

Embracing Telehealth Practices and Considering How it Can Improve Care

By Dr. Michael D. White and Dr. Anthony Dunnigan

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You can use your phone to hail a ride, interview for a job, order takeout, manage your banking and do your holiday shopping.

Technology in the last decade has revolutionized almost every sector of the economy — except in health care, which clung to an outdated model of in-person visits in sterile brick and mortar buildings.

Then the COVID-19 pandemic hit, and almost overnight, everything changed.

In just a few weeks, Valleywise Health and other health care systems across Arizona transformed the way they interacted with patients afraid to come into a health care clinic or hospital during a deadly pandemic.

Valleywise Health, Maricopa County's public teaching hospital and safety net system of care, experienced an explosion in telemedicine.

Once launched in March 2020, it proved to be wildly popular for several reasons. Foremost, our staff was highly motivated to keep our patients with chronic conditions (but feeling well) out of our clinics and to care for them at home — both for their own safety, as well as to create capacity for those patients who were feeling ill and had concerns about potential COVID-related symptoms.

It wasn't just patients who adapted quickly. As early as the first week, providers commented that they felt this

could potentially change the way they practice medicine. They were getting glimpses into their patients' lives, from the comfort of the patient's home, that they could never get with the patient in the office.

Today, we have now completed 250,000 telehealth visits. Virtual care currently comprises approximately 33% of our ambulatory business. Providers have become adept at mixing in-person and virtual visits throughout their day. Some providers have carved out blocks for telehealth, and a few of our clinics are now mostly all-virtual. We have explored many tactical issues, and we are thankful for the Arizona Telemedicine Council, which has provided much-needed insight along the way. We have tackled issues ranging from bringing in interpreters to carrying out needed ancillary services such as lab work or immunizations.



Even as the pandemic wanes, there is no turning back to the old ways.

The American Medical Association predicts \$250 billion in U.S. care could permanently shift to telehealth. Consulting firm Frost & Sullivan, based in San Antonio,

predicts a “tsunami” in telemedicine by 2025, with up to sevenfold growth. Advances anticipated to accommodate this shift include new remote diagnostic equipment and more user-friendly sensors.

At Valleywise Health, we are continuing to integrate virtual care across the system. We are working hard to turn the support staff into effective “tele-facilitators” who can guide patients into virtual exam rooms and carry out many of the functions typical of in-person visits.

Primary care, specialty care, educators, counselors, therapists — we have proven that virtual care is truly “for everyone.” We are working with our payor partners as well as the Arizona Health Care Cost Containment System (AHCCCS) to understand regulatory issues moving forward. We know there will be changes, and we know COVID-19 isn’t gone for good. We will be flexible and nimble — a mindset that has served us well to undergo one of the biggest transformations we have ever gone through, ultimately for the better.



Michael White, MD, joined Valleywise Health as chief clinical officer in August 2019. Prior to joining Valleywise Health, he served as chief academic officer at CHI Health, a non-profit, faith-based health system in Omaha, Nebraska. He continues to serve as the associate dean for technology and informatics at the Creighton University School of Medicine.



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