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"VIRTUAL CARE: USE OF COMMUNICATION TECHNOLOGIES FOR PATIENT CARE" (2020 ANNUAL REPORT OF THE AUDITOR GENERAL OF ONTARIO): BACKGROUND MATERIAL FOR HEARINGS*

Prepared for:

Standing Committee on Public Accounts

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INTRODUCTION

Virtual care refers to the use of various types of technologies (e.g., smartphones, computers, and email) to enable remote communication between patients and healthcare providers, as well as between healthcare providers.

In Ontario, the number of virtual-care visits by patients to physicians has increased by over 250% in the last five years, from about 320,000 visits in 2014/15 to over 1.2 million visits in 2019/20.

The demand for virtual care accelerated significantly during the COVID-19 pandemic. On March 14, 2020, the Ministry of Health (Ministry) expanded access to virtual care in response to COVID-19.

OVERSIGHT

The Ministry of Health is responsible for establishing policies related to virtual care in Ontario, including setting out strategies, goals and objectives for virtual care services; funding and overseeing services provided by the Ontario Telemedicine Network (Telemedicine Network) and Telehealth Ontario; and paying physicians for billings related to virtual care.[1]

The Ministry's "Digital First for Health Strategy" (November 2019) sets out a strategy for the broad use of digital tools and technologies in the healthcare system, including the use of virtual care.

FUNDING

Virtual-care services are primarily funded by the Ministry of Health via funding to the Ontario Telemedicine Network; payment of physician billings for virtual care; and payment to an external service provider operating Telehealth Ontario. In April 2020, the Telemedicine Network was made into a division of Ontario Health, and is the only Ministry-funded provider of video-visit technology that enables physicians to deliver care virtually.

In 2019/20, the Ministry provided approximately $31 million in funding to the Telemedicine Network, and spent nearly $90 million on physician billings for virtual care to patients. The Ministry also provided approximately $28 million to the external service provider operating Telehealth Ontario, a 24/7 telephone line for callers to ask health-related questions and receive information or advice from a nurse.

[1] AG, "Virtual Care," *2020 Annual Report*, p. 10.

AUDIT OBJECTIVE AND SCOPE

The audit was conducted between November 2019 and August 2020. According to the Auditor, the audit objective was to assess whether the Ministry of Health (Ministry), in association with the Ontario Telemedicine Network (Telemedicine Network) within Ontario Health, has effective systems and procedures in place to:

- make virtual-care services available and offer them in an equitable and cost-efficient manner to meet Ontarians' needs and in accordance with applicable standards, guidelines and legislation; and
- measure and report on the results and effectiveness of virtual-care services and initiatives in meeting their intended objectives.[2]

MAIN POINTS OF AUDIT

In mid-March 2020, when the pandemic was declared, the Ministry took temporary action to reduce billing restrictions and enable providing more virtual care during the pandemic. The Auditor noted that the Ministry continues to have limited oversight of physician billings for virtual care. Services offered by Telehealth Ontario and the Telemedicine Network are not integrated, and the two entities continue to operate in silos.

The Auditor concluded that the Ministry of Health, in working with the Ontario Telemedicine Network,

- does not have effective systems and procedures in place to enable patient-focused virtual-care services in a cost-effective manner to meet Ontarians' needs and in accordance with applicable standards and guidelines;
- does not have long-term goals and targets for virtual care and, as a result, progress has continued to be slow on successfully integrating the use of virtual care with the rest of Ontario's healthcare system; and
- has done limited work to evaluate the impact of virtual care on patient outcomes and the healthcare system in Ontario.[3]

[2] AG, "Virtual Care," *2020 Annual Report*, p. 15.
[3] AG, p. 5.

AUDIT FINDINGS AND RECOMMENDATIONS

SLOW PROGRESS IN EXPANDING VIRTUAL CARE

The Auditor found that in the past fifteen years there has been slow progress on expanding virtual care in Ontario. Despite having initiated digital health strategies in recent years, the Ministry

> still has not outlined a framework for what virtual care should look like in Ontario, nor has it developed any measurable long-term goals and targets. As a result, Ontario was left to hastily respond to the virtual-care requirements demanded by COVID-19.[4]

The Auditor noted that post-pandemic, additional work will be needed to plan for fully integrating virtual care services into Ontario's healthcare system.

In particular:[5]

- The Ministry has not set specific long-term goals and targets for virtual care where achievement can be evaluated.
- Virtual care is not always available for patients in Ontario's publicly-funded healthcare system.
- Neither the Ministry nor the Telemedicine Network have kept up with innovations in communication technologies.

The Ministry's billing rules for virtual care were temporarily relaxed in mid-March 2020 because of COVID-19 and the growing need for virtual care. The Auditor reported that:

- The Ministry has limited oversight of unreasonable virtual-care visits and billings.
- Numerous physicians had unusually high billings for virtual-care services.
- Physician billings for virtual care do not align with records of virtual-care.

Auditor's Recommendation 1

To achieve the virtual-care objectives in its Digital First for Health Strategy[6] (Strategy), we recommend that the Ministry of Health:

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[4] AG, "Virtual Care" Summary.
[5] AG, p. 17ff.
[6] Ministry of Health and Long-Term Care, "Connected Care Update," news release, November 15, 2019.

- specifically define what virtual care includes and how it fits into the provincial health-care system in terms of technology and physician billing;
- revisit its existing Strategy in light of the COVID-19 pandemic and lessons learned;
- identify annual and long-term targets for virtual care availability and use; and
- measure and report publicly on its results against these targets.

Possible Committee Questions

1. What steps has the Ministry taken to achieve the virtual-care objectives in its Digital First for Health Strategy including

    a) specifically defining what virtual care includes and how it fits into the provincial health-care system in terms of technology and physician billing;

    b) revisiting its existing Strategy in light of the COVID-19 pandemic and lessons learned;

    c) identifying annual and long-term targets for virtual care availability and use; and

    d) measuring and reporting publicly on its results against these targets?

2. If the Ministry has not taken these steps, or for any steps still outstanding, are there any plans to move forward and what are the timelines?

Auditor's Recommendation 2

To provide Ontarians with convenient virtual care options, we recommend that the Ministry of Health, in collaboration with the Ontario Telemedicine Network within Ontario Health, review its policies and structures around physician delivery of and billing for virtual care to identify ways of expanding the availability of virtual-care options in Ontario.

Possible Committee Question

3. Has the Ministry collaborated with the Ontario Telemedicine Network within Ontario Health to review its policies and structures around physician delivery of and billing for virtual care to identify ways of expanding the availability of virtual-care options in Ontario? If not, is there any plan for this review and what is the timeline?

Gaps Between Virtual Care Availability and Needs

The Auditor found significant gaps between virtual-care availability and patient needs. Publicly-funded virtual care is not driven by patient demand but by

physicians who decide whether they want to offer virtual-care services and can only bill for such services (prior to COVID-19) when they use the Telemedicine Network.

In particular:[7]

- Physicians' uptake and usage of virtual care has remained low because the Telemedicine Network platform is not always reliable and user-friendly in a way that meets their needs.
- The Ministry and the Telemedicine Network have not done enough to remove restrictions and barriers to virtual care.
- Limited virtual-care delivery options restrict access to virtual care.
- Private virtual care has expanded to fill gaps, but has created inequity and risks to continuity of care.

The Auditor found that the Telemedicine Network platform

- works as a silo and does not integrate with all electronic medical records, presenting barriers to accessing and recording medical information;
- does not always provide clear and reliable video quality throughout virtual-care visits; and
- creates administrative burdens for scheduling physician-patient video visits.

Auditor's Recommendation 3

To provide Ontarians with an opportunity to access care virtually through a reliable platform in a timely and convenient way, we recommend that the Ministry of Health, in collaboration with the Ontario Telemedicine Network (Telemedicine Network) within Ontario Health:

- engage physicians and other users who have used the Telemedicine Network, and those who have chosen not to, to identify their specific concerns and issues with the platform, identify opportunities for improvement, and implement appropriate solutions; and
- study virtual-care delivery models or practices in other jurisdictions to determine whether the Telemedicine Network's roles should be revisited or changed going forward given the evolution of virtual care since it was established.

[7] AG, p. 19ff.

Possible Committee Questions

4. Has the Ministry collaborated effectively with the Ontario Telemedicine Network within Ontario Health to provide Ontarians with an opportunity to access care virtually through a reliable platform in a timely and convenient way?

   Specifically, has the Ministry taken steps to

   a) engage physicians and other users who have used the Telemedicine Network, and those who have chosen not to, to identify their specific concerns and issues with the platform, identify opportunities for improvement, and implement appropriate solutions; and

   b) study virtual-care delivery models or practices in other jurisdictions to determine whether the Telemedicine Network's roles should be revisited or changed going forward given the evolution of virtual care since it was established?

5. If the Ministry has not taken these steps, or for any steps still outstanding, are there any plans and what are the timelines?

Auditor's Recommendation 4

To provide Ontarians with more options to access care virtually in a convenient way, we recommend that the Ministry of Health, in collaboration with the Ontario Telemedicine Network within Ontario Health:

- engage virtual-care providers in other jurisdictions and in the private sector to learn about and apply best practices in the delivery of expanded virtual care in Ontario; and
- evaluate the feasibility of allowing physicians to bill for virtual-care services provided through multiple technologies outside of the Telemedicine Network (for example, secure messaging, or phone calls) and implement changes that protect data security and privacy, and enable the Ministry to monitor the reasonableness of billings.

Possible Committee Questions

6. Has the Ministry collaborated effectively with the Ontario Telemedicine Network within Ontario Health to provide Ontarians with more options to access virtual care in a convenient way?

   Specifically, has the Ministry collaborated with the Telemedicine Network to

   a) engage virtual-care providers in other jurisdictions and in the private sector to learn about and apply best practices in the delivery of expanded virtual care in Ontario; and

b) evaluate the feasibility of allowing physicians to bill for virtual-care services provided through multiple technologies outside of the Telemedicine Network (for example, secure messaging, or phone calls) and implement changes that protect data security and privacy, and enable the Ministry to monitor the reasonableness of billings?

7. If the Ministry has not taken steps, or for any steps still outstanding, are there any plans and what are the timelines?

PROVINCIAL OVERSIGHT OF VIRTUAL-CARE VISITS, BILLINGS, AND AVAILABILITY

The Auditor found that there is limited provincial oversight of the reasonableness of virtual-care visits and billings by physicians using the Telemedicine Network. In particular:[8]

- Numerous physicians had unusually high billings for virtual-care services.
- Physician billings for virtual care do not align with records of virtual-care visits.
- The Ministry has incomplete and limited information on virtual-care availability and needs.

Auditor's Recommendation 5

To detect, deter, and reduce inappropriate billings for virtual-care services, we recommend that the Ministry of Health, in collaboration with the Ontario Telemedicine Network within Ontario Health:

- develop a framework for monitoring virtual-care visit and billing data continuously as well as identifying red flags and risks that warrant further reviews;
- conduct reviews when unreasonable or unusual trends are noted;
- collaborate with the College of Physicians and Surgeons of Ontario to evaluate the quality of virtual care being provided by physicians with an unreasonable number of virtual-care visits;
- develop criteria for following up on cases of inappropriate billing and taking disciplinary actions to deter and prevent recurrences; and
- evaluate the effectiveness of the above actions taken in preventing, detecting, and reducing inappropriate virtual-care billings.

[8] AG, pp. 26ff

Possible Committee Questions

8. Has the Ministry collaborated effectively with the Ontario Telemedicine Network within Ontario Health to detect, deter, and reduce inappropriate billings for virtual-care services?

   Specifically, what steps has the Ministry taken to

   a) develop a framework for monitoring virtual-care visit and billing data continuously as well as identifying red flags and risks that warrant further reviews;

   b) conduct reviews when unreasonable or unusual trends are noted;

   c) collaborate with the College of Physicians and Surgeons of Ontario to evaluate the quality of virtual care being provided by physicians with an unreasonable number of virtual-care visits;

   d) develop criteria for following up on cases of inappropriate billing and taking disciplinary actions to deter and prevent recurrences; and

   e) evaluate the effectiveness of the above actions taken in preventing, detecting, and reducing inappropriate virtual-care billings?

9. If the Ministry has not taken steps or for steps still outstanding, are there any plans and what are the timelines?

Auditor's Recommendation 6

To make informed decisions on virtual care, we recommend that the Ministry of Health, in collaboration with the Ontario Telemedicine Network within Ontario Health, work with stakeholders (such as the College of Physicians and Surgeons of Ontario and the Ontario Medical Association) to collect information on the availability of virtual care provided outside of the Ontario Telemedicine Network and the usage of such services across the province.

Possible Committee Question

10. Has the Ministry of Health, in collaboration with the Ontario Telemedicine Network within Ontario Health, taken steps to collect information on the availability of virtual care provided outside of the Ontario Telemedicine Network and the usage of such services across the province? If not, are there any plans and what are the timelines?

LIMITED INTEGRATION OF VIRTUAL CARE WITH HEALTHCARE SYSTEM

The Auditor found that although the services offered by both the Telemedicine Network and Telehealth Ontario constitute virtual care using communication technologies, they primarily operate in silos with limited coordination and integration of their services.

In particular:[9]

- The potential exists for coordinating and integrating services between the Telemedicine Network and Telehealth Ontario.
- Virtual care can be better integrated with primary-care services.

Auditor's Recommendation 7

To offer convenient virtual care access to Ontarians with a more integrated virtual health-care system, we recommend the Ministry of Health collaborate with the Ontario Telemedicine Network within Ontario Health and Telehealth Ontario to assess the feasibility of integrating services.

Possible Committee Questions

4. Has the Ministry of Health taken steps to assess the feasibility of integrating virtual-care services with the healthcare system? If not, are there any plans to do so, and what are the timelines?

Auditor's Recommendation 8

To improve patient access to virtual primary-care services, we recommend that the Ministry of Health, in collaboration with the Ontario Telemedicine Network within Ontario Health, work with primary-care physicians and stakeholders to identify and implement solutions that enable all Ontarians to receive virtual primary-care services when requested by patients and deemed clinically appropriate by primary-care physicians.

Possible Committee Question

11. What steps has the Ministry taken to improve patient access to virtual primary-care services?

Specifically, has the Ministry worked with primary-care physicians and stakeholders to identify and implement solutions that enable all Ontarians to receive virtual primary-care services when requested by patients and deemed clinically appropriate by primary-care physicians? If not, are there any plans and what are the timelines?

Evaluation of Financial Benefits and Trade-offs Needed

The Auditor found that although the Telemedicine Network and the Ministry have taken steps to begin measuring the impact of virtual care on the healthcare system, they still do not have reliable and effective measures to assess the cost-efficiency and effectiveness of virtual care.

[9] AG, pp. 33ff.

In particular:[10]

- The Telemedicine Network has begun estimating the cost-efficiency of virtual care, but calculation methods need to be refined.
- The Ministry has limited insight into patient response or action after receiving advice from Telehealth Ontario services.
- Limited measures are in place to assess the effectiveness of virtual-care services.

Auditor's Recommendation 9

To effectively estimate the financial savings resulting from virtual care, we recommend that the Ontario Telemedicine Network within Ontario Health, in collaboration with the Ministry of Health:

- revisit its cost-saving metrics to ensure realistic assumptions are used in calculating the savings (such as savings from patient travel costs); and
- incorporate patients' Northern Health Travel Grant applications after receiving virtual care into its calculation methodology for savings.

Possible Committee Questions

12. What steps has the Ontario Telemedicine Network within Ontario Health, in collaboration with the Ministry of Health, taken to effectively estimate the financial savings resulting from virtual care?

    Specifically, has the Telemedicine Network

    a) revisited its cost-saving metrics to ensure realistic assumptions are used in calculating the savings (such as savings from patient travel costs); and

    b) incorporated patients' Northern Health Travel Grant applications after receiving virtual care into its calculation methodology for savings?

13. If the Ministry has not taken these steps, or for any steps still outstanding, are there any plans and what are the timelines?

Auditor's Recommendation 10

To effectively evaluate the impact of Telehealth Ontario services on patients and the health-care system, we recommend that the Ministry of Health:

- develop performance metrics to measure patient responses after receiving advice provided by Telehealth Ontario; and

[10] AG, pp. 36ff.

- continuously assess the effectiveness of Telehealth Ontario services on an annual basis using follow-up surveys of patients.

Possible Committee Questions

14. Has the Ministry evaluated the impact of Telehealth Ontario services on patients and the health-care system by

    a) developing performance metrics to measure patient responses after receiving advice provided by Telehealth Ontario; and

    b) continuously assessing the effectiveness of Telehealth Ontario services on an annual basis using follow-up surveys of patients?

15. If the Ministry has not yet evaluated the impact, are there any plans and what are the timelines?

Auditor's Recommendation 11

To adequately evaluate the effectiveness of virtual-care services, we recommend that the Ontario Telemedicine Network within Ontario Health, in collaboration with the Ministry of Health, work with experts in the area of patient health outcomes and virtual care to identify and implement metrics that have proven successful in other jurisdictions and/or private virtual-care providers for measuring and evaluating patient and health-care system outcomes.

Possible Committee Question

16. Has the Ontario Telemedicine Network within Ontario Health, in collaboration with the Ministry of Health, evaluated the effectiveness of virtual-care services by working with experts in the area of patient health outcomes and virtual care to identify and implement metrics that have proven successful in other jurisdictions and/or private virtual-care providers for measuring and evaluating patient and health-care system outcomes? If not, are there any plans to do so, and what are the timelines?

ACCELERATED EXPANSION OF VIRTUAL CARE CREATED RISKS

The Auditor found that COVID-19 pandemic accelerated the expansion of virtual care, but also created risks for data security, patient privacy, and physician billing.

In particular:[11]

- The Ministry has made temporary changes to expand the availability of virtual care.
- The Ministry's temporary removal of barriers to virtual care has created risks to data privacy and security.

[11] AG, pp. 41ff.

- Telehealth Ontario experienced technical issues and long wait times despite expanded capacity and resources.

Auditor's Recommendation 12

To evaluate the impacts of the COVID-19 pandemic on virtual care availability and usage in Ontario and apply lessons learned for decision-making going forward, we recommend that the Ministry of Health, in collaboration with the Ontario Telemedicine Network within Ontario Health:

- conduct a comprehensive analysis of virtual-care usage and costs across the province during the pandemic and decide whether the temporary changes (such as new billing codes) should be made permanent;
- engage health-care providers, both who had and had not previously used virtual care in their practice before the pandemic, to obtain feedback on their experience of offering virtual care during the pandemic;
- collect feedback from patients across the province on their experience of using virtual care during the pandemic to gather and incorporate patient views into future decisions related to providing and funding virtual care tools; and
- develop performance metrics for measuring the experience of both health-care providers and patients with virtual care during the pandemic and identifying areas for improvements going forward under pandemic and non-pandemic circumstances.

Possible Committee Questions

17. Has the Ministry of Health, in collaboration with the Ontario Telemedicine Network within Ontario Health, evaluated the impacts of the COVID-19 pandemic on virtual care availability and usage in Ontario in order to apply lessons learned for decision-making going forward?

    Specifically, what steps has the Ministry taken to

    a) conduct a comprehensive analysis of virtual-care usage and costs across the province during the pandemic and decide whether the temporary changes (such as new billing codes) should be made permanent;

    b) engage health-care providers, both who had and had not previously used virtual care in their practice before the pandemic, to obtain feedback on their experience of offering virtual care during the pandemic;

    c) collect feedback from patients across the province on their experience of using virtual care during the pandemic to gather and incorporate

patient views into future decisions related to providing and funding virtual care tools; and

d) develop performance metrics for measuring the experience of both health-care providers and patients with virtual care during the pandemic and identifying areas for improvements going forward under pandemic and non-pandemic circumstances?

19. If the Ministry has not taken steps or for any steps outstanding, are there any plans and what are the timelines?

Auditor's Recommendation 13

To evaluate the impacts of the COVID-19 pandemic on calls to Telehealth Ontario and apply lessons learned to decision-making going forward, we recommend that the Ministry of Health:

- continue analyzing Telehealth Ontario call volumes and wait times to ensure that adequate capacity and resources will be available if Ontario faces subsequent waves of COVID-19; and
- explore options or solutions (such as creating a separate phone number for calls related to COVID-19) that help distinguish the nature of calls and reduce wait times for non-COVID-19 calls going forward in response to potential subsequent waves of COVID-19.

Possible Committee Questions

20. What steps has the Ministry taken steps to evaluate the impacts of the COVID-19 pandemic on calls to Telehealth Ontario and apply lessons learned to decision-making going forward?

    Specifically, has the Ministry

    a) analyzed Telehealth Ontario call volumes and wait times to ensure that adequate capacity and resources will be available if Ontario faces subsequent waves of COVID-19; and

    b) explored options or solutions (such as creating a separate phone number for calls related to COVID-19) that help distinguish the nature of calls and reduce wait times for non-COVID-19 calls going forward in response to potential subsequent waves of COVID-19?

21. If the Ministry has not taken steps, or for any steps still outstanding, are there any plans and what are the timelines?

APPENDICES

1. OAGO, "Virtual Care: Use of Communication Technologies for Patient Care" (2020 *Annual Report*).

2. Ministry's Status Update

3. Digital First for Health Strategy (Ministry of Health news release, November 13, 2019.