### Carenet Health

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**BRIEF** 

For Sustainable
Telehealth Growth,
We Need to Talk
About Smarter
Resource
Management

Effects of the COVID-19 pandemic began to significantly shift telehealth from a convenience to a necessity, and on-demand virtual care is playing a vital role in meeting patients' and health plan members' needs.

Is the healthcare industry prepared for what's next? Can telehealth solutions meet rising demand? The last thing we want is another crisis we're not ready to handle.



No matter what your telehealth solution looks like right now—whether you've had a system in place for a while or recently ramped up your telehealth services to combat COVID-19—patient (and health plan member) needs and expectations, as well as your organization's needs and expectations, will likely continue to change quickly.

That's why it's important that your virtual care approach is set up to optimize resources, provide a seamless and satisfactory patient experience, enhance ROI and keep costs low with improved efficiencies.

# Problem number one? Telehealth fragmentation

The conventional approach to telehealth has involved a disjointed infrastructure, with elements added together as needed—much like a house that's been expanded and added on to as a family's needs change over time. A garage here, an extra bedroom there, but no comprehensive architectural plans.

It's not unusual for health plans, health systems and provider groups to have separate partners or solutions for a nurse advice line, physician video consultations, online behavioral health services and after-hours member support.

The problem is that this disparate configuration can be expensive to maintain, challenging to manage the different moving parts and confusing for healthcare consumers. It can lead to a delay in patients being directed to the most appropriate (and cost-effective) setting of care quickly.

Also, notably, having siloed telehealth solutions can mean a healthcare organization will be slow to respond to what's coming next, whether we're in the middle of a pandemic or not. As demand grows and telehealth resources are stretched thinner, better system scalability and integration will need to be considered.

For providers especially, telehealth that is not optimized and consolidated can create a barrier to fully extending access to care. But a streamlined, non-siloed model can bolster reach efficiently, bringing more services and on-demand functionality to the typical pool of resources.

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## Solving for an optimized triaged and virtual care experience

Healthcare consumers who seek out telehealth are often worried and not feeling well, and for many first-time users, they're uncertain about where to turn for help. They shouldn't have to decide whether they need a nurse advice line, a physician, a mental health specialist or another type of care.

So how can the telehealth experience better set the stage for efficient patient flow, high user satisfaction and rapid speed-to-care—all hallmarks of an optimized virtual care model? It requires streamlining the experience and fine-tuning which resources are needed at what point in the patient journey.

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In a more perfect virtual care model, telehealth services are consolidated into a single point of access—a front door to a consolidated virtual clinic—that lets consumers call one number or use one app or web portal entry point. From that point, they are routed to general information services, registered nurses for at-home treatment and guidance, live virtual physician consults, behavioral health assistance or whatever health service fits their needs best.

### Costs are an important consideration, too

A "telehealth command center" type of virtual resource management is also more cost-effective. In the case of Carenet Health's nurse triage center, as an example, roughly half of the calls coming in for a virtual physician consult are resolved first with evidence-based, highly skilled nurse triage, without the need for physician intervention.

A bonus is that, typically, streamlining can create around a 50% cost-savings for the payer or provider who offers a virtual clinic solution.

Only patients that will benefit from an M.D. consult (or mental health crisis support professional) move on in the virtual clinic process, while RNs provide guidance or care at a lower price point to those who don't need to move on.

With this structure, healthcare consumers get exactly the level of care and information they need, and different resources are directed to precisely the right need.

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### The path to telehealth progress

As increasing adoption promises to make telehealth as common as online banking, industry partners need to work together on continuous improvement.

Even with the recent growth, telehealth utilization is still comparatively low, especially in certain populations. For instance, during the height of the pandemic, Carenet data showed Medicaid and Medicare patient usage increased, but only modestly compared to the surge in use by the population under age 30.

The bottom line? There's room for telehealth improvement in everything from efficiency to patient experience. Keeping resources deployed 24/7 and operating at peak efficiency should be a top priority.

As the industry addresses the next phase of a new normal, we all need to think beyond the doctor-led virtual consult to define telehealth as everything from registered nurse triage to crisis mental health support to on-demand connections to physician assistants, nurse practitioners, nutritionists and more.



#### ABOUT CARENET HEALTH

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