8 keys to post-crisis virtual care

Lessons learned

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The COVID-19 crisis fueled the rapid adoption of virtual care across many healthcare organizations. Out of crisis emerged opportunities to address new ways of delivering care, provide access to services, and improve outcomes.

To drive utilization and increase opportunity, human services provider organizations need to embrace the revolutionary changes as a net positive for the organization and the communities they serve. More services will be more widely available to more consumers in the setting that best fits their needs.

Demand for virtual care has dramatically shifted, and we are now in a new era of provider and consumer engagement. Successful organizations understand the importance technology plays in operational strategy and consumer access to services. Here are a few keys to virtual care in the wake of COVID-19:

1 Assess the landscape

Take stock of market trends and needs and understand who your competitors are, who else is providing virtual care in the communities you serve and what services they are covering. That will give you a good sense of gaps and opportunities, as well as crowded and overly competitive spaces to avoid. The competition for specialty behavioral health provider organizations could come from human service provider organizations expanding nationally, hospital systems adding specialty services to their portfolio through telehealth—as well as from online-only startups and behavioral health platforms. Remember that although this competition exists, participating in value-based care models specific to human services communities can position your organization as tough competitors. Addressing the whole-person through service lines or your ability to seamlessly exchange data with other providers will drive improvements in consumer outcomes. Operating as a Certified Community Behavioral Health Clinic (CCBHC) or partnering with one as a Designated Collaborating Organization (DCO) can also strengthen your position.

Out-of-industry competitors like Amazon and Walmart are also making inroads to the healthcare ecosystem. This brings understandable concern from existing organizations in the markets they are entering because of resources they can bring, but human services organizations should feel confident in their ability to bring industry experience and community ties that these competitors cannot.[1]

Some health plans are acquiring telehealth platforms, reducing the possibility of referrals to provider organizations.[2] In other scenarios, online platforms are acquiring organizations with a portfolio of digital health tools to add to their

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1   https://cantoncompany.com/2020/03/09/amazon-walmart-make-bold-moves-in-healthcareagain/
2   https://www.businessinsider.com/unitedhealth-to-purchase-telemental-health-startup-ableto-2020-4

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service lines.[3] Identifying digital tools that would complement your services and integrate with your technology will bolster your ability to meet multiple consumer needs and retain market share. A scan of the competition will also help you assess your competitive advantage and identify niche markets you can serve best.

2 Plan your portfolio

Determine the types and volume of services you will deliver through telehealth post-COVID-19 based on demand, capacity, coverage and available providers. Determine what new services you can provide by using telehealth. Also identify services that require a hybrid of telehealth and in person visits. Integration and care coordination have new potential with digital health—your provider organization could be the single source through which consumers navigate all care logistics, while you bring in services outside your current scope.

Think about how many telehealth services you can offer per day, where the services will be delivered from (from your brick and mortar location or staff working from home), and who will deliver services—all your providers, or a team who operate exclusively in the virtual space. It's important to select a technology partner that also enables on-demand visits in addition to scheduled visits. On-demand enables providers to show their status as "available," especially helpful if there are no shows.

3 Take the consumer pulse

The COVID-19 crisis has shown that consumers are more receptive to telehealth. It has also shown us where barriers to care still exist. You must factor in consumer preferences access to technology and offer options to meet them where they are.

Start by surveying your current consumers on their response to telehealth during the crisis and what they might prefer when it is safe to leave home again. At least 60% of patients who used virtual care tools said that "based on their experience during the pandemic, they want to use technology more for communicating with healthcare providers and managing their conditions in the future," according to a survey from Accenture. "Many patients said they felt care was more personal, more convenient, and timelier," said Brad Michel, who leads Accenture's North America Life Sciences division, in a statement.

There is also the fundamental issue of access to technology. How many of your consumers lack access to smartphones, computers or internet, and what options can you provide for them? We saw the Federal Communications Commission (FCC) aim to close these gaps through grant funding appropriated to provide connected care services, and many organizations leveraged these FCC grants to develop tech stacks that support their own impacted consumers. You may need to negotiate with payers and get creative about soliciting donations to equip vulnerable populations with digital access to essential services.

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3   https://histalk2.com/2020/08/05/teladoc-to-acquire-livongo-for-18-5-billion/

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4 Check rules, regulations and licenses

Keep track of regulatory changes. CMS and state agencies moved quickly to accommodate consumer need for services during the initial period of rapid changes. CMS is already reviewing the most recent regulations regarding telehealth and has expanded reimbursements for therapists and phone services.[4] Some states are also reexamining their telehealth rules.[5] It's almost certain many of those regulations will become permanent, but likely with some revisions.

Check intrastate and interstate licensure requirement changes (compare pre-crisis and crisis provisions to predict how things might change when we go back to the new normal) so you can expand your capabilities accordingly and put risk management measures in place. If you intend to provide interstate services, check the tax implications.

5 Review payer terms

Know who your payers are and how they are billing for services. As industry thought leaders expected, many of the waivers put in place during the initial COVID-19 legislative changes are now being made permanent. Monitor these changes and their impact on consumer access to services and your organization's ability to bill for services.

Ensure you have appropriate credentialing for the provider organization type and place of service, especially if billing Medicare and Medicaid. Review payer contracts and/or payer rules related to requirements and check how long the COVID-19 concessions from payers are likely to be in place. Review your current contracts to see if any modifiers are required to factor in virtual service delivery. Also consider where you need new contracts and start negotiations—data-driven demonstrations of telehealth outcomes during the crisis will help you solicit extended coverage and possibly better reimbursement rates moving forward.

6 Expand marketing tactics

Once you and your team have assessed the landscape, scoped out the competition and determined the mix of services you will be delivering—as well as which ones will be delivered face-to-face and which delivered online—it's time to consider overhauling your marketing and consumer outreach. Critically assess your website. Does it set the right tone, convey the message you want, and make clear your approach to service delivery is flexible and customizable to the needs of current and future customers? If not, it's time to plan a refresh.

As we move forward, consumers will expect digital, on-demand health to be the norm. Make it easy to find the services easily review provider credentials and how to set up in-person or online appointments. Don't forget to market your telehealth capabilities and expanded services to payers, grant sources and other community provider organizations to tap into the potential for new partnerships, collaboration and revenue.

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4   https://mhealthintelligence.com/news/cms-expands-covid-19-telehealth-reimbursement-to-therapists-phone-services

5   https://www.cchpca.org/covid-19-related-state-actions

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7 Evaluate workflows and processes

COVID-19 has made everyone acutely aware of their vulnerability and organizations have adjusted their policies and procedures for intake, scheduling, treatment consent, documentation, billing, supervision, risk management and crisis management to reflect that heightened sensitivity.

As consumers are accessing services both in person and virtually, workflows and processes will need to be reviewed and possibly adjusted. Review the workflows and processes frequently, based on feedback from team members on the frontlines, and institute continuous process improvements, or incorporate into existing measures and metrics.

8 Measure and improve

Organizations should assess their key performance indicators (KPIs) to ensure the data collected accurately captures operational, clinical and financial performance. Compare your pre and post-COVID-19 data on everything from new consumers to cancellations, no-shows to reimbursement denials, in order to have a qualitative understanding of where you are doing better and where there is room for improvement. Continue to collect feedback from every visit and regularly analyze reports on all feedback to enable the organization to adjust. It's the only way to ensure surviving the crisis and emerging successful on the other side.

About Netsmart

Netsmart designs, builds and delivers electronic health records (EHRs), solutions and services that are powerful, intuitive and easy-to-use. Our platform provides accurate, up-to-date information that is easily accessible to care team members in behavioral health, home care, senior living and social services. We make the complex simple and personalized so our clients can concentrate on what they do best: provide services and treatment that support whole-person care.

 By leveraging the powerful Netsmart network, care providers can seamlessly and securely integrate information across communities, collaborate on the most effective treatments and improve outcomes for those in their care. Our streamlined systems and personalized workflows put relevant information at the fingertips of users when and where they need it.

For more than 50 years, Netsmart has been committed to providing a common platform to integrate care.

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