKinsey.[6] Deloitte Insights advises: "...health systems should start planning for a future where buildings full of beds will likely be a memory."[7]

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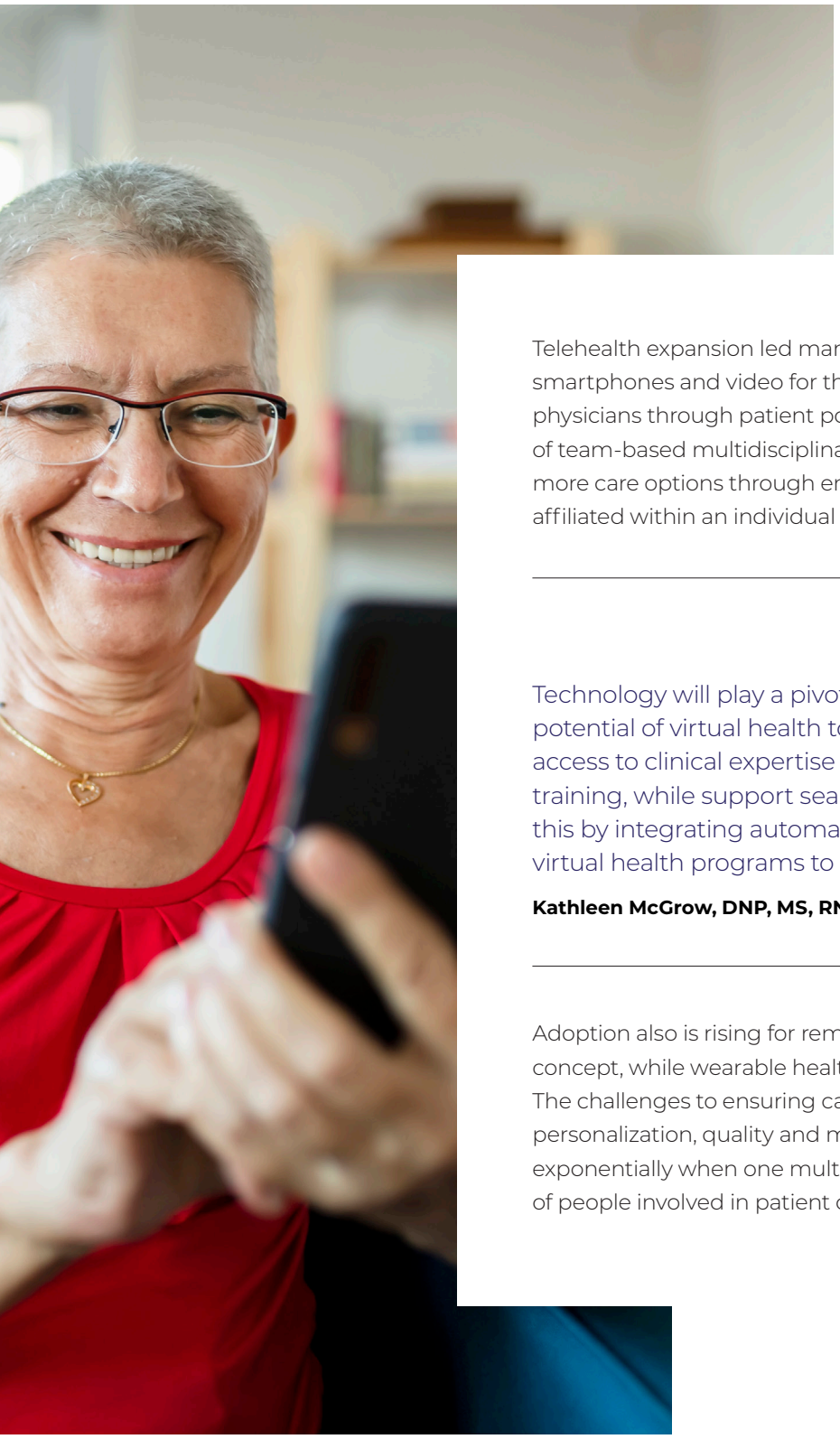
The change is already occurring. In 2021, 57% of hospitals and health systems used telehealth for more than 10% of their patient visits, a 36% increase from 2020.[7] In 2022, 41% of respondents believe that more than 20% of care can be delivered virtually, which is a 25% increase from 2021.[8] With this shift under way, workflows and infrastructure should be adjusted to accommodate and optimize this hybrid, multimodal care environment. In planning for these changes, hospitals and health systems have the opportunity to create a single platform that supports internal and patient communications across all channels and integrates with current workflows and systems.

In 2022, **41%** of respondents believe that **>20%** of care can be delivered virtually, which is a **25% increase** from 2021



Telehealth expansion led many patients to have healthcare visits via PCs, smartphones and video for the first time, and reduced their reluctance to contact physicians through patient portals. These changes come at a time when the use of team-based multidisciplinary care models is increasing, and when patients have more care options through emerging retail and online services that may not be affiliated within an individual health system.

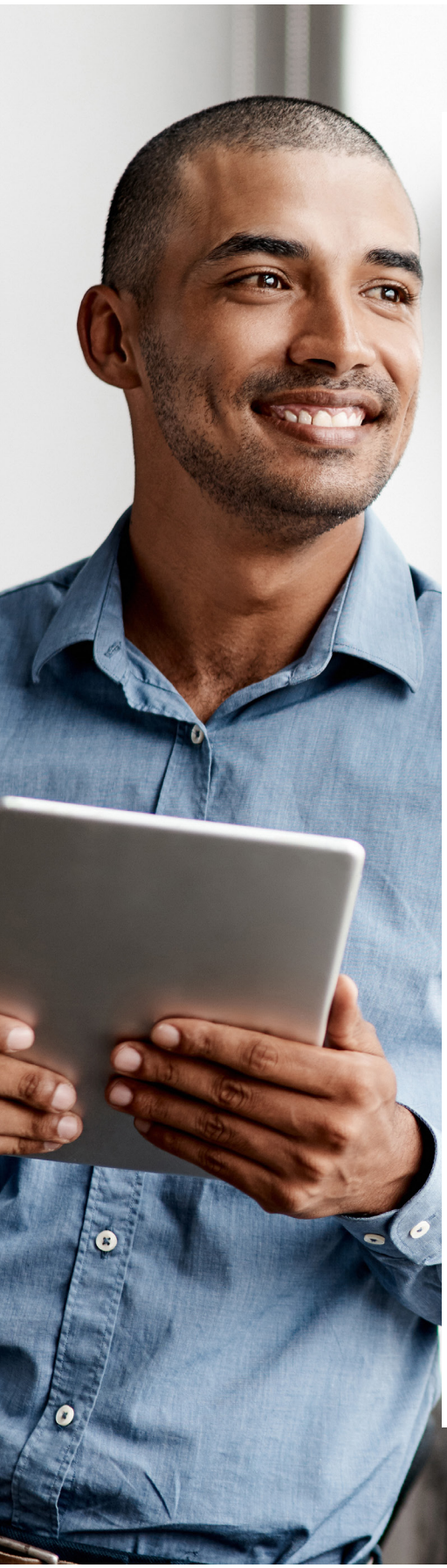
> Technology will play a pivotal role in new care models. Capitalizing on the potential of virtual health to transform care delivery and expand patient access to clinical expertise will require organizations to prioritize clinician training, while support seamless and high-quality interaction. They can do this by integrating automation and technology and reassessing existing virtual health programs to scale them appropriately for long-term success.
>
> **Kathleen McGrow, DNP, MS, RN, PMP, Chief Nursing Information Officer, Microsoft**

Adoption also is rising for remote patient monitoring and the hospital-at-home concept, while wearable health and fitness trackers are already mainstream. The challenges to ensuring care continuity, sharing and securing data and personalization, quality and maintaining comprehensive records increase exponentially when one multiplies the communications options by the number of people involved in patient care.

> The pandemic proved to be a catalyst for patients to contact their care team directly through health system patient portals. This development increased convenience for patients and workloads for physicians, whose EHR in-baskets swelled by 157%, requiring many more hours to be spent in the EHR instead of engaging with patients or being off duty.[9]
>
> **Journal of the American Medical Informatics Association, February 2022**

A constant amid these changes is that the EHR will remain as the system of record. However, it has become more important for healthcare organizations to improve their systems of engagement with patients. Ideally these systems work in concert with the EHR and are not disconnected from it. Now it is up to health systems to develop workflows that minimize the additional time healthcare workers need to spend responding to messages and recording details, such as by minimizing the number of screen switches and logins required.

As care becomes more fragmented, communication and documentation doesn't have to be. Communication platforms can support clinician-to-patient and clinician-to-clinician communications across all channels through a single sign-on (SSO) that also provides secure access to the EHR during both in-facility and telehealth patient encounters. Such platforms create opportunities to reduce the number of different communications systems, software and devices that need to be purchased, integrated, maintained and secured, while providing a consistent interface for users across all channels.

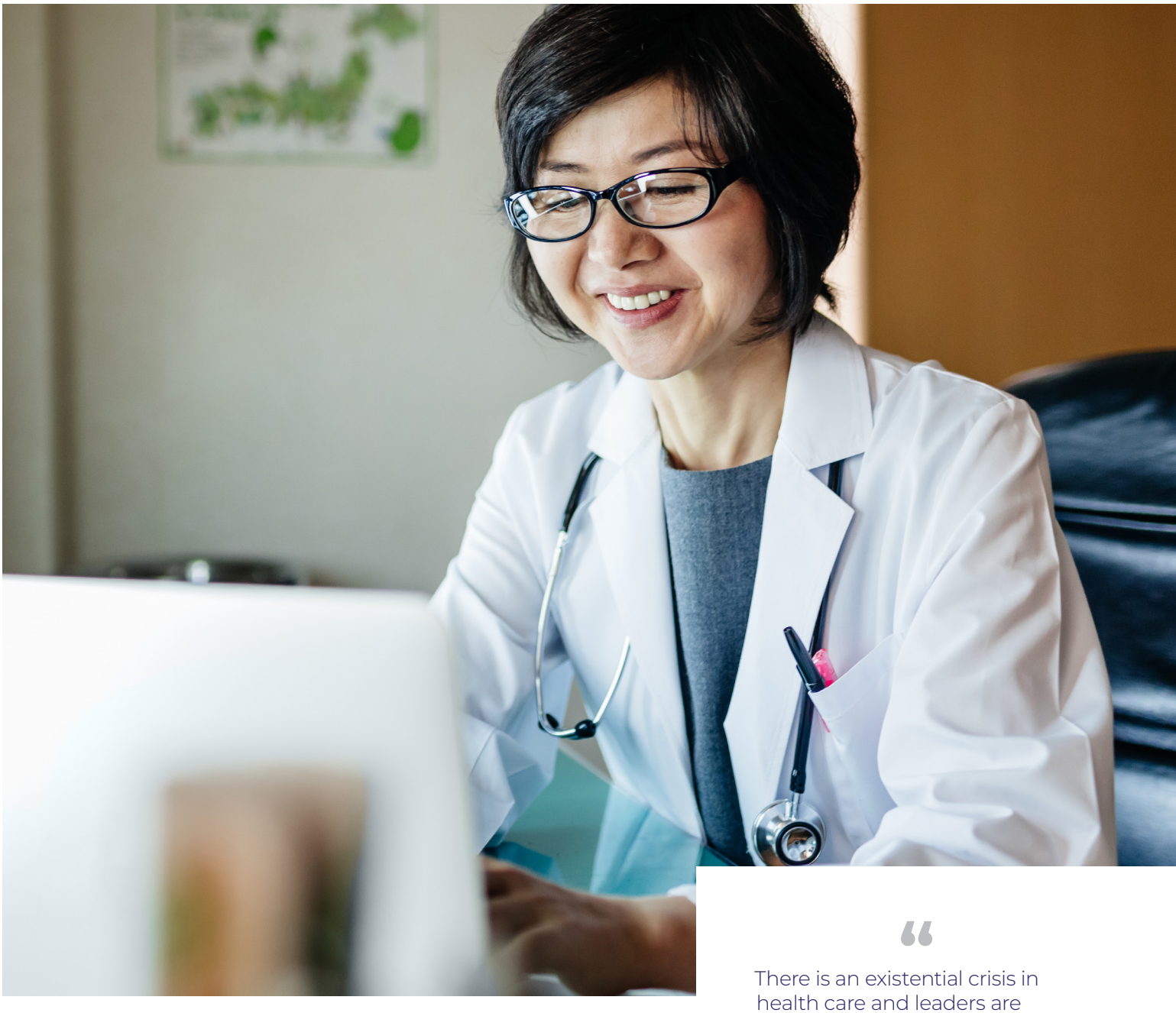


Solving for associated risks & challenges

Disconnects between any parties or systems along the patient journey can adversely affect every component of the Quadruple Aim. The EHR system is intended to be the key, central resource to prevent these problems, but it is not enough, and has proven too easy to bypass. Another limitation is that the EHR is mostly a clinical repository for patient records, not a patient engagement tool. Today's environment demands more emphasis on personalizing the care experience leading to improved patient engagement, trust and satisfaction. This requires aggregating data from across the care continuum and applying machine learning and artificial intelligence (AI) to help clinicians deliver personalized care at the right place and time.

Through experience, we've identified some common challenges organizations struggle with when trying to establish such systems and processes:

- **Achieving scalability,** which often results in the need to streamline applications to be the minimum necessary to support personalized care in the right place (in person and virtually) at the right time.
- **Simplifying operations,** including software and application management for the IT department. Supporting multiple new channels of patient engagement, communications and care can't result in an equal number of software systems that each require licensing, integration, training and support.
- **Achieving system interoperability and data integration.** If data can't flow easily and securely across channels it risks becoming trapped in siloed systems, which puts care coordination and patient safety at risk. The "swivel chair effect" that requires clinicians to pivot between two or more screens to conduct and document visits is a poor model for how to achieve multimodal care.
- **Mitigating risk across all channels.** Preventing the need for redundant data entry is one way to lessen risk because it reduces the opportunity for data entry errors. Limiting communication and data exchange to HITRUST-certified and other secure channels is another way to reduce risk.



The more seamlessly communications, record keeping and other workflows are connected across virtual and physical care, the better health systems will be able to support high levels of care continuity and patient and clinician satisfaction. Good integration minimizes clinician burden by eliminating redundant devices, logins, data entries and other workflow tasks.

> “There is an existential crisis in health care and leaders are identifying their clinicians as 'vulnerable' and 'wounded.' Fundamental shifts in delivery models, including widespread telehealth adoption, requires examining and rethinking multiple components of care, ranging from workflows to patient interactions to educating future clinicians and retraining current ones.
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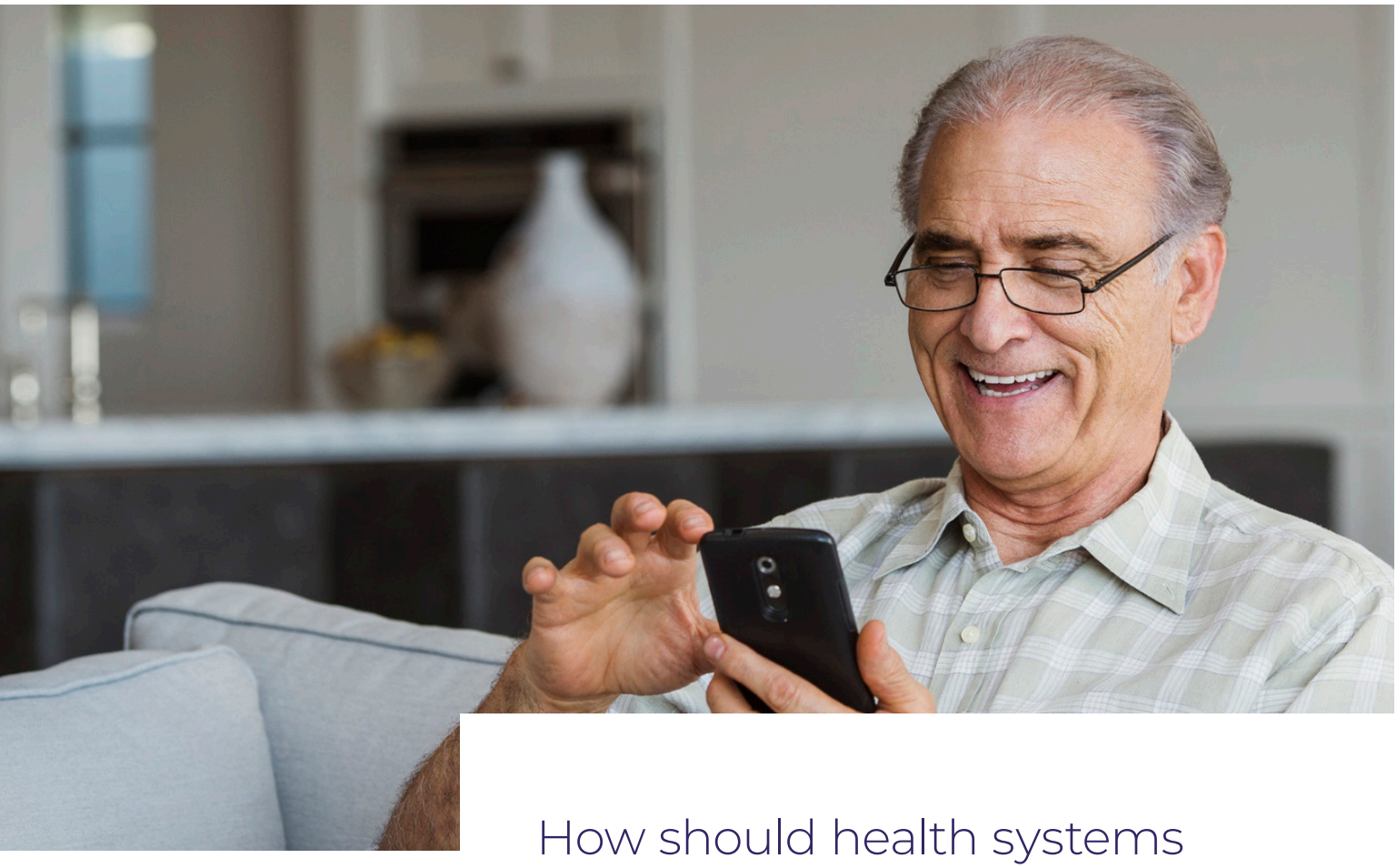

How should health systems respond?

What if you could provide all the types of channels that would allow patients, clinicians, caregivers, family members and consulting specialists to communicate regardless of their physical location, and connect them all securely to the patient portal and EHR system through SSO? That is what health systems should aspire to, because disconnects across any of these parties or systems can adversely affect patient care and create unnecessary risks and costs.

The interconnected hybrid model isn't only aspirational, it is available and has been implemented by some U.S. health systems.

Supporting multimodal communications by offering different voice, video and messaging-based options within the platform is essential. As noted previously, 33% of patients say their providers do not offer the communications channels they would like to use, and 41% of consumers said they'd consider switching to a provider that offered a better digital experience. In many cases, the channel patients want to use may be the least secure. For example, doctors and patients might engage over Facetime on an iPhone instead of through the health system's patient portal or telehealth solution.

> "Policymakers and health system leaders should keep these new demands on clinician time in mind as they develop future reimbursement models and workflows, taking care not to exacerbate EHR-driven clinician burnout.[10]
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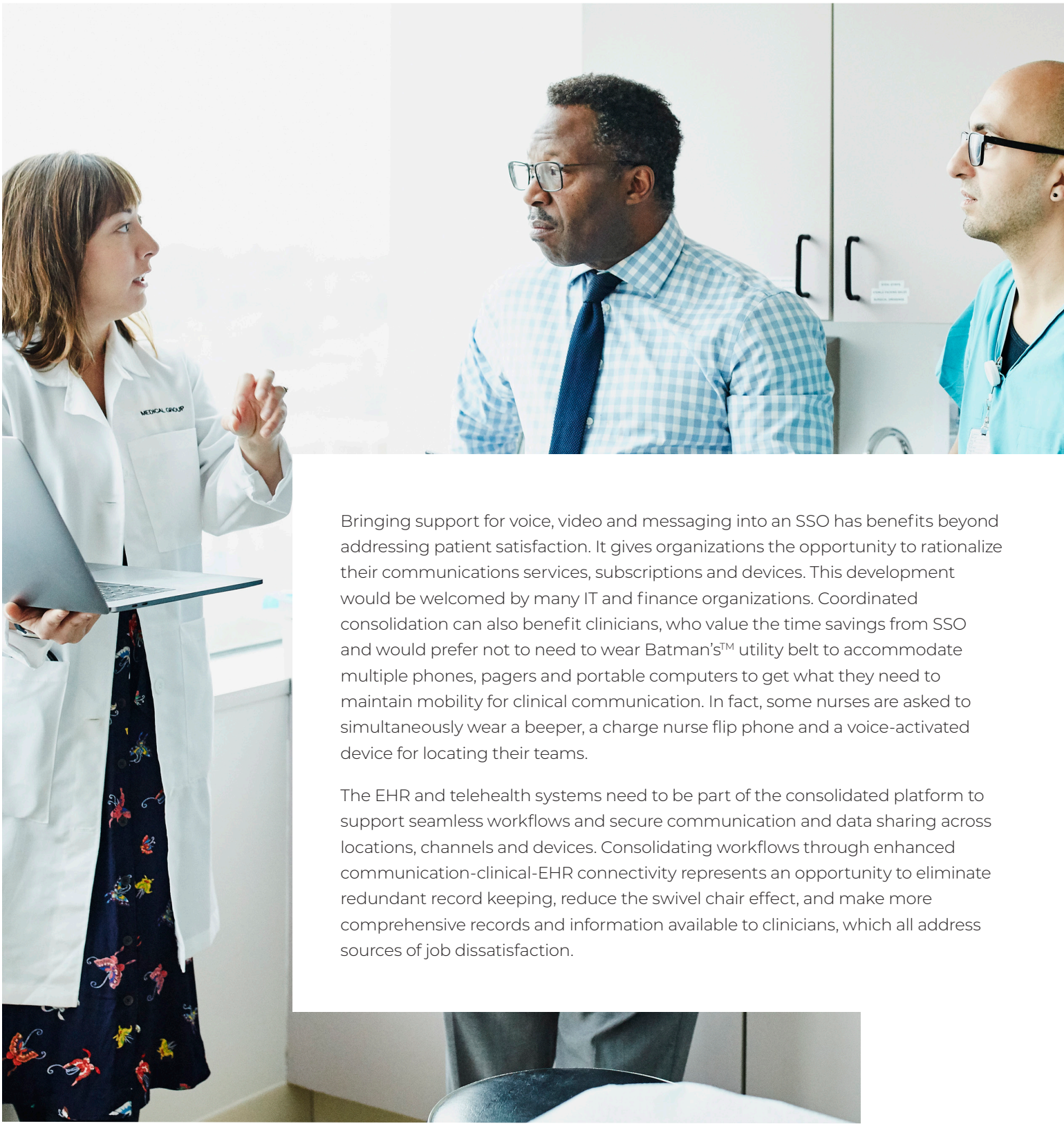
> **Journal of the American Medical Informatics Association, March 2022**



Bringing support for voice, video and messaging into an SSO has benefits beyond addressing patient satisfaction. It gives organizations the opportunity to rationalize their communications services, subscriptions and devices. This development would be welcomed by many IT and finance organizations. Coordinated consolidation can also benefit clinicians, who value the time savings from SSO and would prefer not to need to wear Batman's™ utility belt to accommodate multiple phones, pagers and portable computers to get what they need to maintain mobility for clinical communication. In fact, some nurses are asked to simultaneously wear a beeper, a charge nurse flip phone and a voice-activated device for locating their teams.

The EHR and telehealth systems need to be part of the consolidated platform to support seamless workflows and secure communication and data sharing across locations, channels and devices. Consolidating workflows through enhanced communication-clinical-EHR connectivity represents an opportunity to eliminate redundant record keeping, reduce the swivel chair effect, and make more comprehensive records and information available to clinicians, which all address sources of job dissatisfaction.

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Multiple logins are more than an inconvenience, **they are a risk.**

Characteristics of a well-connected platform for hybrid care

An integrated platform implies integration, and thus effort for the IT organization. Not all platforms are created equal, and the integration differences have a lot to do with the ease of implementation, how they influence user workflows and the total cost. Based on our experience, we have identified the most important features of an integrated platform, which are presented below along with some background on why they are valuable.

SSO to simplify communications and promote good user experience

Multiple logins are more than an inconvenience, they are a risk. When clinicians and patients are required to log in to multiple systems to perform their common activities it becomes tempting to reuse the same login credentials. This raises the risk of exposure and chances of a system breach. The more logins required, the more chances there are for failed logins, which can cause appointments to be missed or for records not to be updated. SSO is a highly effective and well-established solution for eliminating multiple logins, and it should be implemented so patients and clinicians can launch telehealth visits directly when they are logged in to the patient portal and/or EHR system.

Interoperability with EHRs

Integration between the EHR and telehealth systems should go deeper than logins. It should enable clinicians to access the EHR to review information and make updates while they are interacting with patients via telehealth, from the same screen. This level of integration encourages timely and complete record keeping, which supports care quality and continuity. It also eliminates the need for redundant, swivel-chair data entry (once in the telehealth system, again in the EHR), so physicians can give their full attention to patients, which contributes to better patient satisfaction.

Support for collaboration

Patient care and coordination often isn't point-to-point. For that reason, communications channels should support multi-party communication. This functionality has many beneficial use cases. For example, it can enable care teams to connect in real-time within a hospital to quickly and seamlessly coordinate care across departments, nurses and clinicians. And it can enable patients, family members, clinicians, social workers and others to come together virtually. Strong collaboration support is essential for team-based care and will be increasingly important as remote care, hospital-at-home and other in-person/virtual hybrid care models grow.

How to get to the level of collaboration and functionality described above could be the subject of an entire paper. Key elements are having clinical and IT teams collaborate to align applications that support care delivery, in addition to business operational needs, and having a change management program ready before these and other planning discussions take place.

Conclusion

As patient care and communications become more decentralized, coordinating them becomes more challenging. It is also becoming more difficult to maintain best practices and compliant security when consultations and care are conducted remotely, such as through telehealth, at retail clinics and other locations outside the health system. When given the chance, patients and clinicians will choose the most convenient communication/engagement method, even if it isn't the channel approved for that purpose. Health systems can address these challenges by making it more convenient for patients and clinicians to use the channels and follow the processes the system has developed. This requires providing more choices, while keeping choices connected to centralized records and consistent security. This is best done through a platform, rather than ad-hoc connections that require more integration and can result in gaps. Teladoc Health has helped many health systems strategize and deliver virtual care through multiple engagement models via platforms that leverage and integrate with existing communications and EHR systems. Visit us online to learn more.

[1]Avtex Omnichannel Healthcare Experience Report, May 2021.
[2]Cedar-Survata 2019 Consumer Healthcare Survey, October 2019.
[3]Avtex Omnichannel Healthcare Experience Report, May 2021.
[4]Spok "The State of Healthcare Communications 2021 Report"
[5]Maassen, et al Future Mobile Device Usage, Requirements, and Expectations of Physicians in German University Hospitals: Web-Based Survey J Med Internet Res. 2020 Dec; 22(12): e23955.Published online December 21, 2020.
[6] McKinsey "Walking out of the hospital: the continued rise of ambulatory care and how to take advantage of it" September 18, 2020. Accessed online May 2, 2022: https://www.mckinsey.com/industries/healthcare-systems-and-services/our-insights/walking-out-of-the-hospital-the-continued-rise-of-ambulatory-care-and-how-to-take-advantage-of-it.
[7]Deloitte Center for Health Solutions "Hospital revenue trends" February 21, 2020. Accessed online May 2, 2022: https://www2.deloitte.com/us/en/insights/industry/health-care/outpatient-virtual-health-care-trends.html.
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[9]Journal of the American Medical Informatics Association, Volume 29, Issue 3, March 2022, Pages 453-460 https://doi.org/10.1093/jamia/ocab268
[10]A Jay Holmgren, et al. Assessing the impact of the COVID-19 pandemic on clinical ambulatory record use. Journal of the American Medical Informatics Association, Volume 29, Issue 3, March 2022

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About Teladoc Health: Teladoc Health is empowering all people everywhere to live healthier lives by transforming the healthcare experience. Recognized as the world leader in whole-person virtual care, Teladoc Health leverages clinical expertise, advanced technology and actionable data insights to meet the evolving needs of consumers and healthcare professionals.

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