

## Welcome to Today's Webinar!

- Housekeeping reminders:
  - All audience lines will be muted
  - Please turn off your camera
  - To maintain focus on our panelists, please do not post comments or questions in the chat
    - » Questions for the Panelists can be submitted via private message to Becky Payne
    - » Technical questions can be submitted via private chat to NQF Staff



https://www.qualityforum.org

## A Conversation with the Action Team on Virtual Healthcare Quality

**Capstone Webinar** 

January 26, 2022

NQF gratefully acknowledges support from the following organizations towards the Action Team on Virtual Healthcare Quality: Nursing Alliance for Quality Care, Silver Sponsor; Compassus, General Sponsor

# Welcome



## **National Quality Forum Welcome**



### Dana Gelb Safran, ScD President & CEO, National Quality Forum



## NQF's Mission, Vision, and Values

## MISSION To be the trusted voice driving measurable health improvements

## VISION Every person experiences high value care and optimal health outcomes

## VALUES Collaboration | Leadership | Passion | Excellence | Integrity



## **Action Team on Virtual Healthcare Quality**

- The Action Team on Virtual Healthcare Quality launched in May 2021 and met through December 2021
- The Action Team included 30 diverse member organizations representing perspectives across the healthcare spectrum

Action Team Goal: Identify actionable recommendations to ensure the quality of virtual healthcare



## **Action Team Participants**

Co-Chairs: Cleveland Clinic and New Jersey Health Care Quality Institute

- Academy of Nutrition and Dietetics
- American College of Cardiology
- American Geriatrics Society
- American Heart Association
- American Occupational Therapy Association
- American Psychiatric Nurses Association
- AmeriHealth Caritas
- City of Hope
- Consumers Advancing Patient Safety
- CVS-Aetna
- Dialysis Patient Citizens
- General Dynamics Information Technology
- Hazel Health
- Health Resources & Services Administration

- Hospital for Special Surgery
- Intermountain Healthcare
- Mayo Clinic
- Merck & Co., Inc.
- National Coalition for Cancer Survivorship
- National Committee for Quality Assurance
- National Hospice and Palliative Care Organization
- National Rural Health Association
- Nursing Alliance for Quality Care
- Purposeful Concepts LLC
- Teladoc Health, Inc.
- The Joint Commission
- VA Office of Connected Care
- Virginia Mason Medical Center

# **Action Team Accomplishments**



healthcare

## **Identifying Barriers and Sharing Best Practices**



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## **Action Team on Virtual Healthcare Quality Issue Brief**



#### **National Quality Forum Action Team on** Virtual Healthcare Quality

The massive expansion of virtual healthcare\* in recent years, particularly in response to the coronavirus disease 2019 (COVID-19) pandemic, highlights a need to ensure that this care is high guality, measurable, person centered, and aligned with evidence-based standards. This Issue Brief presents recommendations on addressing and improving virtual healthcare guality.

virtual care. This is essential to the seamless integration

how to evaluate, improve, and sustain virtual healthcare

guality requires input from all healthcare stakeholders.

system administrators; technology leaders; policymakers;

To identify actionable recommendations to ensure

the Action Team on Virtual Healthcare Quality over

a nine-month period, beginning in May 2021 and

NQF formed the Action Team by bringing together

multistakeholder perspectives on measuring the

quality of virtual healthcare. Representatives from

these organizations collaboratively identified priority

challenges and recommended actionable objectives to

improve virtual healthcare quality. The four objectives

practices documented in the literature or demonstrated

by exemplars within the Action Team and are relevant to

organizations at various stages in the adoption, delivery,

objectives include discrete recommendations that range

and measurement of virtual healthcare services. The

from improving virtual care at the organizational level

to advocating for a clear national strategy on virtual

in this Issue Brief are based on best and promising

30 NQF member organizations that represent critical

culminating with this Issue Brief.

the quality of virtual healthcare. NQF convened

This includes clinicians: patients, caregivers, and

advocates; pavers; purchasers; hospital and health

regulatory specialists; measure developers; quality

experts; and others.

of virtual and in-person care that ensures high quality access, equity, continuity, and outcomes. Understanding

Over the past two decades, virtual healthcare has grown improved measurement, healthcare leaders must identify due to a variety of factors, including increasing consumer and disseminate best practices and benchmarks for demand, ongoing provider shortages, advances in technology, and changes to federal and state policies.1

This growth dramatically expanded with the onset of the COVID-19 public health emergency (PHE). Telehealth claims increased from 0.17 percent of total healthcare claims in March 2019 to 7.52 percent in March 2020, due in large part to the Centers for Medicare & Medicaid Services' (CMS) expansion of billable telehealth services and reimbursement rates in response to the PHE 2.3 Following this initial spike in claims, telehealth utilization stabilized at levels 38 times higher than before the COVID-19 pandemic began.<sup>4</sup> Virtual healthcare offers tremendous potential to reduce health disparities and enhance access to care in ways that align with the needs and preferences of patients and caregivers, and it should be thoughtfully expanded in step with emerging evidence

While standards of care typically apply across modalities (i.e., virtual care, in-person care, and hybrid care that combines virtual and in-person), there is insufficient guidance on measuring the quality of virtual healthcare. Many existing quality measures do not specifically address virtual care delivery; as an example, only 50 of 218 quality measures in the CMS Merit-Based Incentive Payment System (MIPS) 2020 performance period included telehealth.<sup>5</sup> Many organizations are working to address this measurement gap, and the National Quality Forum (NQF) recently published a framework on rural telehealth measurement that includes a recommendation to prioritize 26 performance measures.<sup>6</sup> In support of

\* The Action Team on Virtual Healthcare Quality utilized an expansive definition of virtual healthcare that includes but is not limited to live videoconferencing, remote patient monitoring, audio-only care provided via telephone, and asynchronous care via a patient portal.

healthcare quality.

Driving measurable health improvements together

JANUARY 2022



## Issue Brief *Key Challenges*

- 1. A lack of best practices, benchmarks, and measurement guidance impedes the delivery and objective assessment of high quality healthcare across modalities of care.
- 2. An unclear national strategy on reimbursement for virtual healthcare creates uncertainty for healthcare organizations and disincentivizes investment in delivering high quality virtual care.
- 3. The digital divide exacerbates inequities in virtual healthcare (e.g., broadband, hardware) and prevents the most vulnerable patients from utilizing the modality of care that they need or prefer.
- 4. Inadequate interoperability across disparate health information technology (IT) systems exacerbates challenges with communication and continuity of care across modalities.
- 5. Inconsistent training and support for clinicians, staff, patients, and caregivers diminishes the virtual healthcare experience for everyone involved.



## **Issue Brief** *Recommendations*

To support virtual healthcare quality, the Action Team recommends that healthcare stakeholders partner together to accomplish the following objectives:



# **Action Team Panel Discussion**



## Action Team Panel Moderated Discussion



#### Leonie Heyworth

Deputy Director for Clinical Services, Telehealth Services, VA Office of Connected Care



### **Diann Folkersen** Patient Advocate, Consumers Advancing Patient Safety



#### Heather Black

Healthcare Quality Research Director, Merck & Co., Inc.



**Co-Moderated by Steven Shook** Lead for Virtual Health, Cleveland Clinic; Action Team Co-Chair



**Co-Moderated by Linda Schwimmer** CEO, New Jersey Health Care Quality Institute; Action Team Co-Chair



## **Action Team Panel** Audience Q&A



#### Leonie Heyworth

Deputy Director for Clinical Services, Telehealth Services, VA Office of Connected Care



### **Diann Folkersen** Patient Advocate, Consumers Advancing Patient Safety



#### Heather Black

Healthcare Quality Research Director, Merck & Co., Inc.



**Co-Moderated by Steven Shook** Lead for Virtual Health, Cleveland Clinic; Action Team Co-Chair



CEO, New Jersey Health Care Quality Institute; Action Team Co-Chair

Please send your questions for the Panel privately to Becky Payne (NQF)

**Co-Moderated by Linda Schwimmer** 

# **Next Steps and Closing Remarks**



## Action Team on Virtual Healthcare Quality Issue Brief Now Available

 Download and share the Action Team on Virtual Healthcare Quality Issue Brief on the <u>NQF</u> <u>Website</u>.

ISSUE BRIEF		I Healthcare Quality	2	ality	3
National Quality Forum Action Team on Virtual Healthcare Quality		wing set of to address in ing virtual and	2 DEVELOP A NATIONAL STRATEGY ON VIRTUAL HEALTHCARE USE AND REIMBURSEMENT • Utilize the growing body of evidence to maintain and thoughtfully expand public and private reimbursement	health appointments to engagement • Perform risk adjustment	aregivers in advance of virtual optimize users' comfort and and stratification of data by
The massive expansion of virtual healthcare' in recent years, particularly in response to the coronavirus disease 2019 (COVID-19) pandemic, highlights a need to ensure that this care is high quality, measurable, person centered, and aligned with evidence-based standards. This issue Brief presents recommendations on addressing and improving virtual healthcare quality.		elivery and althcare across irsement for or healthcare ment in	for virtual healthcare beyond the COVID-19 pandemic • Engage in advocacy efforts that highlight key benefits, opportunities, and needs of virtual services • Standardize unique codes to allow stratification by virtual and in-person care	<ul> <li>social factors to ensure care is equitable</li> <li>Prioritize virtual healthcare platforms that include solutions for language services, disability accommodations, family or caregiver involvement, and other elements of patient-centered care</li> </ul>	
Over the past two decades, virtual healthcare has grown demand, ongoing provider shortages, advances in technology, and of factors, including increasing consumer demand, ongoing provider shortages, advances in technology, and changes to federal and state policies. <sup>1</sup> This growth dramatically oxpanded with the onset of the COVID-19 public health emergery (PHE). Telehealth claims increased from 0.12 parcent of total healthcare claims is March 2016 to 732 parcent of total healthcare in large part to the Centers for Nedicare & Medicaid Services' (CMS) supmation of thilds belehealth services and reinbursement rates in response to the PHE. <sup>24</sup> Following this initial spike in claims, telehealth ultitation stabilized at levels 38 times higher than before the COVID-19 pandemic began'. Virtual healthcare offers tremendous potential to reduce health disparities and enhance access to care in ways that align with the needs and preferences of patients and caregivers, and it should be thought museumed and they with emerging evidence. While standards of care bytically apply across modallities (i.e., virtual care, in-person care, and hybrid care that opublics on chargen in the SMS there. <sup>1</sup> Based and the advance wirtual care delivery; as an example, only 50 of 310 gualty measures to the site sufficient particuide to level and in persons). Indicates the Payment System (MIES) 2202 performance period include to televalanty. Yang organizations are working to address this measurement that includes a recommendation claides the masurement that includes a recommendation partitize 32 eptermance measures. <sup>1</sup> In support of	Improved measurement, healthcare leaders must identify and disseminate best practices and benchmarks for virtual care. This is essential to the seamless integration of virtual and in-persion care that ensures high quality access, equity, continuity, and outcomes. Understanding how to evaluate, improve, and sustain virtual healthcare quality requires input from all healthcare stakeholders. This includes clinicans; patients, caregivers, and advocates; payers; purchasers; hospital and health system administaros; technology leaders; policymakers; regulatory specialist; measure developers; quality experts; and others. To identify actionable recommendations to ensure the quality of virtual healthcare, NGF convened to Action Team on Virtual Healthcare Quality over a nine-month period, beginning in May 2021 and cuminating with this issue Brief. QNGF formed the Action Team by bringing together 30 NGF member organizations that represent critical multistakeholder period; busing intogether 30 NGF member organizations that represent critical multistakeholder period; busing intogether 30 NGF member organizations that represent critical multistakeholder period; busing intogether 30 NGF member organizations that represent critical multistakeholders collaboactively identified prontly challenges and recommendal actionable objectives in this issue Brief are based on best and promising practices documends in the intracritical or demonstrated by exemptiars within the Action Team and are relevant to and measuremends in the intracritical representatives in dividue discrite recommendiations that range from improver virtual available.	es In virtual and prevents the the modality of parate health acerbates ntinuity of care <b>linclans</b> , es the virtual	<ul> <li>Define benchmarks, goals, and accountability programs for virtual healthcare that are based on established standards of care</li> <li>Develop tandardsded criteria to help datermine which patients or clinical use cases will benefit most from virtual care</li> <li>Broaden regulations to increase access to and reimbursement of virtual healthcare across state lines</li> <li>Detect and pervent fraud, waste, and abuse (FWA) related to virtual healthcare, and use accurate FWA data to inform telehealth policy</li> </ul>	ortunities to implement, test, and improve the use ed and equitable healthcare delivery system. These enerfists that should be thoughthully expanded alongside I healthcare, however, stakeholders across the continuum of high quality and meets well-established standards of care. action items for each objective, ofter oportunities for every e availability and quality of virtual healthcare for everyone.	
			3 SEANLESSLY AND SECURELY SHARE VIRTUAL HEATHCARE INFORMATION ACROSS CARE TEAMS AND ORGANIZATIONS • Create organizational policies and workflows to ensure enformation from virtual visits is communicated in a timely manner to all care team members • Standardize melsa and responsibilities to support	and their representatives who participated in the 2021 Health Resources & Services Administration Respite Administratio Respite Administratio Respite Administration Respite Administra	
		plicable to virtual comparing the aff, patients, idjust workflows assurement	virtual workflows, and empower staff and providers to focus on key tasks • Ensure patients and caregivers have access to information from virtual visits (e.g., instructions, educational materials, and follow-up information) • Encourage virtual healthcare technology companies to standardize their platforms in ways that streamline	Todd J. Vento Mayo Clinic Kannan Ramar Merck & Co., Inc. Heather Black National Coalition for Cancer Survivorship Sheliay Fuid Nasso	Purposeful Concepts LLC Barbara Lake Teladoc Health, Inc. Bridget McCabe The Joint Commission Christina Cordero VA Office of Connected Care Leonie Heyworth
		NQF's Creating relopment s strategic tilizes a ucture, cost id outcome	secure data sharing across disparate health IT systems • Utilize care navigators to help guide patients through care, including care across modalities • Provide ongoing training for clinicians and staff on delivering high quality, person-centered, virtual care that is coordinated across the care team	National Committee for Quality Assurance Eric Mussor National Hospitce and Paillative Care Organization Leri Bishop	Virginia Mason Medical Center Dana Kahn Action Team on Virtual
* The Action Team on Virtual Healthcare Guality utilized an expansis live videoconferencing, remote patient monitoring, audio-only care	ve definition of virtual healthcare that includes but is not limited to	mplementation al care npact of virtual	4 EXPAND ACCESS TO CARE AND PROMOTE HEALTH EQUITY Implement virtual healthcare hubs in schools, libraries, retail stores, and other locations that are accessible to	a, Silver Šponsor; Compassus, Ge	neral Sponsor
Driving measurable health improvements together	JANUARY 2022		JANUARY 2022		JANUARY 2022



## **Join the National Quality Forum**

- Support NQF's mission to drive measurable quality improvement
- Network with over 6,000 individuals from over 360 organizations
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- Receive Member rate on products, conference registrations, and other services



## **NQF Sponsors: Thank You!**

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# THANK YOU.

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