

**THIS WEEK**

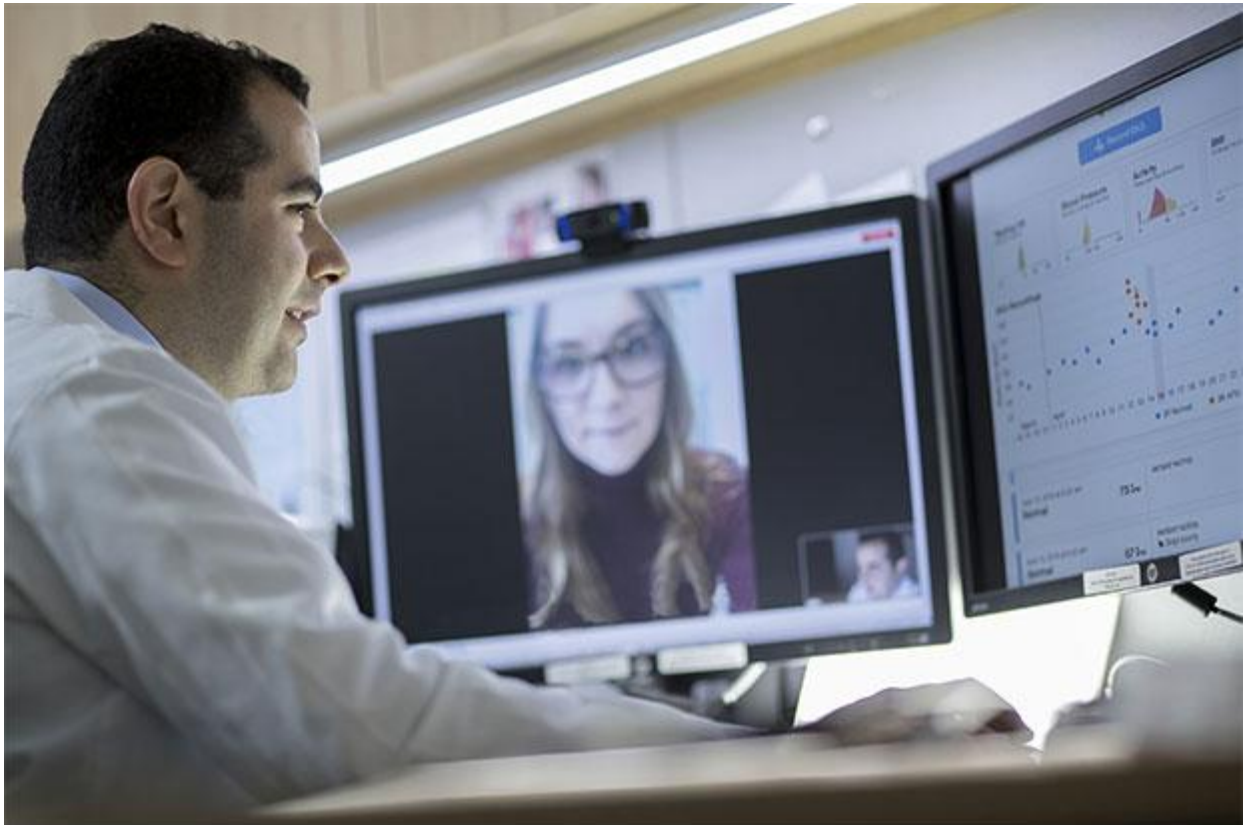


Photo courtesy of Cleveland Clinic

## On-demand virtual care is rising ... and so are consumer expectations

The direct-to-consumer (DTC) telehealth market is growing rapidly, and hospitals and health systems that are developing their own platforms for these services should brace for stiff competition and rising consumer expectations for a broader array of virtual care options. That became even more evident with the recent news that Cleveland Clinic and telehealth company American Well will launch a [joint venture](#) to give national and global access to consultative services from some of the provider's specialists.

The venture, named The Clinic, is still in its early stages and the partners haven't yet provided details on which medical specialties will be included in their services or how the offering will address such issues as fees, reimbursement, licensure requirements across state lines or how

specialists will connect with electronic health records. But this much is clear: The initiative is one of the first large-scale attempts to broaden virtual care consultations beyond urgent care.

American Well and Cleveland Clinic say they're focused on leading the field toward integrated care models that complement and connect to traditional care settings. They hope to transform virtual care to a more proactive model in which experts come to patients as they're needed in a way that gives more consumers access to the best minds in medicine.

The two organizations have been working together since a 2014 deal that allowed Cleveland Clinic to use American Well to deliver urgent care. But while Cleveland Clinic and many other provider organizations have seen a rapid rise in the number of virtual visits, the overall percentage of care delivered via telehealth remains low.

Still, care delivery through telehealth platforms is expected to grow. Employers and payers are increasingly encouraging patient use of telehealth services. Case in point: The nation's largest private payer, [UnitedHealth](#), recently launched a new virtual care app for the more than 27 million Americans covered in its employer-sponsored health plans.

The app, which will be free for most people enrolled in UnitedHealth employer-sponsored plans, gives users access to practitioners via mobile devices or computers. Consumers may have to pay out-of-pocket costs for telemedicine services depending on their plan and state requirements. Walmart — through a [partnership](#) with Doctor On Demand, Grand Rounds and HealthSCOPE Benefits — also recently expanded its telehealth services for employees in selected markets. For \$4 per visit, employees can use a virtual platform that includes online and video visits.

These and other moves to make DTC telehealth services more accessible also mean more competition for hospitals and health systems launching their own DTC telehealth services. Providers with their own DTC telehealth platforms and services will need to demonstrate a unique value proposition to stand out from similar services offered by a patient's employer or payer, or other health systems. And as more and more Americans use these platforms, expectation levels will rise for factors like platform ease of use, wait times to connect with a practitioner, scope of services, etc. The question for hospitals and health systems will be: Are we positioned to compete effectively in this market?

To learn more about how hospitals and health systems can plan strategies in this area, download the Market Insights report "[Telehealth: A Path to Virtual Integrated Care](#)" from the AHA Center for Health Innovation.

## **AHA AND AVIA FORM STRATEGIC ALLIANCE TO SPEED DIGITAL TRANSFORMATION**

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The AHA has formed a [strategic alliance](#) with AVIA, the leading partner for digital health insights, strategic guidance and consulting services. The alliance will combine the thought leadership and convening power of the AHA and AVIA's expertise and resources in digital health to help hospital and health system leaders engage in bold and innovative ways.



The new alliance will leverage AHA's expertise in thought leadership and AVIA's digital know-how to advance progress on the patient experience of care, value-based care, social determinants of health and quality. The alliance will allow AHA members to access an exclusive and customized forum in AVIA Connect, a digital innovation platform that provides personalized insights and peer-to-peer collaboration to

accelerate digital strategies. Hospital and health system leaders will be able to assess their maturity on select digital capabilities, share leading practices around digital transformation and develop technology-enabled solutions at scale.

## LOOK FOR CVS TO EXPAND IN CHRONIC CARE MANAGEMENT

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With CVS Health's launch of several [HealthHUB stores](#) and plans to launch other outlets in Boston, Dallas/Fort Worth, North Carolina, Ohio and Virginia, many have been speculating about whether the company's strategy is now centered on primary care.



That's not quite how CEO Larry Merlo sees things. Instead, CVS selected its first three HealthHUB markets in Atlanta, Philadelphia and Tampa due to the high incidence of CVS customers and Aetna members with chronic disease in those regions, Merlo recently explained to [Healthcare Dive](#).

Merlo says that the company plans to be more active in the \$2.6 trillion chronic care management market. In April, CVS and its payer arm Aetna launched a kidney disease management service for patients with chronic kidney disease and end-stage renal disease. Aetna members with these conditions can be stratified into risk buckets and will receive targeted care management resources at CVS stores. The company is expected to expand similar care management services to the diabetes patient population.

We want to hear from you! Please send your feedback to Bob Kehoe at [rkehoe@aha.org](mailto:rkehoe@aha.org).

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