

2024 VIZIENT CONNECTIONS SUMMIT

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Moving Virtual Visits Beyond the Trough of Disillusionment

Bryan Beaumont, DO, MS, Medical Director of Digital Operations, Froedtert and the Medical College of Wisconsin, Milwaukee, Wis.

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Learning Objectives

- Identify three strategies to increase virtual visits in primary care
- Describe methods to reduce provider burnout associated with portal message management

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Moving Virtual Visits Beyond the Trough of Disillusionment

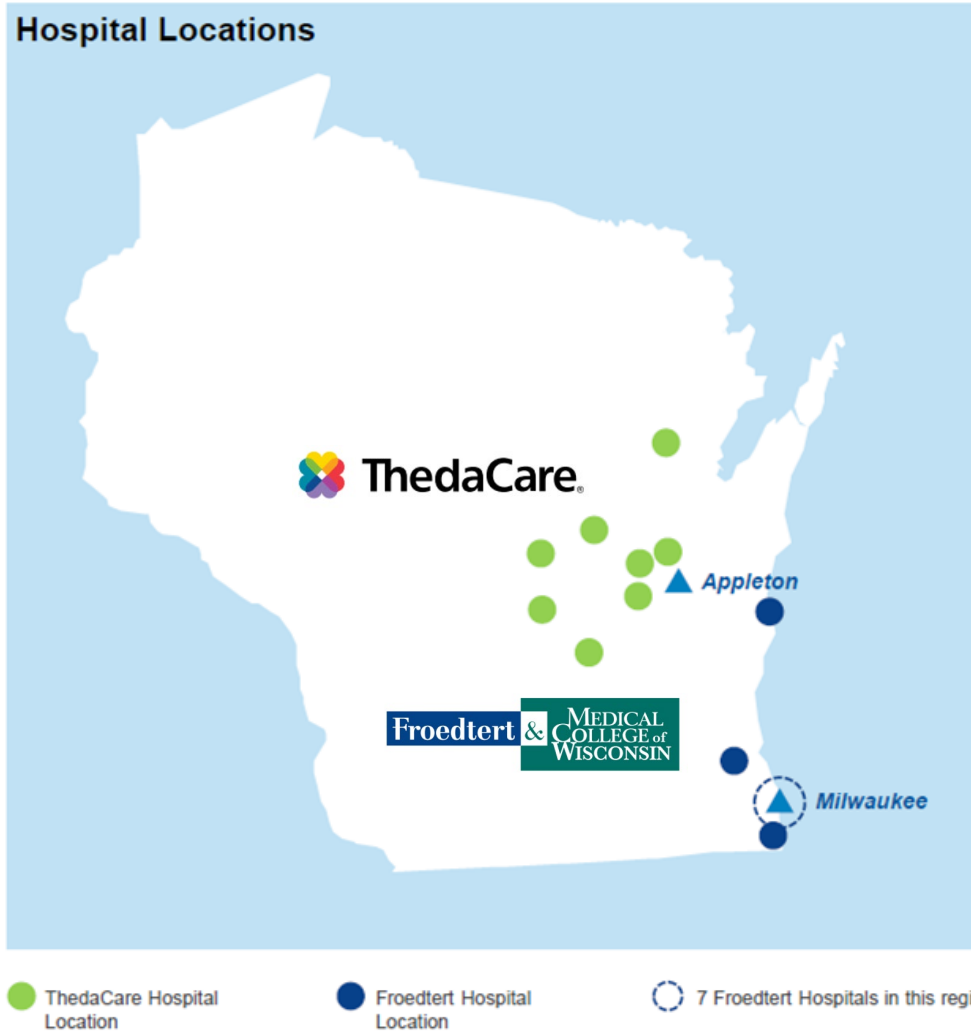
Bryan Beaumont, DO, MS, Medical Director of Digital Operations, Froedtert and the Medical College of Wisconsin, Milwaukee, Wis.

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 **22,000+**
Employees

 **18**
Hospitals


 **3,400+**
Providers

 **360+**
Outpatient
Locations

 **87,200+**
Patient
Admissions

 **1,700+**
Staffed
Patient Beds

 **2.5%**
Operating
Margin

 **\$160M**
Operating
Income

 **\$6.4B**
Net Revenue

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Community Physicians

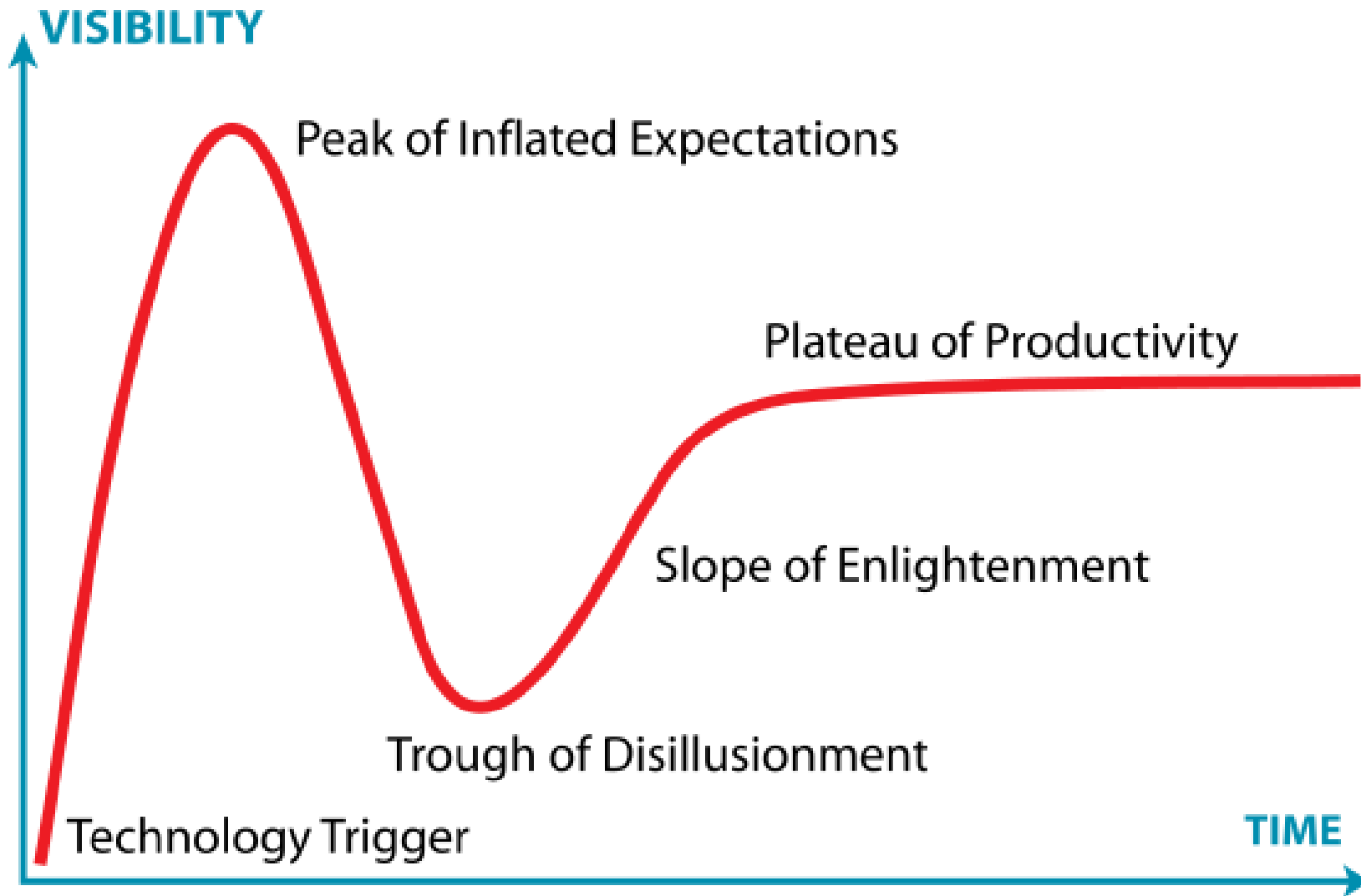
2024 **Fact Sheet**

Vital Statistics





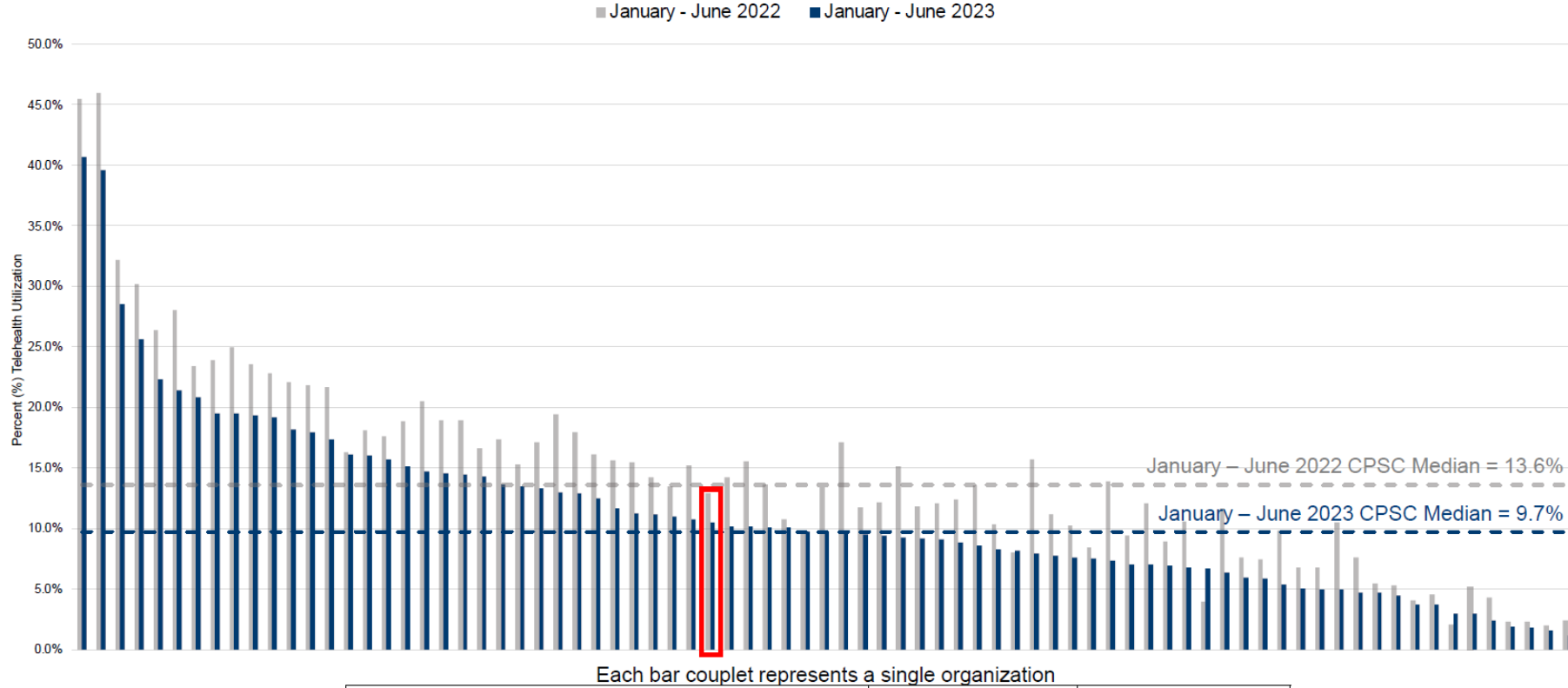
Gartner Hype Cycle



National Trend



Telehealth E/M Use Across CPSC Organizations
 January - June 2022 vs. January - June 2023
 n=79, each bar couplet represents a single organization



	January – June 2022	January – June 2023
Medical College of Wisconsin Red Box	12.9%	10.5%
CPSC Average	14.5%	11.3%

AAMC-Vizient Clinical Practice Solutions Center
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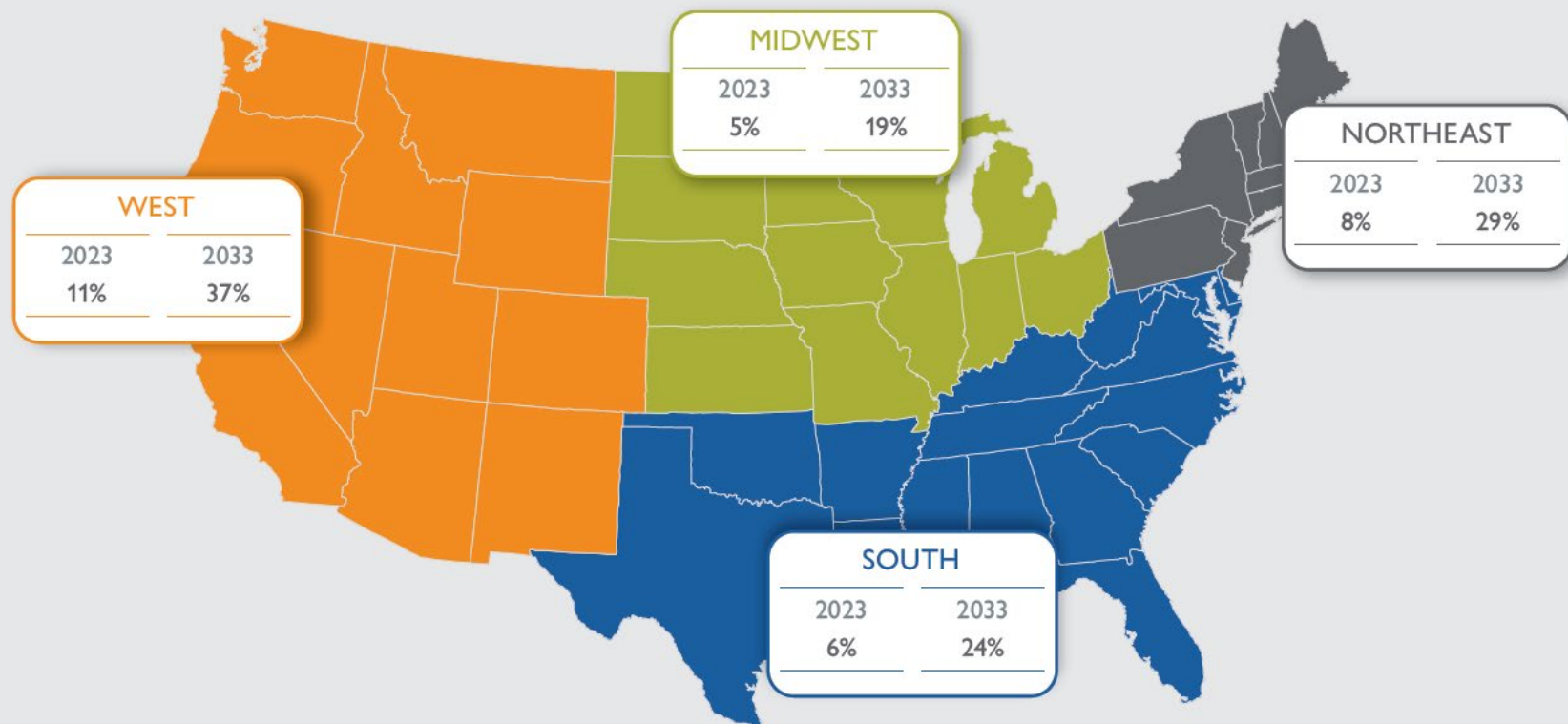


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The Trough

After Recalibration Post-Pandemic, Virtual Visits are Forecasted to Grow

Virtual Visits as a Percentage of Total E&M Visits by US Region



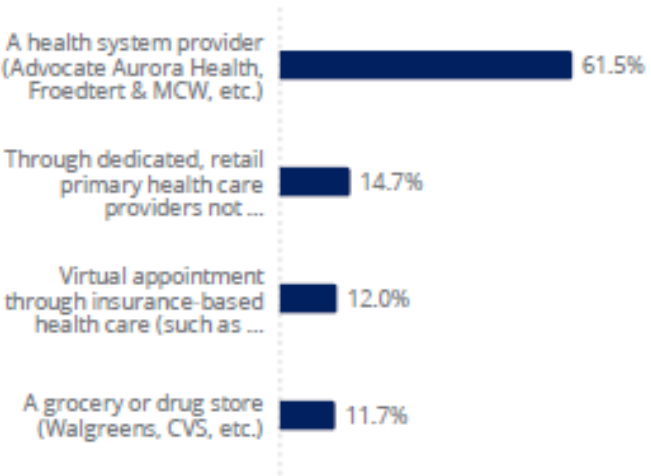
Note: Analysis excludes 0–17 age group. Virtual visits defined as Established Patient Visits—Virtual and New Patient Visits—Virtual. In-person visits defined as Visits—Evaluation and Management, Established Patient Visits—In Person and New Patient Visits—In Person. **Sources:** Impact of Change®, 2023; Proprietary Sg2 All-Payer Claims Data Set, 2021; The following 2021 CMS Limited Data Sets (LDS): Carrier, Denominator, Home Health Agency, Hospice, Outpatient, Skilled Nursing Facility; Claritas Pop-Facts®, 2023; Sg2 Analysis, 2024.

- Increase in patients seeking digital health through competitors
- Goal to expand primary care access without expanding our brick-and-mortar footprint
- Decreasing provider satisfaction with increased time spent addressing electronic medical record portal messages

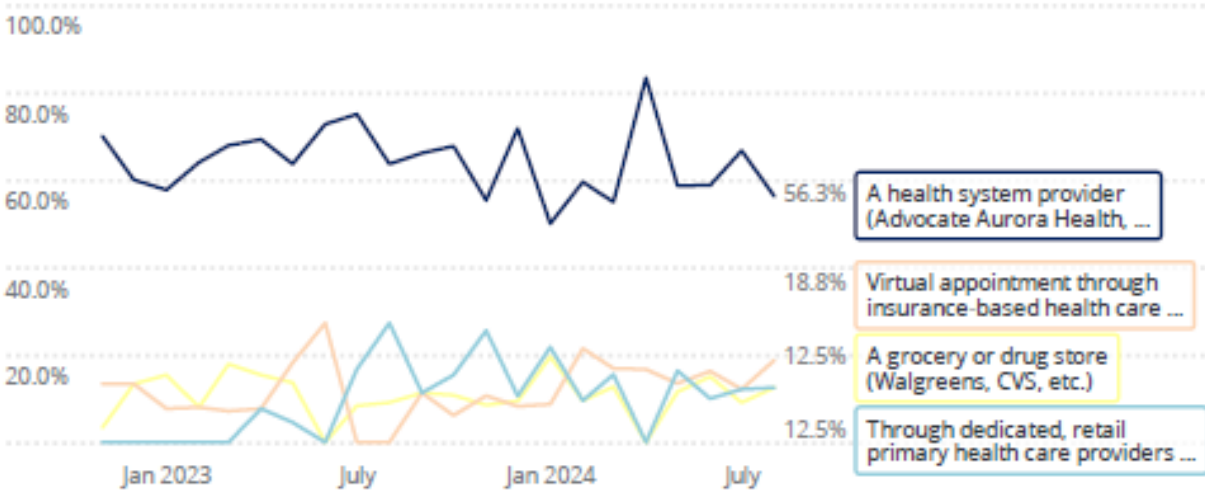
Telehealth Appointments Past 6 Months

n – Respondents who had completed a telehealth appointment in the previous month
Click on the widget description (‘i’ icon) to see widget details

Most Recent Telehealth Appointment 631 ⓘ



Most Recent Telehealth Appointment Trending ⓘ



Competition

Amazon closes \$3.9B One Medical deal as it builds out healthcare strategy

By Heather Landi · Feb 22, 2023 09:15am

Costco expands healthcare footprint, teams up with Sesame to offer members \$29 virtual care visits

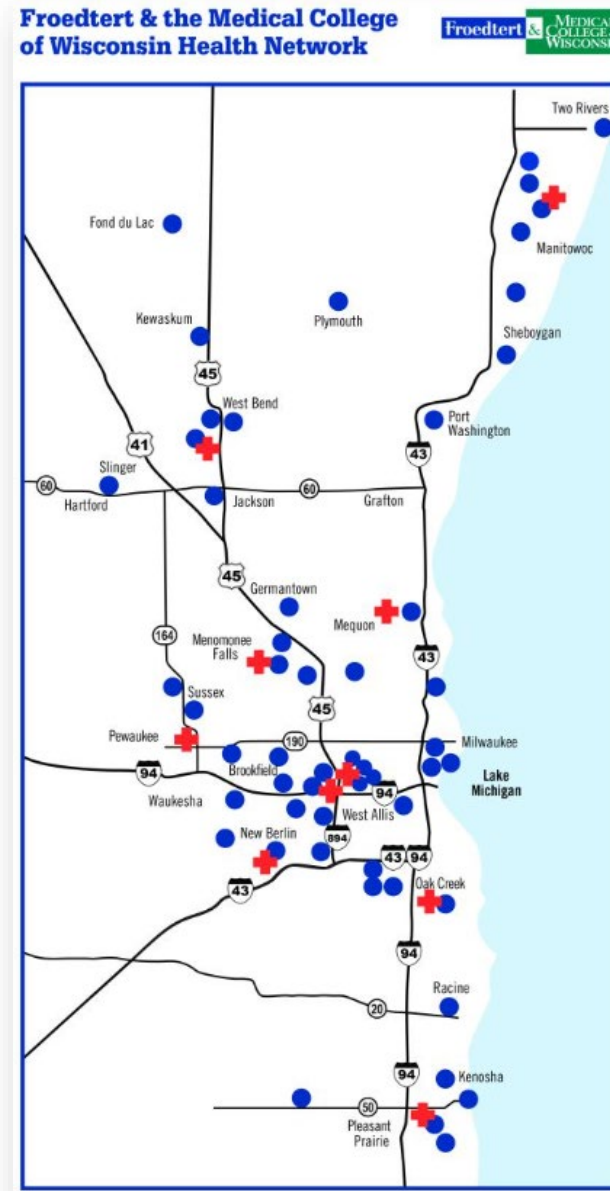
By Heather Landi · Sep 25, 2023 01:00pm

ProHealth Care taps Optum for strategic technology partnership

By Paige Minemyer · Oct 4, 2023 04:55pm

Expansion

- Ambulatory Network Expansion Strategy



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Portal Messages

$$\frac{\text{Messages}}{\text{Amb Visit}} = 10 \text{ to } 1$$

Interventions

- Virtual template blocks
- Staff brown bag sessions
- Provider follow up button/order
- Portal message to virtual visit

Interventions - Blocks

- Make it visible
- Make it easy

11a	1	11:00 a	📅	Virtual
	1	11:15 a	📅	Virtual
	1	11:30 a	📅	Virtual
	1	11:45 a	📅	Virtual
12a				



Interventions - Brown bag

- Make it visible
- Make it easy

PRIMARY CARE CONDITIONS PREFERRED TO BE OFFERED VIRTUALLY (*applies to ALL PCPS*)

Common Ailments	Behavioral Health	Gastrointestinal	Skin & Nails
• Allergies	• ADHD	• Diarrhea	• Acne, lesions
• Cold	• Anxiety	• Heartburn/GERD	• Athlete's foot
• Cough	• Depression	• Nausea	• Cold sores
• Covid follow-up	• Smoking cessation	• Upset stomach	• Ingrown nail
• Fever (age 2+)	• Stress	• Vomiting	
• Headaches/migraines			
• Sore throat	High Risk Hospital Follow-ups in 7 days		Other Problems
• Stuffy nose			
	Weight Management	Men's Health	• Eye irritation/pink eye (age 2+)
		• Erectile dysfunction	• Insect bites/stings
	Medicine Check		• Minor burns
Other	• If seen by physician within past year	Women's Health	• Minor cuts/scrapes
• Forms completion	• Contraception management	• Urinary tract infection (bladder)	
		• Yeast infection	

Highlighted yellow = Subset of 7 conditions to be
 "Virtual by Default" for EST patients

*In addition, anytime a patient requests a virtual visit we will grant their request
 Document as "patient requested virtual"*

Interventions - Brown bag

- Make it visible
- Make it easy

Decision Tree for DT PRIMARY CARE

Per the screening of incoming emergencies document, does patient have any of the urgent concerns that require nurse triage? Yes No
Copy and paste this link in your browser to view the screening document:... [see more](#)

Is the patient: Looking to establish with a new primary care provider/care team Scheduling first visit after their primary care provider left/retired Neither

Which is the most appropriate reason for your visit? One concern

Has the patient expressed urgency for any of the following concerns: back pain, diarrhea, red eye, urinary tract infection, vaginal discharge/irritation, headache, pregnancy prevention, cough No

Is the patient coming in for an acute concern? Yes No

Are you currently experiencing a concern related to: ADHD, anxiety, depression, stress, smoking cessation (quitting smoking), or medication check? Yes No

Your Primary Care Provider prefers to see patients virtually for this condition. You will receive instructions on how to do the virtual visit in MyChart. Virtual visits save time and travel and can provide sooner availability. I will look at the schedule for virtual openings. Patient accepts Patient declines

Which state will you physically be located in at the time of the scheduled visit? Wisconsin Other

*Wisconsin or Other. Patients location at time of appointment may make them ineligible for a virtual visit.

Results - Continue Scheduling

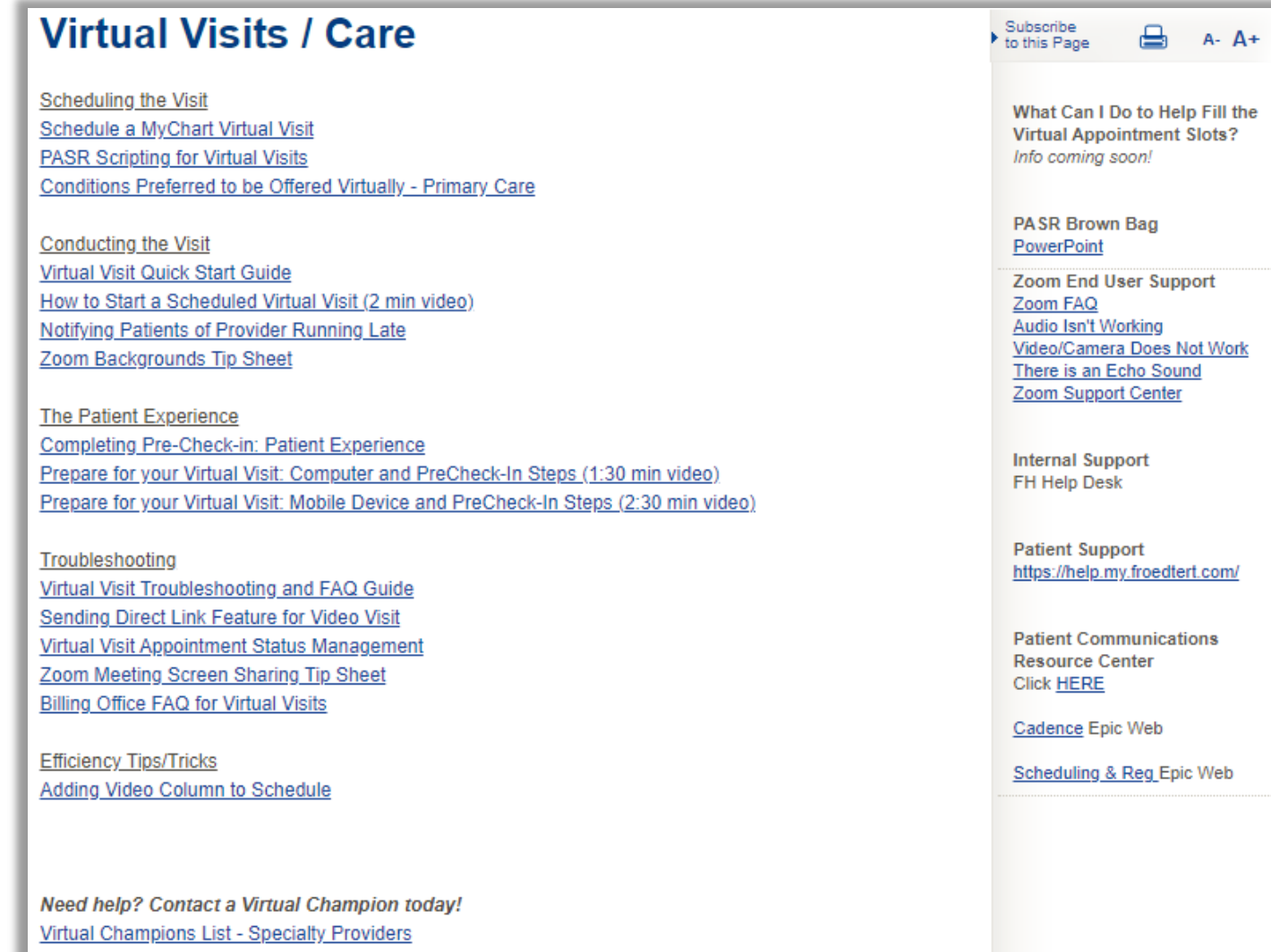
Visit: PCP VIRTUAL VISIT EST

Replace the original visit type.

Show Path Apply Discard Tree

Interventions - Brown bag

- Make it visible
- Make it easy



Virtual Visits / Care

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[Scheduling the Visit](#)
[Schedule a MyChart Virtual Visit](#)
[PASR Scripting for Virtual Visits](#)
[Conditions Preferred to be Offered Virtually - Primary Care](#)

[Conducting the Visit](#)
[Virtual Visit Quick Start Guide](#)
[How to Start a Scheduled Virtual Visit \(2 min video\)](#)
[Notifying Patients of Provider Running Late](#)
[Zoom Backgrounds Tip Sheet](#)

[The Patient Experience](#)
[Completing Pre-Check-in: Patient Experience](#)
[Prepare for your Virtual Visit: Computer and PreCheck-In Steps \(1:30 min video\)](#)
[Prepare for your Virtual Visit: Mobile Device and PreCheck-In Steps \(2:30 min video\)](#)

[Troubleshooting](#)
[Virtual Visit Troubleshooting and FAQ Guide](#)
[Sending Direct Link Feature for Video Visit](#)
[Virtual Visit Appointment Status Management](#)
[Zoom Meeting Screen Sharing Tip Sheet](#)
[Billing Office FAQ for Virtual Visits](#)

[Efficiency Tips/Tricks](#)
[Adding Video Column to Schedule](#)

Need help? Contact a Virtual Champion today!
[Virtual Champions List - Specialty Providers](#)

What Can I Do to Help Fill the Virtual Appointment Slots?
Info coming soon!

PASR Brown Bag
[PowerPoint](#)

Zoom End User Support
[Zoom FAQ](#)
[Audio Isn't Working](#)
[Video/Camera Does Not Work](#)
[There is an Echo Sound](#)
[Zoom Support Center](#)

Internal Support
FH Help Desk

Patient Support
<https://help.my.froedtert.com/>

Patient Communications
Resource Center
Click [HERE](#)

[Cadence](#) Epic Web
[Scheduling & Reg](#) Epic Web

Interventions - Brown bag

- Make it visible
- Make it easy



Virtual Visit Rooming Process

- Virtual Visits (telephone/video) - follow same standard rooming process without obtaining vital signs



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Virtual Visit Rooming Process

Virtual Visit Standard Rooming Observation Checklist	
Employee Name:	
Observation:	
Date:	
Start Observation Time:	
End Observation Time:	
Patient Appointment Time:	
Start of Rooming Process Time: (Staff contacts patient)	
End of Rooming Process Time: (Staff hands off vital sign to provider)	
Rooming Process Steps (Does not need to be in exact order)	Check if Step Observed
Staff finds quiet and private space for virtual visit using iPad or computer with camera	
Patient completes eCheck-in	
Staff reviews Visit Checklist and checks provider's schedule for patient "online" status	
Staff connects to patient visit if patient is "online" (checks for green camera icon) or staff calls patient if patient is not connected	
Uses AIDET communication framework to introduce self	
Actively verifies two patient identifiers	
Completes Chief Complaint/Reason for Visit	
Reviews Pain score (if applicable)	
Reviews Tobacco and E-cigarettes/Vaping section (Reviews every 12 months per Visit Checklist)	
Reviews Alcohol Usage (Question within history section and alcohol screening section-reviews every 12 months per Visit Checklist)	
Reviews Drug Usage (Reviews every 12 months per Visit Checklist)	
Reviews Allergy list (Name and reaction, including food, OTC (Over-the-Counter), dye, environmental, etc.)	
Reconciles outside allergies (if applicable)	
Reviews medication list (medication name, dosage, route, frequency for all medications including OTC medications and herbal supplements)	
Reconciles outside medication (if applicable)	
Reviews pharmacy	

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Interventions - Follow-up



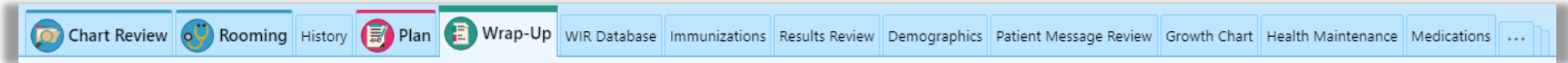
“This relationship and trust between patient and provider is key to patient adoption of telehealth; if providers suggest and encourage telehealth visits to patients, then patients typically will embrace telehealth”.

AAMC Vizient (2023, March). Effective Strategies for Sustaining and Optimizing Telehealth in Primary Care. Effective Strategies for Sustaining and Optimizing Telehealth Knowledge Transfer Webinar FINAL.pdf

REFLECTION

Interventions - Follow-up

- Make it visible
- Make it easy



Follow-up

Return in: (from 2/12/2024)

4 Weeks 3 Months 6 Months 1 Years

Days Weeks Months Years

Return on: Approximately

PRN

For: In person visit Virtual visit Virtual or in person visit

Interventions - Follow-up

- Make it visible
- Make it easy

▼ Clinic follow up appointment request

Primary Care Follow-Up Appt Request ✓ Accept ✗ Cancel

Reason for follow-up: Preventive Visit
Type of visit: Routine Preventive (RPV)/Medicare Wellness (AWV)
Visit Method: Patient Preference
Who is the follow-up with? Myself
Patient Instructions for labs: No Labs

Status: Normal Standing Future

Expected Date: 8/9/2025 First Available 2 Weeks 1 Month 3 Months 6 Months 1 Year Approx.

Expires: 2/8/2026 1 Month 2 Months 3 Months 4 Months 6 Months 1 Year 18 Months

Priority: Routine ASAP

Reason for follow-up: Follow-Up Preventive Visit Procedure Clinical Support In-Clinic PreOp Pregnancy
 Transfer Care/Re-Establish Home Health Visit Memory Care (Geriatric Only)

Type of visit: Routine Preventive (RPV)/Medicare Wellness (AWV) Well Child/Adolescent Pap Smear

Visit Method: Patient Preference Virtual In-Person

Who is the follow-up with?
 Myself PCP Clinic/Care Team Clinic Assist Specific Provider

Follow up details:

Patient instructions for labs:
 Fasting Labs Non-Fasting Labs No Labs

Pre-Visit Labs:
 Basic Metabolic Panel Complete Blood Count & Differential Comprehensive Metabolic Panel
 Glucose Fasting Hemoglobin A1C Hepatic Function Panel Lipid Panel Reflex Magnesium
 Microalbumin Urine Random Phosphorus Prostate Specific Antigen Screen
 Thyroid Stimulating Hormone Reflex Uric Acid Vitamin B12 Vitamin D 25-Hydroxy
 See Scheduling Instructions for other labs or diagnoses

Scheduling Instructions: Insert SmartText 100%

✓ Accept ✗ Cancel

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Interventions - Message -> Virtual Visit

- Make it visible
- Make it easy

We appreciate you reaching out to us. After reviewing your concern, Dr. [***] would recommend you schedule a virtual visit to have this concern most appropriately addressed by [***] on our team. At this time, currently we have openings to offer this visit. Please respond to this MyChart conversation or contact us promptly at [***]-[***]-[***] and ask to speak to Dr. [***]'s nursing team to confirm you would like to schedule this virtual visit. Thank you!

Interventions - Message -> Virtual Visit

- Make it visible
- Make it easy

■ [REDACTED]
would there be a way for the primary care RN triage team to use one of the referral orders to trigger a ticket to a patient to schedule a video visit? this came up with the the thought that either when they are responding to a MyChart message or if they are on a call and it warrants a video visit that they could send a ticket. Thoughts?

■ [REDACTED]
Yes, mam! The RN triage staff will create a follow up order in the event they are communicating with the patient in mychart and it warrants an appointment. They will have the opportunity to determine if it should be virtual or inperson...or allow the patient to decide

Interventions - Message -> Virtual Visit

- Make it visible
- Make it easy

▼ Clinic follow up appointment request

Primary Care Follow-Up Appt Request Accept Cancel

Reason for follow-up: Preventive Visit
Type of visit: Routine Preventive (RPV)/Medicare Wellness (AWV)
Visit Method: Patient Preference
Who is the follow-up with? Myself
Patient instructions for labs: No Labs

Status:

Expected Date: 8/9/2025 Approx.

Expires: 2/8/2026

Priority:

Reason for follow-up:

Type of visit:

Visit Method:

Who is the follow-up with?

Follow up details:

Patient instructions for labs:

Pre-Visit Labs:
 Basic Metabolic Panel Complete Blood Count & Differential Comprehensive Metabolic Panel
 Glucose Fasting Hemoglobin A1C Hepatic Function Panel Lipid Panel Reflex Magnesium
 Microalbumin Urine Random Phosphorus Prostate Specific Antigen Screen
 Thyroid Stimulating Hormone Reflex Uric Acid Vitamin B12 Vitamin D 25-Hydroxy
 See Scheduling Instructions for other labs or diagnoses

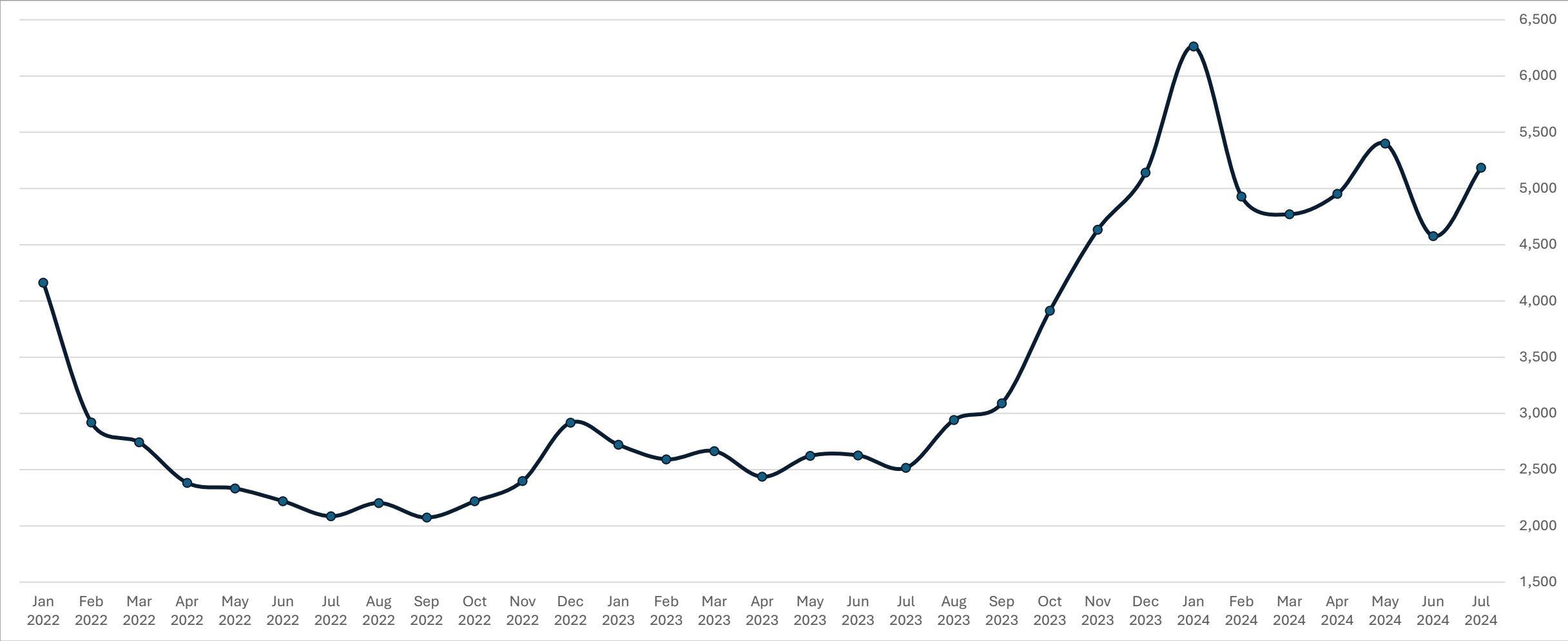
Scheduling Instructions:

Accept Cancel

Outcomes

- Virtual visit volume
- Patient access
- Portal message volume

Outcomes – Virtual Visit Volume

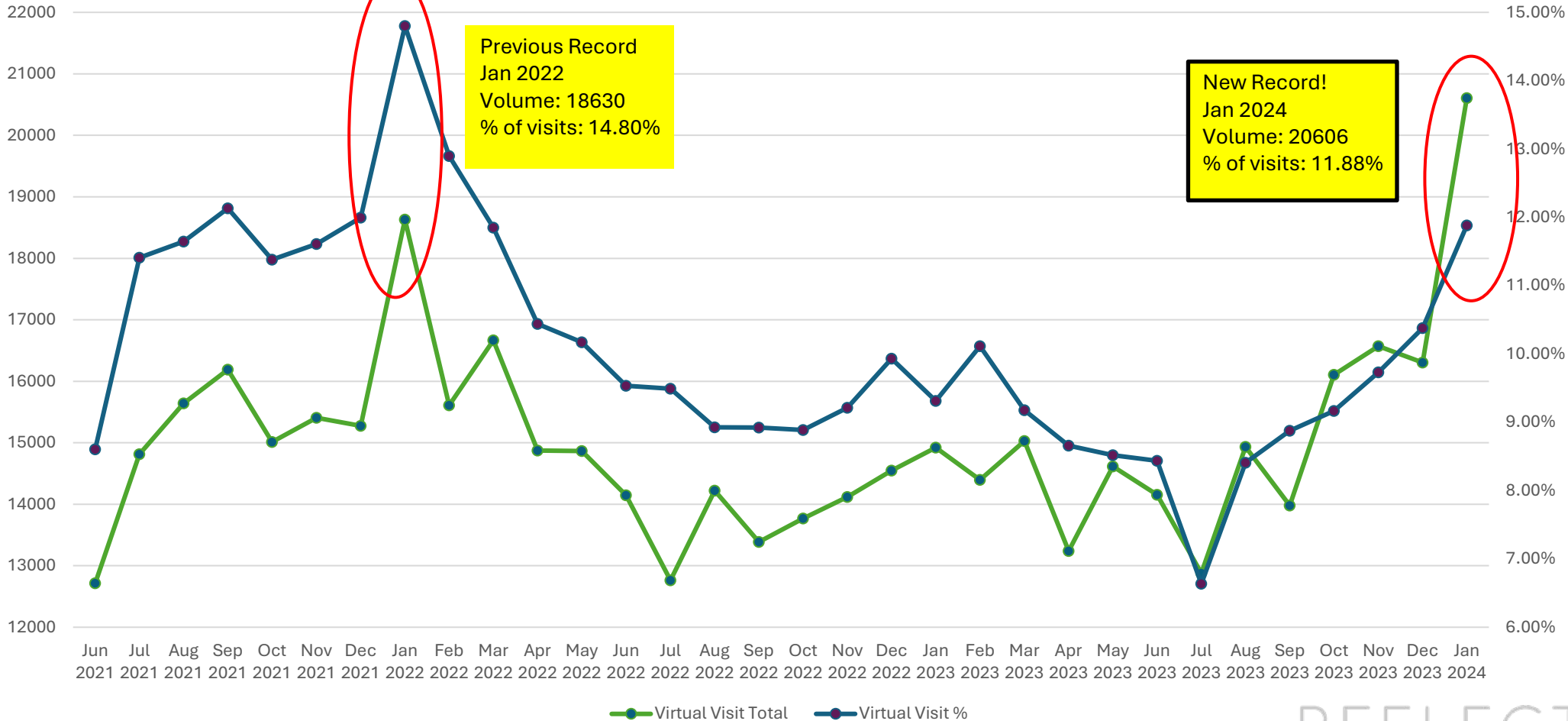


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Outcomes – Virtual Volume vs Percent of total visits



Total Virtual vs % Virtual



Outcomes - Access

- New patients seen in 10 days increasing from 57.9% in July 2023 to 68.7% in January 2024
- Virtual appointment slots on provider schedules increased by 145% from July 2023 to January 2024 while the proportion of unused virtual slots decreased by 25%
- New patients to our health system self-schedule a virtual appointment with a 12-month improvement from 14.1% to 75.9%

Outcomes – Message Volume

- Realized a 50% improvement in reduction of portal messages sent to providers vs control and a 62% increase in the percent of visits done virtually in pilot vs control group

Lessons Learned

People:

- More cultural “lift” than technical “lift”, first understand their concerns/goals and then look to how virtual can support
- Required ongoing re-education of the processes involved

Process:

- Having the right data to track change and identify opportunities

Technology:

- Technical products/process change more rapidly, need plan to stay current

Key Takeaways

Top 3 Suggestions:

- Utilize virtual blocks to increase access to virtual care
- Have a well defined process to convert patient portal messages to video visits
- Data analytics to measure the success of interventions

Closing Reflection

“Our dilemma is that we hate change and love it at the same time; what we really want is for things to remain the same but get better.”

Sydney J. Harris
Journalist Chicago Sun-Times

Questions?

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