



# Virtual First

A prescription for  
federal healthcare  
providers

---

An essential federal strategy for getting the most out of virtual care technologies in pursuit of better outcomes, expanded access, and reduced costs.

Healthcare providers long have lamented that time-constrained patient encounters impact their ability to fully assess patients' health and well-being. Virtual care and telehealth can increase the number of interactions and are now proven to enable a more personal, convenient, holistic, and effective model of care.

But even with the COVID-19 uptick in virtual medical appointments, patients and providers alike enjoyed only modest benefit. Legacy regulations, healthcare payment models, logistical constraints, caution, and simple inertia have hindered more significant use and transformation of this sector.

**When the pandemic struck, the status quo changed as healthcare delivery organizations, including federal providers, embraced virtual health at scale essentially overnight.**

This shift encompassed largely video and telephonic engagement with expanded remote patient monitoring. It allowed providers to continue to treat patients, make more efficient use of limited resources (including clinicians, treatment facilities, and personal protective equipment), and avoid unnecessary risks. However, use was largely disconnected and without strategic focus.

This experience demonstrated the incredible agility and innovation possible in healthcare today. More specifically, we learned that virtual care and telehealth were scalable, trusted, adaptable, and often preferable for patients and clinicians alike.

**For an industry in need of transformation, it was what the doctor ordered.**





## Positive patient and provider reactions to virtual care during the pandemic

### PATIENTS



80% of adults say the issue they were primarily concerned about was resolved through e-visits<sup>1</sup>



44% of millennials say they may switch providers if telehealth isn't offered in the future<sup>2</sup>



90% of adults were satisfied with the quality of their telehealth care<sup>1</sup>



45% of patients say that telehealth was equal to or better than in-person care<sup>2</sup>



65% say convenience was a reason for preferring telehealth<sup>2</sup>

### PROVIDERS

**Most**

providers believe that telehealth has improved the health of their patients<sup>3</sup>



79.5% believe their patients were highly satisfied with telehealth visits<sup>4</sup>



95.5% report they would like telehealth to represent 25% of their practice in the future<sup>4</sup>

Virtual care is here to stay, but what exactly does that mean for federal health agencies?

**It means they have the unprecedented opportunity to reshape healthcare into a truly outcomes-based, patient-centric endeavor.**

## Transforming healthcare: If not now, when?

Most healthcare professionals agree that incremental change is not enough to achieve the care improvements the country requires. A recent study by the Commonwealth Fund found that the U.S. ranked last for access to care, administrative efficiency, equity, and healthcare outcomes among 11 high-income nations studied.<sup>5</sup> This is happening despite the fact that the U.S. pays significantly more for care than any other developed country, with care costs currently making up nearly 20% of the U.S. GDP in 2020.<sup>6</sup>

What's clear is the need to make fundamental change, shifting away from reactive medicine to proactive and preventative care, wellness, population health, and better support for chronic conditions. There is a need to use provider and patient time more efficiently. Telehealth and virtual care have demonstrated their ability to serve as catalysts and enablers for this transformation.

However, adopting telehealth technology and simply using it as an alternate way to deliver the same type of care patients receive isn't going to change outcomes drastically. It will not address the growing doctor and nursing shortage. It may provide another avenue of convenient health access, but it will be yet another technology implementation that falls short of its promise unless it is accompanied by a true outcomes-based strategy.

**It's time to think Virtual First.**

## **Virtual First: A structured framework for care transformation enabled by technology and data**

The predominant fee-for-service financial model largely defines the current U.S. healthcare system. This model codifies certain practices within the workflows of electronic health records (EHRs) and other clinical systems, enforcing a series of checks and balances between payers and providers at the frequent exclusion of patient priorities, care efficiency, and outcomes. Too often, this has created a care model where providers are incentivized to provide direct, in-office care instead of utilizing the best mode available to address the specific patient's needs.

Accenture Federal Services believes that the increasing maturity of virtual care and telehealth is an opportunity to transform healthcare delivery, reimagining current practices and processes to focus on outcomes and to create a more patient-centric care model. We call this model Virtual First.

Virtual First is the framework for reimagining healthcare with a focus on outcomes. The approach leverages digital transformation and data to create new standards, processes, and practices that do not distinguish digital from in-person care. It will create a new and enhanced health support model driven by evidence based on outcomes. Virtual First requires those responsible for the design and delivery of care to consider use of the full spectrum of synchronous, asynchronous, digital, and data-driven solutions to improve value in healthcare and healthcare operations. It forces strategy decisions related to workforce/ staffing, facilities, technologies, and policy based on data and outcomes.



**VIRTUAL  
VIRTUAL  
FIRST  
FIRST**

Virtual First is the strategic framework to transform patient experience and healthcare outcomes using data-driven digital innovation



# The five tenets of Virtual First

1  
**Outcomes drive virtual care**

---




2  
**All care is Virtual First**

---




3  
**Collaborative care journeys integrate virtual and in-person delivery**

---




4  
**Patient's time is central to care delivery design**

---

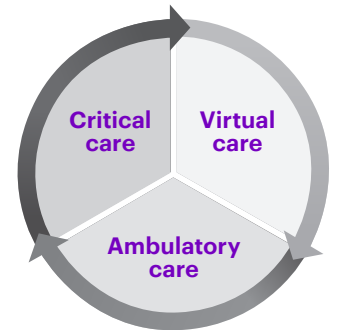


5  
**Data, staff continuity optimizes care delivery**

---



A Virtual First approach uses remote, digital engagement as the default care delivery method whenever appropriate to improve patient and provider experiences, reduce costs, and improve outcomes.



Virtual First does not replace today's in-person ambulatory and critical care when applicable. Instead, multiple factors help determine the appropriate mode of care for the situation. It matches the means of care delivery to the case, factoring in the specific patient, their condition, the urgency, and the needed staff.

By reimagining the approach, Virtual First builds on and transforms the value of in-person care by layering in iterative digital interactions and the use of digital products and services. It leverages new processes, technologies, and data to help provide more comprehensive patient monitoring, diagnosis, treatment, and care management capabilities.

Virtual care provides new opportunities for clinicians to consult with patients regularly and outside of traditional care settings. It allows for more effective monitoring and interventions. Using virtual care, a provider's ability to impact patient health is no longer bound by the limited time spent interacting with patients in medical offices, nor is it constrained by a lack of data.

Virtual First solutions operate synchronously and asynchronously to enable patient support, remote care delivery, monitoring, and self-care. Therefore, it also has the potential to capture a great deal of additional patient data – including from remote patient monitoring solutions – and combine the data from all care interactions to feed data-driven care improvements.

Accenture's Virtual First paradigm proposes rearchitecting the delivery model around patient and clinical needs, identifying and implementing the right technologies to create a more proactive, convenient, and integrated approach to care delivery.





Furthermore, they can more quickly capture cost savings and other efficiencies for reinvestment to expand adoption and improve care quality and convenience. Ultimately, Virtual First will help them shift investments from fixed assets to more agile, adaptive resources to better address specialized and dynamic needs more efficiently.

Most agencies have already been pursuing virtual care and have made significant investments. But they will be able to accomplish more by tying those investments to a Virtual First strategic plan.

For example, VHA's Connected Care program has been a pioneer and innovator in using video visits at scale. In 2021, the VHA conducted more than 750,000 virtual visits per month. These impressive results are a solid foundation to build upon using a broader Virtual First approach that expands to other modes and outcomes from utilization.

## Meeting the Quadruple Aim

Virtual First advances all aspects of the Quadruple Aim, making it critical to the long-term viability of federal healthcare

### Improved patient experience



Virtual First puts patients in charge with significantly improved access to information and treatment, and care is delivered more often when and where it is most convenient to the patient. Patients can take a more active role in their recovery and wellness, directly monitoring and measuring the impact of treatment and lifestyle choices on their health and well-being.

Virtual First can also deliver better healthcare outcomes by enabling more effective treatment, monitoring, earlier intervention, and greater wellness. According to the Centers for Disease Control & Prevention (CDC), 90% of U.S. healthcare expenditures are related to chronic conditions and mental health,<sup>7</sup> meaning that solutions like remote patient monitoring and virtual therapy can have a widespread impact.

### Improved clinician experience



A Virtual First approach can provide clinical teams with greater flexibility, allowing them to join other Americans in working remotely, either occasionally or frequently, improving retention. It also helps to limit unnecessary exposure to contagious patients.

Longer term, it can enhance career satisfaction by improving clinicians' abilities to engage with patients and monitor their treatment and recovery. Given their increased patient focus, telehealth and virtual care applications often boast better, digitally native user experiences, helping counter the burnout many clinicians report from repetitive data entry into EHRs.

### Lower costs



Virtual First can reduce the cost of routine care through greater clinical efficiency, expanded use of team-based approaches, and decreased need for physical infrastructure.

Beyond providing more accessible care, virtual care can reduce reliance on more expensive alternatives, such as emergency rooms, and enable cost-saving approaches like hospital-at-home. Over time, technology will allow more care to be conducted virtually. However, providers must not create parallel care processes that increase care use but do not lower total cost or improve outcomes, nullifying potential cost savings.

### Enhanced population health & readiness



More consistent and widespread patient engagement is key to sustainable improvements in population health. For example, the enhanced ability to reach underserved populations and offer more equitable access to specialized resources can broadly enable better outcomes. And a richer understanding of longitudinal health can provide new insights and faster alerts, especially in response to a pandemic or widespread health crisis.

This can have a similar benefit for organizations like DHA that are focused on force readiness, allowing them to manage military personnel fitness more collectively and quickly identify emerging healthcare or readiness concerns.



## Technologies that power a Virtual First strategy

More than just video visits, Virtual First encompasses a host of digital technologies that allow healthcare to be delivered remotely. These technologies work both actively and passively, in real-time or independently, to engage and connect providers and patients.

This section details a variety of virtual, digital, and data solutions that enable a Virtual First strategy. Technologies will continue to evolve, and not all organizations will need the full suite of capabilities to achieve their missions. But all organizations need a Virtual First strategy to get the most out of their technology investments and improve patient outcomes.



### Four primary use cases are poised to power Virtual First technology adoption today:

#### Telehealth

Telehealth includes provider-to-provider and provider-to-patient virtual visits, either synchronously or asynchronously. Common telehealth purposes include digital clinical interactions and specialty consults.

*Core technologies: Video, phone, live chat, file transfer, text messaging, survey/forms, clinical decision support, intake systems, electronic health records*

#### Remote patient monitoring

Remote patient monitoring enables clinicians to remotely monitor the health and clinical signs of a patient. This is achieved through technologies' transmittal of clinical data directly from medical and consumer devices and patient forms and surveys.

*Core technologies: Medical devices/sensors, consumer monitoring devices (wearables), surveys/forms, clinical decision support, remote diagnostics, virtual health assistants, smart pills*

#### Wellness & self-care

Wellness applications allow consumers to manage and monitor aspects of their care proactively. These applications cover everything from fitness and nutrition to mental health and disease management.

*Core technologies: Wellness apps, mental health apps, medical apps, personal health wearables*

#### Patient engagement

Patient engagement comprises various technologies that provide patients with easy, 24/7 access to non-emergency care and healthcare administration functions. Providers can reach patients remotely to answer questions and curate a more complete healthcare experience by proactively providing information relevant to the patient's specific health needs.

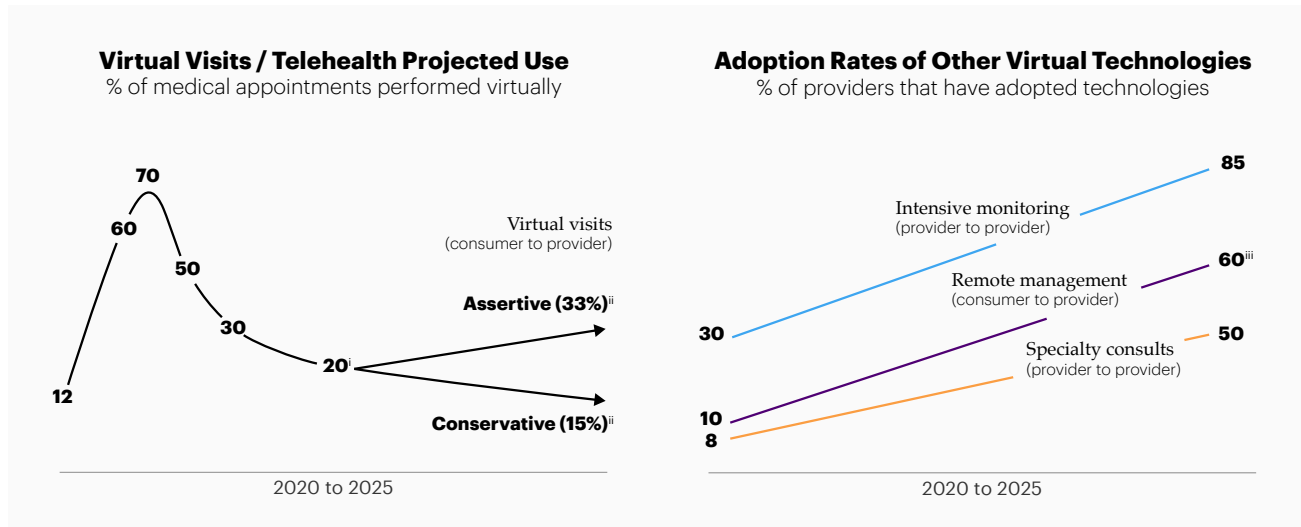
*Core technologies: Chatbots, secure chat/messaging, video, patient portals, scheduling systems*





## Technology implementation and adoption

Accenture Research projects that more than **50% of health services will be delivered virtually**. While telehealth applications play an essential role in a Virtual First strategy, other applications are likely to have an even more significant long-term impact on clinical performance. According to analysis by Accenture and others, remote monitoring applications are likely to see more widespread adoption.



<sup>i</sup>Based on EPIC data. Note: does not include remote patient monitoring, diagnostics, or provider-to-provider consults.

<sup>ii</sup>Accenture Research

<sup>iii</sup>Gartner

## Implementing Virtual First: New architectures and operating models institutionalize change

Implementing Virtual First at the enterprise level is a multiyear journey, but initial value can be quickly realized while planning for an ever-evolving future state. Successful adoption will be achieved iteratively, building competency, capacity, and confidence as providers layer on additional capabilities. But every journey starts with a single step, and step one should be building your agency's Virtual First strategy.

### Virtual First North Star: Transformation begins with the end in mind

#### A case for change

Identify mission- and patient-centered outcomes that are the highest priority to deliver on quickly and efficiently.

#### Small steps and big leaps

Use current tools to take initial steps aligned with an enterprise Virtual First strategy while piloting new processes and technologies that promote more efficient care. Establish foundational data and technology to use across the continuum of care.

#### One integrated plan

Assess current care delivery and business operating models and processes to visualize the total opportunity of what is possible with a Virtual First strategy. With a unified vision, increasingly align current disparate workstreams, policies, and efforts through enterprisewide virtual, data, and digital capabilities.

#### A continuously evolving model

Virtual capabilities will continue to evolve, allowing new challenges to be addressed as others are resolved.

Inspire an agile and adaptable organizational culture that supports innovative ideas and solutions for solving today's problems while capitalizing on tomorrow's opportunities.

Today, many virtual care and telehealth efforts can be characterized as a set of promising-but-disparate tools and initiatives. The challenge for providers is transforming these efforts into a pervasive, integrated, Virtual First strategy that complements, enhances, and where appropriate, replaces traditional in-person care.

This outcome requires investments and commitments to:

### **Change management**

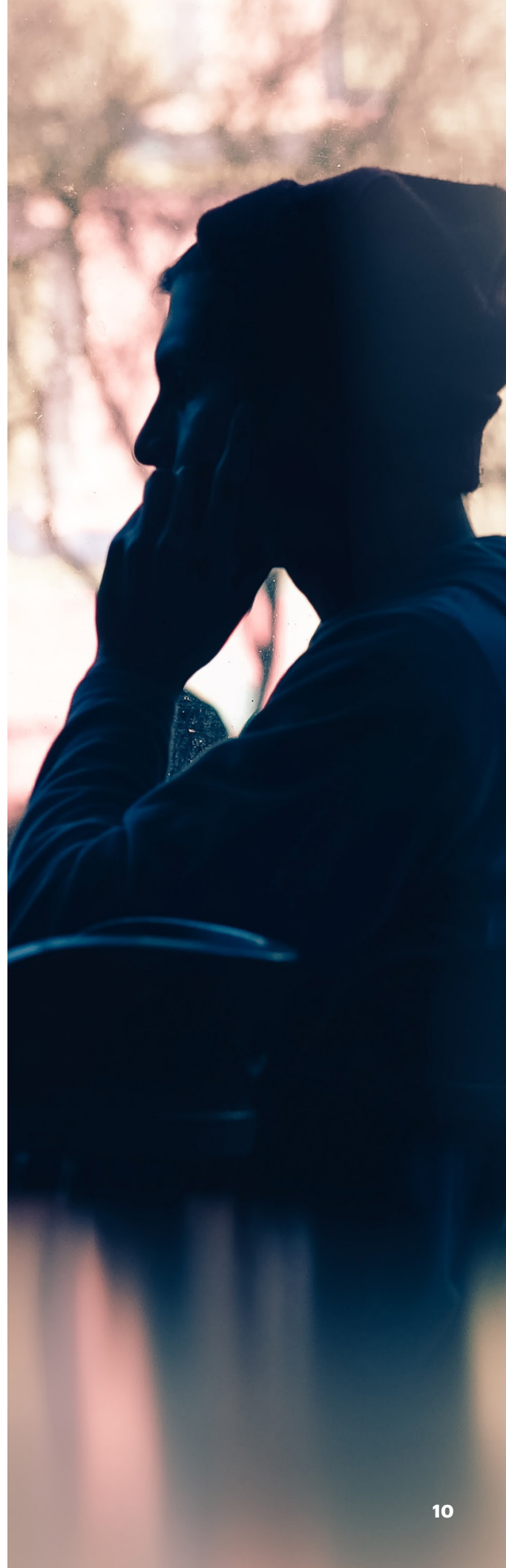
Training is required on using and prescribing these new devices/services, interpreting their data and findings, and engaging with patients virtually. In many cases, healthcare providers must consider new roles to take optimal advantage of their capabilities. Similar training and education are needed for patients, helping them navigate a more self-directed care model and building their trust and preference for the new model.

### **Process reengineering**

Providers must redesign and decouple many existing practices from current standards of care, EHR systems, and economic models. In addition to shifting from a provider-based to a patient-centric care model, systems and procedures will need to expand beyond just human or simple rules-based decision-making to accommodate more dynamic, machine-learning-based business processes. As one benefit, these richer insights may help alleviate today's false alarms that contribute to alert fatigue.

### **Technology integration and governance**

Necessary data integration and enterprise governance are needed to ensure virtual care applications operate securely and protect privacy, interoperate with other systems to support the end-to-end patient journey, and empower users through intuitive design and usability. Many organizations will benefit from a platform of platforms approach including specific virtual care platforms and a data integration and management layer within their architecture. They should also consider establishing technical centers of excellence that can work at the faster pace required for the market's rapid evolution.





## Virtual Health Maturity Model

Accenture has created a Virtual Health Maturity Model to help healthcare providers map and monitor their transformation journey. It is designed to guide investments in capacity building, ensuring steps are performed in the optimal order to maximize impact and minimize risk. It also specifies the use cases most effectively adopted at different levels of maturity.

Our Virtual Health Capability Model complements the maturity model by mapping capabilities to specific use cases. It identifies underlying contingencies and requirements and uses data to drive improvement from specific implementations, not just for virtual care, but the ongoing transformation of healthcare.

### Virtual Health Maturity Model

Virtual health-enabled command center	7	<b>Embed &amp; Transform</b> Use virtual workforce in real-time
Virtual-enabled health system	6	
Virtual, integrated into care models	5	<b>Scale</b> Organize workforce & integrate to care model
Established 'virtual health center'	4	
Extend to partners and consumers broadly	3	<b>Organize</b> Extend services internally & externally
Enterprisewide, scaled programs	2	
'Business' established with key governance	1	
Pilot or single-purpose programs	0	<b>Try</b> Explore & govern virtual health services

Most Healthcare Organizations



## Getting started: Bridging the physical and virtual care worlds

The COVID-19 pandemic shows that Virtual First is not just possible, but preferred in many cases.

To continue the momentum and scale current success, federal healthcare providers must focus on value and the opportunity to reimagine care.

Each agency's Virtual First strategy will be different due to its unique organizational requirements, patient needs, and existing technology infrastructures. But there are specific steps any agency can take to move forward successfully:

- **Assess current adoption** – Create a baseline understanding of current initiatives, including performance, interdependencies, and potential liabilities.
- **Chart the user journey with virtual** – Evaluate the current patient journey and how it might exist in a more virtual world.
- **Evaluate the business case** – Explore the potential benefits, cost savings, and required investments needed to support specific digital interventions in the user journey.
- **Modernize your architecture** – Modernize your technology architecture to create a more open, adaptive system of record, engagement, and innovation.
- **Redefine operating models** – Assess how current operating models can support more agile, virtual care delivery.

**These steps will position federal health agencies to capitalize on the significant technical, marketplace, and patient expectation changes afoot.**

## Authors



**Dr. Ron Moody, MD**  
Chief Medical Officer  
*Accenture Federal Services*



**Katie Wilson, RD, MHSA**  
Virtual Health Delivery Lead  
*Accenture Federal Services*



**Greg Smith**  
Virtual Health Lead  
*Accenture*



**Brad Brainard, MBA, PMP**  
Strategy and Consulting Manager  
*Accenture Federal Services*



## Endnotes

1. Bipartisan Policy Center, [Telehealth Visit Use Among U.S. Adults](#), August 2021
2. HIMSS and Accenture Research, [State of Healthcare](#)
3. Mitre, [Telehealth Impact: Physician Survey Analysis](#), November 16, 2020
4. Telemedicine Journal and e-Health, [Clinician Satisfaction with Rapid Adoption and Implementation of Telehealth Services During the COVID-19 Pandemic](#), December 2021
5. Commonwealth Fund, [Mirror, Mirror 2021: Reflecting Poorly in 2021](#), August 4, 2021
6. Health Affairs, [National Health Spending In 2020](#), December 15, 2021
7. HealthPayerIntelligence, [Top Chronic Diseases Behind Payer Spending and How to Prevent Them](#), June 26, 2020

## About Accenture

Accenture is a global professional services company with leading capabilities in digital, cloud and security. Combining unmatched experience and specialized skills across more than 40 industries, we offer Strategy and Consulting, Interactive, Technology and Operations services — all powered by the world's largest network of Advanced Technology and Intelligent Operations centers. Our 674,000 people deliver on the promise of technology and human ingenuity every day, serving clients in more than 120 countries. We embrace the power of change to create value and shared success for our clients, people, shareholders, partners and communities. Visit us at [www.accenture.com](http://www.accenture.com).

Copyright © 2022 Accenture. All rights reserved.  
Accenture and its logo are trademarks of Accenture.

## About Accenture Federal Services

Accenture Federal Services, a wholly owned subsidiary of Accenture, brings together mission expertise with proven innovation and leading practices to help the federal government do the extraordinary things it takes to create a better future for all of us. We are passionate about partnering with clients, going beyond the bold future we collectively imagine, to create real and enduring change for our country and our communities. We deliver new value and advantage that lasts, drawing on the full power of our partners and Accenture. Learn more at [www.accenture.com](http://www.accenture.com).

