

The 3 Primary Reasons Health Systems Are Losing Gains in Virtual Care

Executives at leading healthcare organizations recently shared the main factors that are inhibiting digital success. Contrary to popular opinion, consumer demand and technology limitations were not among them.

LOOKING WITHIN: THE REAL ROADBLOCKS ARE LARGELY INTERNAL

Several dozen C-suite executives from leading health systems around the country met virtually in December 2020 to share perspectives and lessons learned from deploying and scaling-up virtual care in the context of the COVID-19 pandemic, as well as their path forward as they push digital initiatives ahead in 2021 and beyond.

Everyone acknowledged losing some of the virtual care gains made in the first half of 2020, but almost no one pointed to a lack of consumer demand or technology limitations as the primary impediments. Rather, the barriers consistently cited were internal organizational issues that must be addressed before virtual care can become a truly valuable and scalable integrated facet of the healthcare delivery ecosystem.

Three factors emerged as primary impediments:

1. **Unchanged clinical and administrative processes**

While technology capabilities were rapidly adopted in response to the pandemic, clinical and administrative processes often were not sufficiently transformed to maximize the potential benefits. Executives shared that most of the issues impeding retention of their digital gains are related to processes that are not aligned with new technology.

2. **Lack of support from clinicians**

Executives shared that in many cases the choice about whether or not to offer digital options to patients is being left to individual physicians. In that context, and perhaps exacerbated by unchanged business and operating processes, many are opting to return to principally (or exclusively) in-person care.

3. **Unclear organizational accountability and oversight**

While there was an initial sense of accomplishment during the first COVID surge, lack of clear, accountable enterprise decision-making, operational oversight, and specific measurable goals related to virtual care adoption later resulted in organizational "turf wars" and "finger-pointing." Executives noted that while there was consistent support for virtual care at a high level, a lack of clarity around priorities and structure was impeding success.

CONSENSUS ON A PATH FORWARD

Where do we go from here? Executives agreed that a transformational redesign is necessary, from the ground up. Virtual care modalities and supporting digital capabilities need to be integrated components of care delivery, not isolated, stand-alone functions. Providers now must do the hard work to fundamentally redesign care delivery and evolve their organizational culture to support the new (digital) normal and make healthcare access, delivery, outcomes, and experience better for everyone.