EVENT SUMMARY

Modernising the care continuum

Digitally disrupting healthcare by changing the dynamic for physicians and patients

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Executive Summary

Modernising the care continuum: digitally disrupting healthcare by changing the dynamic for physicians and patients

Economist Impact convened a virtual panel discussion sponsored by Kyndryl to discuss how advanced communication technologies are changing expectations around the delivery of healthcare and what this means for traditional providers and patient relationships.

The panel was moderated by Amanda Stucke, Americas regional lead, health practice, Economist Impact. The panel of experts comprised Trent Sanders, director, US healthcare and life sciences, Kyndryl; Dr. Brian Hasselfeld, medical director, digital health and telemedicine, Johns Hopkins Medicine; Dr. Louis Potters, deputy physician-in-chief, radiation medicine, Northwell Health Cancer Institute; and Mike Reagin, senior vice-president and chief information and innovation officer, Sharp HealthCare.

Responding to the crisis

The covid-19 pandemic demanded an immediate response from healthcare providers, compelling them to adapt and adopt whatever technology was available to be able to continue delivering essential healthcare services while patients remained secure in their homes. It has opened the door to telehealth in a way that was unimaginable just a few years ago.

Telehealth is now here to stay; health providers can no longer expect patients to come to them for all their care.

For patients, the benefits of telehealth include cost and time savings related to transport, child care and work obligations, while for providers, digital appointments and remote patient monitoring allow for greater efficiency and access to services, enabling healthcare to be delivered independent of the location.

"There has been a basic and fundamental shift in patient expectations in engaging with clinicians across the care continuum."

Dr. Brian Hasselfeld
Medical director, digital health and telemedicine
Johns Hopkins Medicine

Addressing technological inequities

These new care-delivery pathways are not without their challenges, however. Surveys conducted by providers show a lower level of satisfaction with digital appointments. The chief source of complaint is almost always technical rather than clinical, be it problems related to basic internet connectivity or the communication platform itself.

Dr. Potters revealed that 20-25% of his telehealth appointments turn into telephone calls due to technical difficulties.

The ability of patients to access reliable broadband internet depends on where they live, with certain geographies having better coverage than others. Demographics also play a role: older people are typically less confident in using digital communication tools, while lower-income groups might not be able to afford faster internet packages. Unfortunately, it is often the patients who stand to benefit the most from the flexibility that telehealth offers who struggle to access digital services.

> **"We are only at the beginning of telehealth; we have not had a chance to think about what we want the experience to be."**
>
> **Trent Sanders**
> Director, US healthcare and life sciences
> **Kyndryl**

"Broadband internet access has been a determinant of economic health and now, quite frankly, it is a determinant of health," commented Dr. Hasselfeld.

When it comes to functionality of the consultation platforms themselves, the roundtable participants said the problems usually stem from the fact most of the apps were built hastily during a time of acute crisis and as a result are far from perfect.

Redesigning the system around the patient

The US healthcare system has been built around intermittent, transactional relationships between the patient and clinicians, and the current information and computing technology systems, designed simply to replace typewriters, are structured around billing.

However, advanced technologies have changed customer expectations in every industry over the past few years. Today's patient wants instant access to clinicians, a full overview of their health and a customer-centric experience.

Getting this customer experience right is the next big opportunity in healthcare .

Although providers have adopted digital technologies, they are not yet offering a real digital experience to match that of newcomers to the sector, such as Amazon Cares. According to Mr. Sanders, providers need to personalise the journey of healthcare and then create the billing systems around that.

"We need to look for an ecosystem solution, learn from and potentially partner with companies outside the industry who have got the customer experience right. This is the opportunity."

Mike Reagin
Senior vice president and chief information and innovation officer
Sharp HealthCare

Forthcoming regulatory changes are set to give patients greater access to their insurance data, and this will require the healthcare management and consumer-facing sides of the business to come together.

Participants said this should serve as an impetus to remodel healthcare ICT systems to create a seamless experience for patients, while also addressing the burdensome bureaucracy often cited by physicians in cases of workplace burnout.

Mr. Reagin said the industry should look beyond itself in designing these new ICT systems to learn how the big digital success stories created their customer-experience journeys.

Mr. Sanders emphasised the need to examine healthcare from the operational side as well as the patient side to change the experience. He recommended both patients and physicians be involved in digital transformation discussions.

Making data work for healthcare

Participants agreed that interoperability and data governance were two major issues that the healthcare industry urgently needs to address. The data generated by each patient interaction become more useful if they can be shared, analysed and stored, but the multitude of different platforms currently in use act as a barrier to information exchange.

Dr. Hasselfeld said there are around 300,000 health-related apps in the Apple Store, and he estimated that a patient with multiple conditions could end up with 150 different healthcare access points. In a business as critical as healthcare , fragmented access to data could be deadly.

The upcoming regulatory changes are an opportunity to bring in APIs (application programming interfaces) and FHIR (fast health interoperability resources) and move from document exchange to granular data exchange.

Mr. Sanders called for software providers to take the initiative to go beyond federal guidelines and establish data-governance thresholds that can be published to vendors and partners. As well as enabling data exchange, this would make app development faster and avoid duplication of effort.

> **"We need synthesised information at the time of care that is helpful to providers. Data needs to be combined in a way that makes sense and is complete."**
>
> **Mike Reagin**
> Senior vice president and chief information and innovation officer
> **Sharp HealthCare**

The innovation bubble

All participants spoke in favour of standardisation to create a seamless patient experience and were bullish about the prospects of the healthcare industry.

However, Dr. Potters reminded the roundtable that greater exchange of data carries with it the responsibility of data privacy and IT security. With the healthcare industry already facing hundreds of attacks each day, cyber-security needs to be at the forefront of technology design, especially the consumer-facing products, which are most vulnerable to attack.

Mr. Reagin predicted a huge innovation bubble in the next 3-5 years as the healthcare industry shifts away from intermittent, face-to-face interactions to new models of care delivery. "Those who are successful in the future will find a way to participate in the disruptive innovation cycle," he said.

The roundtable concluded that the US healthcare system has not yet caught up with the reality of constant digital connectivity, and the patient reimbursement system needs to move beyond the perspective of transactional healthcare based on counting visits. But patient access, equity and improved outcomes must remain at the core of the next phase in the evolution of healthcare.