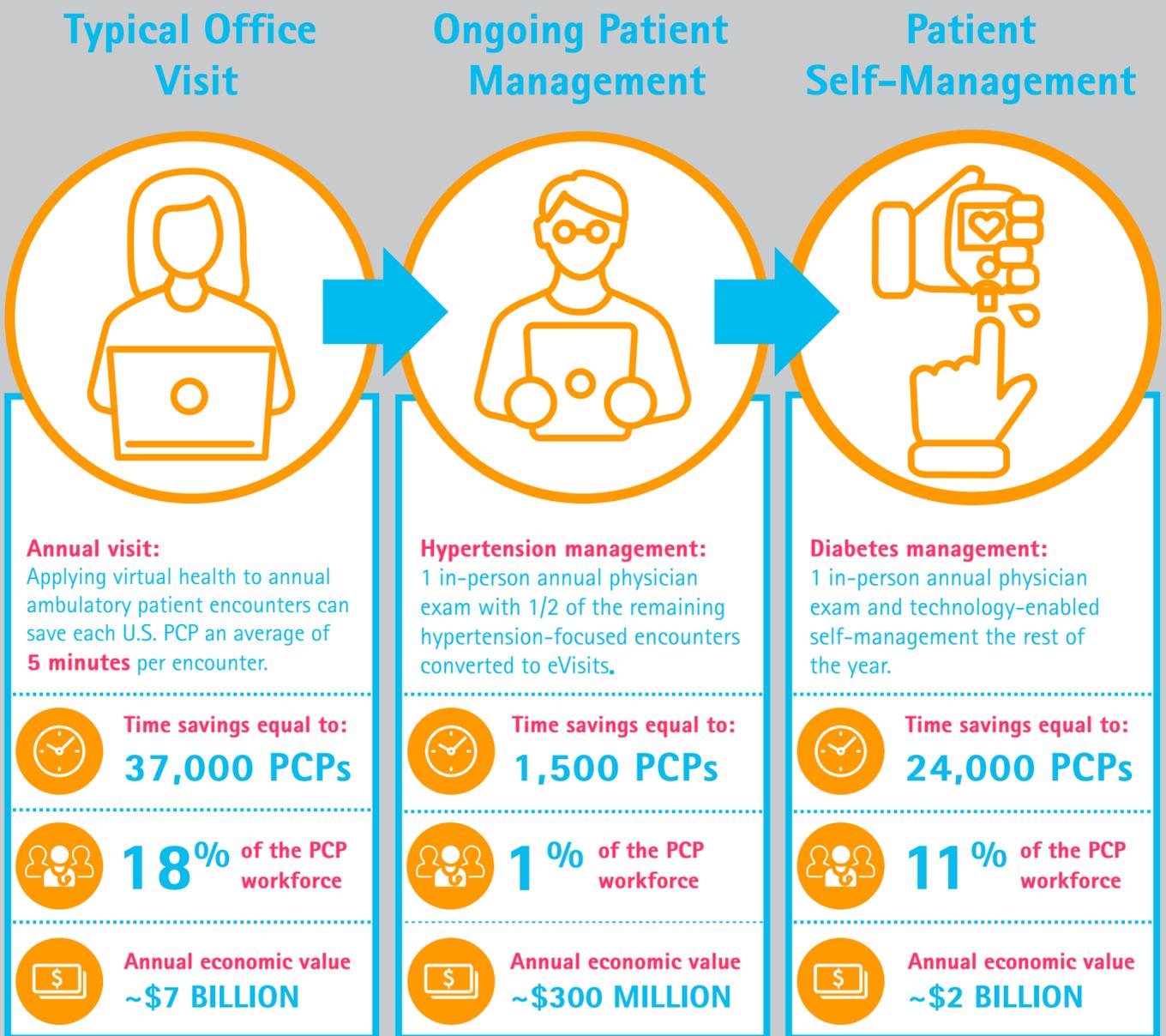# accenture consulting

Insight Driven Health

The Real Impact of Virtual Health

Virtual health can reinvent clinician and patient interactions — and create clinician capacity worth billions of dollars.

High performance. Delivered.

These **three** common primary and ambulatory care scenarios illustrate the opportunity of virtual health approaches and reveal both the **potential time savings** and **economic value** to healthcare.

Typical Office Visit	Ongoing Patient Management	Patient Self-Management

Annual visit:
Applying virtual health to annual ambulatory patient encounters can save each U.S. PCP an average of **5 minutes** per encounter.

Hypertension management:
1 in-person annual physician exam with 1/2 of the remaining hypertension-focused encounters converted to eVisits.

Diabetes management:
1 in-person annual physician exam and technology-enabled self-management the rest of the year.

	Typical Office Visit	Ongoing Patient Management	Patient Self-Management
Time savings equal to:	**37,000 PCPs**	**1,500 PCPs**	**24,000 PCPs**
of the PCP workforce	**18**%	**1**%	**11**%
Annual economic value	**~$7 BILLION**	**~$300 MILLION**	**~$2 BILLION**

The Health System View

Regional health system with **~1,800** affiliated or employed PCPs

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5 minutes saved across all annual ambulatory encounters = **$63 million** in physician capacity = **~320 PCPs**

What is virtual health?

Virtual health combines clinical care and professional collaboration through telemedicine, telehealth and collaboration at-a-distance to **connect** clinicians, patients, care teams and health professionals to provide health services, support **patient self-management** and coordinate care across the care continuum.

Specific to physician-patient encounters, **virtual health** enables live and asynchronous clinical interactions, clinical practice and patient management supported by a wide range of communication, collaboration and cognitive computing technologies along with digital devices and data.

Methodology

Accenture clinicians, technologists and economists analyzed the workflows of the most common physician office visits, as documented by the National Ambulatory Medical Care Survey (NAMCS), evaluating how virtual health could be applied to diagnostic, follow-up and condition management encounters. Accenture examined encounters ranging from common preventive care office visits and routine infant or child health checks to visits for upper respiratory conditions, hypertension, arthropathies and diabetes. To calculate the monetary value of physician capacity, Accenture referenced the American Academy of Family Physicians (AAFP) and Medscape data on average annual primary care physician salaries, and AAFP data about average hours worked annually. Accenture also referenced data from the following sources: American Diabetes Association, Centers for Disease Control and Prevention (CDC), Healthcare Bluebook, U.S. Bureau of Labor Statistics, and World Health Organization's International Classification of Diseases Ninth Revision (ICD-9). The analysis was conducted in collaboration with THINK-Health LLC in September 2015.

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