



The KPIs of Successful Virtual Healthcare Programs in 2023



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During the COVID-19 pandemic, healthcare organizations needed a way to safely treat patients. But high infection rates and stay-in-place orders made in-person care difficult to administer. Virtual care became a saving grace in situations where in-person care was not an option. Telehealth use peaked in April 2020 before dipping slightly between May and September. Its use increased again in October 2020 due to colder weather and the holiday season.

Virtual care use remains slightly above pre-pandemic levels almost three years later. However, its use fluctuates by specialty. One report found that telehealth visit volume decreased 37% since Q2 2020.

Only 6% of patients chose telehealth five to six times last year¹. Behavioral health, however, saw a significant increase compared to pre-pandemic levels. In Q1 2019, 32.4% of telehealth visits were related to behavioral healthcare. That number jumped to 59.9% by Q1 2022.

But are COVID-era virtual care programs sustainable and scalable? Some patients will continue to choose telehealth. But this doesn't mean it will return to early pandemic levels. Learn the KPIs healthcare organizations should use to measure success in this whitepaper.

Challenge

Virtual care experienced growing pains as healthcare organizations adjusted to a “new normal.” The increase in use came at a time when organizations were also dealing with an influx of patients. The healthcare system at the time wasn't prepared for either scenario. Organizations that already had virtual care capabilities had to quickly increase their offerings. Those who didn't already have a program in place had to implement one on the fly. This led to significant issues that impeded virtual care use and adoption.

Barriers to telehealth during the pandemic fell into one of seven categories³:

1. Technical aspects
2. Privacy, data confidentiality, and reimbursement
3. Physical examination and diagnostics
4. Special populations
5. Training of healthcare providers and patients
6. Doctor-patient relationship
7. Acceptability

Poor internet connection and lack of universal access to technology are among the main technical issues. These challenges are prevalent in rural communities with limited access to broadband internet. Patients may have faced difficulties navigating different telemedicine platforms. They may have also had device issues. Lack of technical skills also posed a significant challenge.

Another challenge healthcare organizations might face with virtual care is continuous patient engagement. The first virtual visit a patient has with their provider is crucial. Their encounter needs to be comparable to, if not better than, an in-person visit.

A virtual care program that addresses these challenges can ensure a positive experience.



Overview

Virtual healthcare refers to virtual visits or interactions between patients and clinicians. It is a component of telehealth, although the terms are often used interchangeably. They may also be referred to as telemedicine.

Telehealth is “the use of electronic information and telecommunications technologies to support long-distance

clinical health care, patient and professional health-related education, public health and health administration⁴.” Telemedicine, on the other hand, refers to remote clinical services.

A successful virtual care program requires time, research, and evaluation. But it's worth it for organizations that want to ensure an ROI.

The 2023 Virtual Care Landscape

Despite a decline in use from the early days of the pandemic, virtual care is here to stay. Patients will continue to use it as a complement to—or, in some cases, a replacement for—in-person visits.

The 2023 virtual care landscape will look different than it did during the height of the pandemic. The technology will become easier for patients and providers to use⁵. The early days of the pandemic presented connection issues and a lack of education. Three years later, patients and providers are more comfortable with the basics of virtual care visits. As the technology improves, healthcare organizations will be able to reach even more patients.

Patients will also shift from using virtual care for urgent care visits to chronic care. The modality will increasingly be held to the same standards as in-person care⁶. This requires providers to prioritize patient engagement and streamline the virtual care experience.



A Blueprint for Virtual Care Programs

The “DIBS” model offers a framework providers can use for their virtual care programs⁷.



Documentation

Identify and document the roles and interdependencies of everyone involved in a virtual care appointment. Categorize activities as before, during, and after the visit.



Integration

Integrate the component parts of a virtual care visit to ensure a streamlined experience. This includes preparing both parties to use the technology required. It also includes integrating prescription refills, capturing PHI, and scheduling future appointments.



Best practices

Implement best practices using evidence-based decision-making, provider and patient education, and whole care team involvement.



Support

Invest in strong support systems for virtual care visits for patients and providers. This includes the surrounding infrastructure. Implement chatbots or clinical decision support algorithms to provide evidence-based guidance.

This framework is not meant to be one-size-fits-all. But it provides healthcare organizations with a blueprint they can tailor to their needs. This framework can be used in tandem with specific KPIs and metrics to ensure the program's success.



Determining the Correct Metrics to Track

It is critical to identify goals early in the process of designing a virtual care program. Metrics like visit volume are important, but so are patient satisfaction and improved health outcomes.

One way to determine which metrics to track is to look at the Quadruple Aim of Healthcare:

- Reducing costs
- Improving population health
- Patient experience
- Team well-being

Metrics related to reducing costs can include reducing no-shows or improving payment collection.

One study found that no-shows cost the healthcare system more than \$150 billion per year⁸. In 2020, collection agencies held \$140 billion in unpaid medical bills⁹. Virtual care can reduce costs for patients by eliminating factors such as travel expenses or time off from work.

Patient experience metrics might look at improved patient satisfaction and engagement. Team well-being metrics could include provider satisfaction and reduced absenteeism.



KPIs of a Successful Virtual Healthcare Program

Here are the most important KPIs to keep in mind to determine if your organization's virtual care program is sustainable and scalable.

Reduced No-show Percentage

Nearly 30% of patients miss scheduled appointments each year due to several factors. These include transportation issues, lack of childcare, or inability to get time off from work. Repeated missed appointments can adversely affect a patient's health. It can also lead to increased healthcare expenses later on.

Virtual care is convenient for patients and reduces the risk of no-shows.

Patient engagement platforms like Mend help reduce no-show rates for virtual care appointments. In 2022, the U.S. average no-show rate was 23%, while the Mend average no-show rate was just 7.4% ¹⁰.

Strategies for reducing no-shows can include automated appointment reminders and patient self-scheduling. Patients are 50% less likely to no-show if they are able to schedule their own appointments¹¹. AI can further reduce the risk of no-shows.

Improved Telehealth Connection Quality

A major challenge patients and providers face with virtual care is technical issues. Healthcare organizations must make it as easy as possible for patients to log in to their appointment. One way to do this is by removing additional steps that may introduce friction. This can include requiring an app download or signing into a patient portal.

Mend provides patients with a link to their appointment, which they authenticate with their date of birth. No special software is needed. Additionally, Mend can maintain audio and video connections as low as 50 Kbps. Mend had an average bitrate of 699.7 Kbps in 2022—up from 464.5 Kbps in 2021—ensuring a high-quality and seamless visit.

Increased Patient—and Provider—Satisfaction

Ensuring a successful virtual healthcare program means prioritizing patient satisfaction. If patients have a bad experience, they won't return to that provider. But patient satisfaction doesn't just affect retention. It can also impact adherence to medication and treatment plans. These factors can then affect health outcomes.

The National Library of Medicine reports that 82.7% of patients are satisfied with the telehealth experience. Mend, however, has the only 5-star telemedicine patient satisfaction experience with a 96% patient satisfaction rate (4.78/5). Mend also has a 93% provider satisfaction rate (4.64/5), and a 98% provider retention rate after ~20 telehealth visits.

Reduced Wait Times

On average, patients wait 15 to 20 minutes for their appointment. In-person wait times can vary significantly if there are provider shortages or if a previous appointment runs long. The longer patients have to wait, the more likely they are to leave without being seen by their doctor.

Mend reduces the average wait time for virtual visits to 10:20 minutes. A Netflix-style library in the virtual waiting room engages patients with educational content. Providers can use pre-populated content or upload their own to help patients get healthier while they wait.

Enhanced Risk Identification and Management

AI can accurately predict which patients will no-show for their appointments. It can also identify connectivity issues. AI can generate a risk score for patients based on several factors.

These include past video visit counts, successful connection tests, and patient engagement. Providers can use these risk scores to help patients improve their connection.

Conclusion

The COVID-19 pandemic provided a catalyst for widespread virtual care adoption. While its use might look different in 2023, it is still a worthwhile investment for healthcare organizations. Defining what a successful program looks like reduces inefficiencies or a low ROI. A successful virtual care program should also scale with patient load.

If you're ready to take the first steps toward implementing a successful virtual care program, schedule a demo with Mend today.



References

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About Mend

Mend is an enterprise-grade patient engagement and telehealth platform designed to help healthcare organizations profitably scale their practice and care for more patients.

Founded in 2014, Mend is on a mission to revolutionize healthcare delivery so that every patient can receive extraordinary care. Mend makes it easy for healthcare providers to securely and efficiently communicate with their patients and colleagues, without concerns of violating HIPAA compliance or misplacing patient information. Mend provides integrated in-office and virtual care experiences for over 100 specialties with more than 5 million patients.

Mend's comprehensive platform works hand-in-hand with all major EHR and PMS software to facilitate more than 400,000 telehealth visits per month, increase patient satisfaction by up to 23% reduce no-show rates as low as 4%, radically improve staff productivity, and help providers drive more revenue through better patient attendance.

