Virtual primary care is here - What are the **ingredients for success**❓

Why Virtual Primary Care?

Virtual Primary Care (VPC) combines the key benefits of traditional primary care – like an ongoing relationship with a doctor – with the convenience and ease of the virtual world.

Unlike early telehealth offerings that focused on urgent care, VPC holistically incorporates all pillars of primary care including urgent and episodic (ear infections, sore throats), preventative (various types of screening), and chronic care. Rather than connecting patients to an unfamiliar "doctor in the cloud", it focuses on continuity of care and personal relationships.

VPC gives people better access to healthcare without replacing in-person care completely. With a hybrid model that takes a virtual-first approach, people are able to first access healthcare online and then when needed turn to in-person visits later on. This 'digital front door' solution creates innovative plan opportunities for payers and payviders, and the cost-saving benefit of putting psychological distance between members and the ER.

How VPC improves payer and payvider outcomes

8-15% reduction in premiums for employers

20 fewer days to see a new doctor

Hartford Business Journal, "CT insurers roll out virtual primary care plans as telehealth becomes mainstream" December 13, 2021

The pandemic fast-tracked VPC

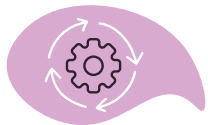**COVID-19 was a key adoption driver for VPC, leading to important changes in three key areas.**

Patient behavior: Initially, there was significant resistance to the idea of telehealth. Yet when other options were unavailable during the pandemic, many patients discovered its significant advantages.

Regulatory tailwinds: The clear need for virtual healthcare options during the pandemic lead to softer regulatory restrictions and new reimbursement codes, paving the way for providers to expand their virtual offerings.

Additional virtual care modalities that went beyond urgent care were developed to meet the growing demand.

Growth in telehealth usage peaked during April 2020 and has since stabilized

Telehealth claims volumes, compared to pre-Covid-19 levels (February 2020=1)[1]

38X

McKinsey & Company report, July 2021

What are the ingredients for VPC success?

VPC shows incredible promise. However, the increased awareness generated during COVID-19 doesn't guarantee success, and there are still significant barriers to mass adoption that must be overcome. Incorporating the following elements into your VPC program can help.
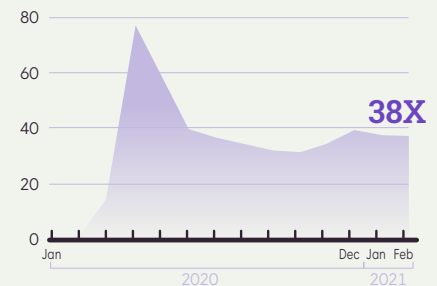
1 Business Models

Business models need to reflect the different virtual offerings and segments that they're designed to address. Each customer segment needs to be approached with a tailored VPC solution - what works for a single mother of two kids isn't going to be the same thing that works for a 50-year-old dad of two teenagers.

Pricing needs to be taken into account as well; reductions in copay or lowering premiums while members get used to the idea of not physically seeing a doctor. Behavioral science research shows that users will often select the cheapest plan over the one with better coverage options because we make our decisions based on what's most salient to us at the time of choosing - and often that's going to be price.

VPC and digital-first plans that take these factors into account will make those plans more palatable and easier to market and sell to members.

> "We make our decisions based on what's most salient to us at the time of choosing. In fact, when we're looking at the Healthcare Exchange, the most salient factor is price. So you might have a really well-designed plan that's innovative, better for customers, et cetera, but if it's not competitive on price, that might be the only factor that people see."

Richard Mathera,
**Managing Director**
at Irrational Labs

2 Building trust

A 2021 Accenture Health and Life Sciences Experience Survey reported that 23% of respondents expressed trust in their health insurance company, down from 28% in 2020.* For members to make good healthcare choices, ultimately leading to lower costs for insurance companies, they need to trust their insurer and their provider. In the same survey, 34% of respondents said they were less likely to seek medical care the next time they needed it following a bad experience. We know that this leads to later diagnoses, worse health outcomes, and more expensive treatments in the long run.

In order for VPC to really be utilized, it needs to be trusted by patients and, no less important, by physicians. Both sides have been disappointed by telehealth offerings that don't include diagnostic tools. Phone and video don't do enough to replicate the experience on an in-person visit, and they're missing key diagnostic necessities like common exams - actually looking inside patients' ears to diagnose ear infections, or listening to patients' heart and lung sounds to get a full picture of their physical health.

Continuity of care is also key to building trust - creating a central location for members to get virtual care instead of sending them to a variety of different locations will create a streamlined and smooth experience for users who will feel more comfortable and trusting of their care.
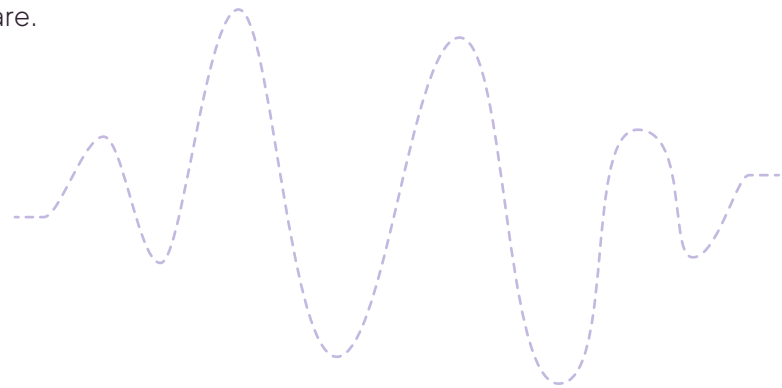
3 Behavior change

VPC requires a paradigm shift in healthcare consumption which demands significant behavioral change from both patients and physicians. During COVID-19 lockdowns, patients started to adapt to the idea of not physically seeing their doctor. They got used to visits being replaced by a phone call, or a video call. But that doesn't mean they liked the experience. In order for VPC to truly succeed, consumers need to be educated on the benefits of this alternative healthcare opportunity, reminded and encouraged to use it as a default and not as a backup option.

This can be done in a variety of ways - communications that emphasize the benefits of virtual care, use of real diagnostic equipment in remote offerings, and of course building up that trust between the patient and the solution.

4 Diagnostic tools

VPC that relies on voice or video calls alone will never be strong enough to provide the same benefits as in-person doctor visits. When creating a hybrid or digital-first offering, utilizing diagnostic tools to actually let doctors remotely examine patients will create more accurate and trusted diagnoses. This methodology will enable your VPC solution to be used as more than just a triage service to give members answers to basic questions while still requiring in-person visits for formal diagnoses and prescriptions. Remote physical exams will enable true ED diversion and true trust in the system and diagnoses, from both a patient and a physician perspective.
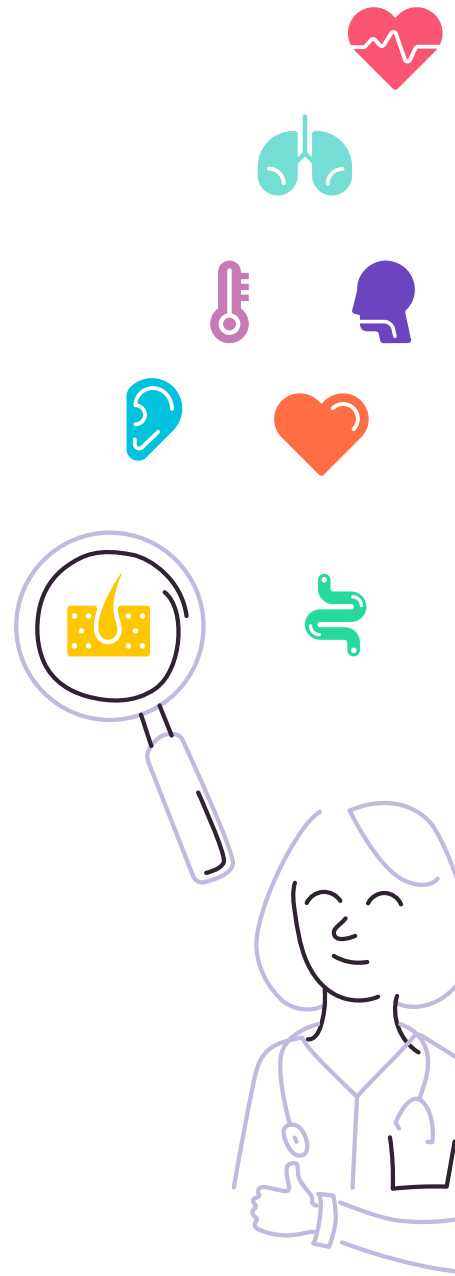
5 Integrated technological solutions

VPC covers a broad range of services including triage, urgent care, chronic care management, remote monitoring, preventative care, and more. Requiring care teams and patients to use different tools for each 'type' of care creates a fragmented solution with low usability levels on both sides. The various services need to be integrated into one seamless platform to enable a broad VPC approach.

Not only must your VPC platform be robust enough to cover different VPC modalities, but it must also integrate into existing EMRs so that data remains centralized and shareable by the different clinicians who may need to be involved in one patients' care. The VPC solution needs to be platform-agnostic and have the ability to be integrated into different platforms across providers.

The bottom line

By integrating these five key ingredients into your Virtual Primary Care offering, you'll be able to create more successful VPC plans that your members are more likely to utilize. In the long run, this methodology will also enable even broader telehealth opportunities, with additional use cases and specialties easy to integrate into your overall digital healthcare strategy.

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