

# 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 quality, measurable, person centered, and aligned with evidence-based standards. This Issue Brief presents recommendations on addressing and improving virtual healthcare quality.**

Over the past two decades, virtual healthcare has grown due to a variety 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 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.<sup>2,3</sup> 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

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-person 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 clinicians; patients, caregivers, and advocates; payers; purchasers; hospital and health system administrators; technology leaders; policymakers; regulatory specialists; measure developers; quality experts; and others.

**To identify actionable recommendations to ensure the quality of virtual healthcare, NQF convened the Action Team on Virtual Healthcare Quality over a nine-month period, beginning in May 2021 and culminating with this Issue Brief.**

NQF formed the Action Team by bringing together 30 NQF member organizations that represent critical 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 in this Issue Brief are based on best and promising 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, and measurement of virtual healthcare services. The objectives include discrete recommendations that range from improving virtual care at the organizational level to advocating for a clear national strategy on virtual healthcare quality.

\* 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.

**The Action Team identified the following set of priority challenges for stakeholders to address in the pursuit of measuring and improving virtual healthcare quality:**

- **A lack of best practices, benchmarks, and measurement guidance** impedes the delivery and objective assessment of high quality healthcare across modalities of care.
- **An unclear national strategy on reimbursement for virtual healthcare** creates uncertainty for healthcare organizations and disincentivizes investment in delivering high quality virtual care.
- **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.
- **Inadequate interoperability** across disparate health information technology (IT) systems exacerbates challenges with communication and continuity of care across modalities.
- **Inconsistent training and support for clinicians, staff, patients, and caregivers** diminishes the virtual healthcare experience for everyone involved.

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

## 1 MEASURE THE QUALITY OF VIRTUAL CARE

- Identify existing measures that are applicable to virtual healthcare, and prioritize their use in comparing the quality of virtual and in-person care
- Assess the experience of clinicians, staff, patients, and caregivers with virtual care, and adjust workflows based on results
- Update and implement an existing measurement framework for virtual healthcare (e.g., NQF's *Creating a Framework to Support Measure Development for Telehealth* or others) that identifies strategic measurement recommendations
- Create a balanced measure set that utilizes a combination of outcome, process, structure, cost and resource use, and patient-reported outcome performance measures to guide the implementation and continuous improvement of virtual care
- Incentivize research to measure the impact of virtual healthcare on outcomes

## 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 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
- Define benchmarks, goals, and accountability programs for virtual healthcare that are based on established standards of care
- Develop standardized criteria to help determine which patients or clinical use cases will benefit most from virtual care
- Broaden regulations to increase access to and reimbursement of virtual healthcare across state lines
- Detect and prevent fraud, waste, and abuse (FWA) related to virtual healthcare, and use accurate FWA data to inform telehealth policy

## 3 SEAMLESSLY AND SECURELY SHARE VIRTUAL HEALTHCARE INFORMATION ACROSS CARE TEAMS AND ORGANIZATIONS

- Create organizational policies and workflows to ensure information from virtual visits is communicated in a timely manner to all care team members
- Standardize roles and responsibilities to support 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 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

## 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

vulnerable populations of people who have difficulties with at-home connectivity

- Ensure that regulatory definitions of telehealth include audio-only encounters, which are important access points for people who cannot readily utilize video or in-person care
- Establish partnerships to reduce financial barriers to care, such as access to affordable devices and connectivity, and collaborations between payers and telecommunications providers to exclude virtual healthcare visits from data charges

- Provide educational materials and trainings to patients, families, and caregivers in advance of virtual health appointments to optimize users' comfort and engagement
- Perform risk adjustment and stratification of data by social factors to ensure care is equitable
- Prioritize virtual healthcare platforms that include solutions for language services, disability accommodations, family or caregiver involvement, and other elements of patient-centered care

The COVID-19 pandemic offered unprecedented opportunities to implement, test, and improve the use of telehealth as a key component of a person-centered and equitable healthcare delivery system. These opportunities indicate that virtual healthcare offers benefits that should be thoughtfully expanded alongside in-person care. To fully realize the potential of virtual healthcare, however, stakeholders across the continuum of healthcare must implement structures to ensure it is high quality and meets well-established standards of care. The four objectives in this Issue Brief, along with the action items for each objective, offer opportunities for every healthcare stakeholder to collaboratively improve the availability and quality of virtual healthcare for everyone.

## Action Team on Virtual Healthcare Quality

*NQF is grateful to the following member organizations and their representatives who participated in the 2021 Action Team on Virtual Healthcare Quality.*

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## ENDNOTES

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