# Telehealth Index: 2019 Physician Survey

## American Well®

## Telehealth Index: 2019 Physician Survey

### Here's what we found:

- 1. Physician telehealth adoption is up 340%
- 2. Willingness to use telehealth is up to 69% from 57% in 2015
- **3**. Access is a key driver of telehealth adoption
- **4.** There is a high correlation between burnout and interest in telehealth
- 5. By 2022, between 340,000 and 590,000 physicians expect to be using telehealth
- 6. While most physicians use telehealth occasionally, by 2022 over half say they will use it frequently

American Well's new physician survey finds that physician telehealth adoption is at an inflection point. This shift in readiness is driven by physicians' desire to improve patient access to care, improve patient outcomes, and attract and retain patients. Coupled with a more promising reimbursement landscape and health systems' vision to expand telehealth use, this accelerated provider adoption will fuel telehealth's enormous growth in the future.

With these new survey results, American Well has gained better insight into physician sentiments toward telehealth and why adoption is set to expand rapidly.

The survey, which polled 800 physicians across the United States, was fielded in December 2018 by M3.



### Physicians are more willing to try telehealth

More than three-fourths of U.S. hospitals are currently using or implementing a telehealth program.<sup>1</sup> As telehealth becomes more commonplace in hospitals across the country, physicians are more willing to use the technology. A total of 69% of physicians said they would be willing to use telehealth, up from 57% in 2015. This increase in physician willingness is the result of a decrease in the number of physicians who are unsure about telehealth. There is a subset of physicians who were resistant to telehealth in 2015 and remain reluctant to the technology.



Age could be a factor in physicians' increased willingness to use telehealth. Interestingly, newer physicians (aged 25-34) were somewhat less willing to use telehealth compared to other young physicians (aged 35-44), possibly because these physicians are still learning their craft and thus less confident about new technology. But overall, younger physicians are more willing and less unsure about telehealth compared to older physicians. As older physicians retire, we expect physician willingness to continue to increase, and uncertainty and resistance to decrease.



### Physicians' reasons for being willing to see patients via telehealth include:



**Increase access for patients:** Telehealth allows physicians a new level of access to patients — and patients a new level of access to providers. With video visits, distance and time are no longer barriers to care.



**Flexible work-life balance:** Physicians remain attracted to a more flexible work-life balance to combat burnout. Telehealth allows physicians to work remotely and maintain flexible hours while upholding a high quality of care delivery.



Attract and retain new patients: Physicians found video visits appealing for creating a convenient, patient-centric care option that would help them increase their patient base and prevent leakage.



**Improve patient outcomes:** By offering more timely, consistent and appropriate access to care through video visits, physicians believe telehealth could have a positive impact on patient outcomes.



To be on the leading edge of medicine: Many physicians see video visits as the next advancement in medicine, and they want to be at the forefront of the telehealth movement.

### Adoption of telehealth has increased significantly

While most physicians are open to using telehealth, adoption of video visits is still growing. A total of 22% of physicians have used telehealth to see patients, up 340% from 2015 when only 5% of physicians reported having ever used telehealth. When compared to the early adoption days of the electronic health record (EHR), telehealth's adoption growth becomes even more striking. In a similar three-year span—2003 to 2006—EHR adoption among office-based physicians only increased by 68%.<sup>2</sup> While it's impossible to predict if telehealth will become as ingrained in physicians' day-to-day operations as the electronic health record is today, it's evident that physicians are quicker to adopt telehealth than they were the EHR.





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### Physicians who have used telehealth report value, including:

**Improved patient access to care:** Many patients, especially those living in rural areas, lack access to quality healthcare—more specifically, specialty care. Often, providers or patients need to travel long distances to provide or receive specialty care, and if patients are left untreated, it can lead to exacerbation of illnesses. Providers like Dr. Jennifer McWilliams of Children's Omaha are using telehealth to provide patients with better access to care. With limited pediatric psychiatry resources in Nebraska, patients were driving up to six hours roundtrip for a 20-minute follow-up appointment. Through Children's telepsychiatry program, Dr. McWilliams conducted more than 600 remote visits, saving 26 hours of driving time per week, and reducing no-show rates for follow-up appointments by 50% in one year.<sup>3</sup>

**More efficient use of time:** By decreasing travel times and increasing provider productivity, telehealth allows physicians to be more efficient in their care delivery. BayCare Health System, a healthcare system headquartered in Clearwater, FL, launched a virtual wound care program to help increase internal efficiencies for its wound care specialists. Through this program, BayCare has seen an 85% reduction in wound care consult wait times and has been able to increase the number of patients seen per week by 500%.<sup>4</sup>

**Reduced healthcare costs:** Health systems and health plans have seen cost savings associated with their telehealth programs. Intermountain Healthcare, an integrated health system in Utah, performed a claims analysis of its telehealth program, Intermountain Connect Care, and found a \$367 savings per claim for telehealth.<sup>5</sup>

**High-quality communications with patients:** Providers communicate with their patients via video in much the same way they do in person. They can evaluate patients, diagnose illnesses, prescribe medication and schedule follow-up appointments. Both providers and patients agree that telehealth is a great communications tool. In fact, 97% of patients who have utilized Nemours Children's Health System's telehealth program are "highly satisfied" with the service.<sup>6</sup>

**Enhanced doctor-patient relationship:** Physicians found that connecting with patients remotely actually enhances the provider-patient relationship. Southwest Medical Associates (SMA), a multispecialty medical group that is part of United Nevada, released a study on virtual visits for upper respiratory tract infections. In the study, SMA found that virtual visits produced a high patient satisfaction score (95%) compared to in-person care (85%).

Of the Physicians Who Have Used Telehealth:



SAID IT CONTRIBUTES TO A MORE EFFICIENT USE OF TIME FOR DOCTOR AND PATIENT

SAID IT HELPS REDUCE HEALTHCARE COSTS

**71%** SAID IT ENABLES HIGH-QUALITY COMMUNICATION WITH PATIENTS

**60%** SAID IT ENHANCES THE DOCTOR-PATIENT RELATIONSHIP

### Specialists want to use telehealth—especially those who are burnt out

Historically, video visits were used almost exclusively to treat urgent care conditions. However, as more specialists adopt telehealth, the range of services offered via video will drastically expand. Specialists most willing to practice via telehealth are also among the most burnt out. The top specialities willing to practice via telehealth include:



The Correlation Between Burnout Rate and Willingness to Use Telehealth
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SPECIALTY	REASONS FOR BURNOUT	HOW TELEHEALTH CAN HELP
UROLOGY	Urologists have the highest burnout rate of all physician specialties. <sup>7</sup> More than 50% of practicing urologists are over the age of 55 and nearing retirement. <sup>8</sup> Demand for urological care is increasing with the aging patient population.	Telehealth bridges the gap between physician supply and patient demand. Urologists can use telehealth for consultations, pre- and post-op appointments, and more.
EMERGENCY MEDICINE	Physicians work in a high demand, low control environment. <sup>9</sup>	Telehealth can help physicians exert more control and better manage patient demand. ED telehealth triage can reduce wait times and increase patient satisfaction.

INFECTIOUS DISEASE	Physicians feel they have too many administrative tasks. There is a lack of a work-life balance. <sup>10</sup>	Physicians can remotely diagnose and treat patients, reducing patient transfers. Telehealth allows for more coordinated care through EHR integration.
PSYCHIATRY	There is a significant shortage of psychiatrists in the United States. Substance abuse issues are heightening the need for mental healthcare.	Telehealth offers a new level of flexibility, allowing psychiatrists to work from home or connect with patients who live hours away. Psychiatrists can also provide consultations to multiple primary care physicians, creating remote collaborative care model networks.
<b>PEDIATRICS</b> (Subspecialty)	Physicians are overwhelmed with documentation requirements. There is increasing pressure around productivity. Physicians feel they lack a work-life balance. <sup>11</sup>	Telehealth increases provider productivity. Providers can document video visits within existing EHRs. Pediatricians have more flexibility to practice where and when they want.
ONCOLOGY	Oncologists report emotional exhaustion. Oncologists have large patient caseloads. Providers lack a healthy work-life balance. <sup>12</sup>	Telehealth offers providers an easy, more efficient way to connect with patients. Telehealth allows physicians to work from home.
NEUROLOGY	Neurologists report emotional exhaustion. Neurologists cite a loss of interest or en- thusiasm in practicing. <sup>13</sup>	Telehealth increases respond time, which improves patient outcomes. Telehealth allows physicians to be on the leading-edge of medicine.

### Barriers to adoption remain

Interestingly, while burnt out specialists such as urologists, emergency medicine providers and infectious disease physicians are the most willing to use telehealth, they're among the least likely to have used it. Psychiatry is the only specialty that has both a high willingness and high usage rate among physicians. In fact, every psychiatrist that is interested in practicing telehealth uses the technology. Neurologists were the second-most likely specialty providers to be using telehealth, which is likely due to the large number of successful telestroke programs across the country.



For most specialties, there is a large gap between willingness to use telehealth and actual telehealth usage. To better understand this disparity, we asked physicians who are willing to use telehealth why they have not adopted it.

### Physician barriers to telehealth include:



### Many of these barriers are beginning to be addressed by major health systems:

**Uncertainty around reimbursement:** This is the largest physician barrier to telehealth, but the tide is beginning to turn as telehealth continues to receive increased levels of reimbursement. For example, the Centers for Medicare and Medicaid Services (CMS) recently issued a proposed rule to allow Medicare Advantage plans to offer telehealth as part of the basic benefit package. This is a significant change, and will likely increase the number of Medicare Advantage plans that include telehealth coverage in their benefits package. In addition, 48 states offer provider reimbursement for some form of live video visit in Medicaid fee-for-service and many states now require private payers to cover telemedicine.<sup>14</sup>



**Questions about clinical appropriateness:** Physicians remain concerned about the clinical appropriateness of telehealth; however, many provider groups and health systems have taken steps to address clinical quality concerns among providers. For example, in a case study by the Cleveland Clinic, the health system outlines the steps it has taken to ensure clinical quality is upheld during telemedicine visits. These steps include quality reviews of video visits, templates to ensure full physician documentation, and an antibiotic stewardship strategy that allows providers to treat conditions appropriately via telehealth while minimizing the potential for antimicrobial resistance.<sup>15</sup>



**Lack of physician buy-in:** Telehealth is often met with resistance from providers, who believe it will take away from brick-and-mortar practices and produce low-quality care for patients. In a case study, Avera Health, an integrated health system in South Dakota, outlines how it engaged directly with its medical group to define telehealth programs and address physician concerns. Avera addressed physician resistance through in-person meetings and informative write-ups. Avera's program also had the backing of its Chief Medical Officer, who provided reoccurring updates of the program to the medical group.<sup>16</sup>



**Poor leadership support:** The support of hospital leadership is essential to a telehealth program's success and has a large impact on physician adoption and staffing. Gaining the support of top executives—from the chief executive officer to the chief financial officer—encourages physician adoption of telehealth. American Well has begun working with clients to develop more consistent organizational support for clinical transformation around telehealth.

### Physician use of telehealth is at an inflection point

We asked physicians who have not used telehealth how likely it was that they would start using video visits within the next three years. Fifty percent of doctors said it was either likely or very likely. Considering 22% of physicians are already using telehealth, that would bring the total percentage of physician usage to roughly 61% by 2022.



When this is applied to the entire professionally active physician population, the implication is that physician adoption of telehealth is at an inflection point and that by 2022, we could see between 341,000 and 591,000 physicians using telehealth to see patients.



\* Numbers were calculated in the following way:

#### Providers currently using telehealth:

970,000 (number of professionally active physicians according to Kaiser) X 22% (percent of physicians who have used telehealth) = 213,400.

#### Providers using telehealth in 3 years (low estimate):

970,000 – 213,400 = 756,000 (number of physicians not currently using telehealth) 756,000 X 17% (percent of physicians very likely to start using telehealth in next three years) = 128,520 (physicians very likely to starting using telehealth in next three years) + 213,400 (physicians who have used telehealth) = 341,920

#### Providers using telehealth in 3 years (high estimate):

970,000- 213,400 = 756,000 (number of physicians not currently using telehealth) 756,000 X 50% (percent of physicians very likely or likely to start using telehealth in next three years) = 378,000 (physicians very likely or likely to starting using telehealth in next three years) + 213,400 (physicians who have used telehealth) = 591,400

While the number of physicians delivering care via telehealth will grow, so too will the frequency with which providers use video. Physicians who do currently use telehealth expect their usage to increase over the next three years. More than half (52%) said that they expect to use telehealth frequently—more than two times per week—three years from now, compared to only 15% of physicians who said they used telehealth frequently within the past year. Transitioning from occasional use to frequent use of telehealth means telehealth will become more a part of these physicians' day-to-day operations.



### Market Impact

When looked at alongside the 2015 survey, we believe this 2019 physician survey begins to paint a clearer picture of the trajectory of telehealth adoption among physicians, and the role key organizations will play in its advancement.

### **Health Systems**

Physicians' increased willingness to see patients over video, coupled with the increasing physician shortage and burnout rates and a changing reimbursement landscape, signals a boom in video visits over the next several years. By adopting telehealth, health systems can increase their catchment area for services they're known for, allowing larger populations easier access to their physicians and services. Health systems can take steps to promote telehealth physician adoption growth by:

- Creating Integrated Workflows: Doctors expect that they will be using video visits much more frequently in the coming years. This makes an integrated workflow experience even more important than before. Physicians must be able to seamlessly document in the EHR while launching and delivering video visits. Telehealth-EHR embedding or integration can also help health systems combat physician burnout by making telehealth a convenience instead of a nuisance.
- Defining Clinical Appropriateness: Concerns about clinical appropriateness comprise the second-largest barrier to physician adoption of video visits. Increased education in medical schools, residency programs and CME classes could help to address this knowledge gap. Involving physicians in the development and implementation of telehealth clinical guidelines will also help reassure providers that the care delivered over video is equivalent to the high-quality care delivered in person.
- Leaders Need to Lead: Engaging executives in your telehealth program can increase funding for marketing and program expansion, and send a message to physicians that this is a system-wide priority. American Well has developed a Clinical Transformation program designed to help health systems create internal alignment and organizational structures that promote accelerated provider adoption and service innovation.
- Finding Specialist Champions: It's predicted that the United States will face a shortage of roughly 100,000 physicians by 2030, with non-primary care specialties making up a large portion of that shortage.<sup>18</sup> We expect the increasing burnout rate and physician shortage of specialty providers to further propel provider interest in telehealth. The plan is to seek out and encourage specialist telehealth champions and assist them with finding where telehealth fits into their practice, and to set up attainable success metrics to gain momentum and encourage long-term use among specialities.

### **Individual Physician Practices**

Telehealth enables physicians to attract and retain patients by providing easy and convenient access to care. Physicians can reach patients in their home from their home—creating a more desirable and flexible work-life balance. It can also play a role in a physician's compensation by increasing CMS Merit-Based Incentive Payment System (MIPS) payments. For individual physicians, it's important to find a partner that provides different options for telehealth care delivery—whether they desire to see new patients, existing patients, or a mixture of both.

### ACOs

The growing number of specialists interested in using telehealth will have a positive impact on Accountable Care Organizations (ACOs). ACOs can deliver high-quality, coordinated care to patients across many different specialties. Combined with the new changes to CMS' Medicare telehealth reimbursement policy, telehealth will become an easy avenue for engaging patients in more consistent, high-quality care while reducing overall costs.

### **Health Plans**

With physician adoption set to dramatically increase in the next few years, health plans must continue to move telehealth reimbursement forward, especially for specialty care. There are proven cost savings associated with telemedicine, which will benefit both payers and their members. Health plans can also offer network physicians new avenues to deliver care by allowing them to treat members through their telehealth platforms.

### **Telehealth Resources**

#### **Case Studies**

Spectrum Health: Decreasing Transfer Costs and Improving Care Delivery Through Specialty Telehealth How Beacon Health System Gained Competitive Advantage and Acquired New Patients through Telehealth How Children's Omaha improves mental health access and outcomes through telehealth Southwest Medical's Winning Strategy for Telehealth Avera's Move to Consumer Telehealth Nemours: Using telehealth to improve the lives of children

#### **American Well Webinars**

How BayCare's Virtual Home Care Program Increased Efficiencies While Reducing Transports and Travel Virtual Visits: Added Cost or Value Add? Connected Health: How Avera is Redefining High-Quality Care with Telehealth

#### **Additional Literature**

Ensuring Clinical Quality in Telemedicine Creating a Digitally Enabled Consumer-Centric Healthcare Organization How Cleveland Clinic upholds clinical quality in telemedicine

#### Sources

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