



#### Building a Virtual Ecosystem for the Future

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# **MUSC Virtual Care Ecosystem: FY24**

~50k+ encounters

Asynchronous

dx + tx

annually

9 SC hospitals;

MD, APP, RN

Rounding, consults,

emergency response

~60 total in US

50+

Inpatient

based outcomes

Improve access to specialty

care and improve hospital-

#### Ambulatory

Extend MUSC brand. improve access, offer convenient care

% virtual, capacity management, patient satisfaction, access equity, timeliness, value-based performance, new patient capture, patient engagement & retention



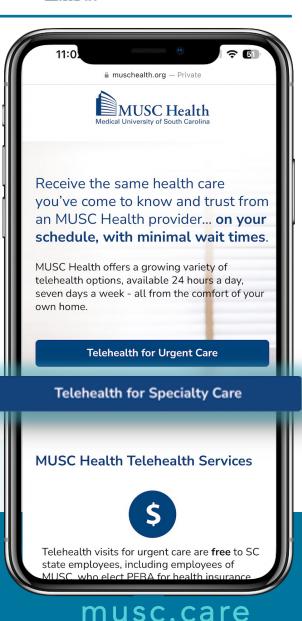
## Virtual Specialty Care

Solving for timely access and capacity concerns simultaneously while improving physician work-life balance To watch Ross' experience with Virtual Specialty Care, scan the QR code.



#### Highlights:

- Minimal wait times
- Patients may self refer and self schedule directly through website
- Clinical support team coordinates care, ensuring the patient can complete necessary labs and imaging close to their home

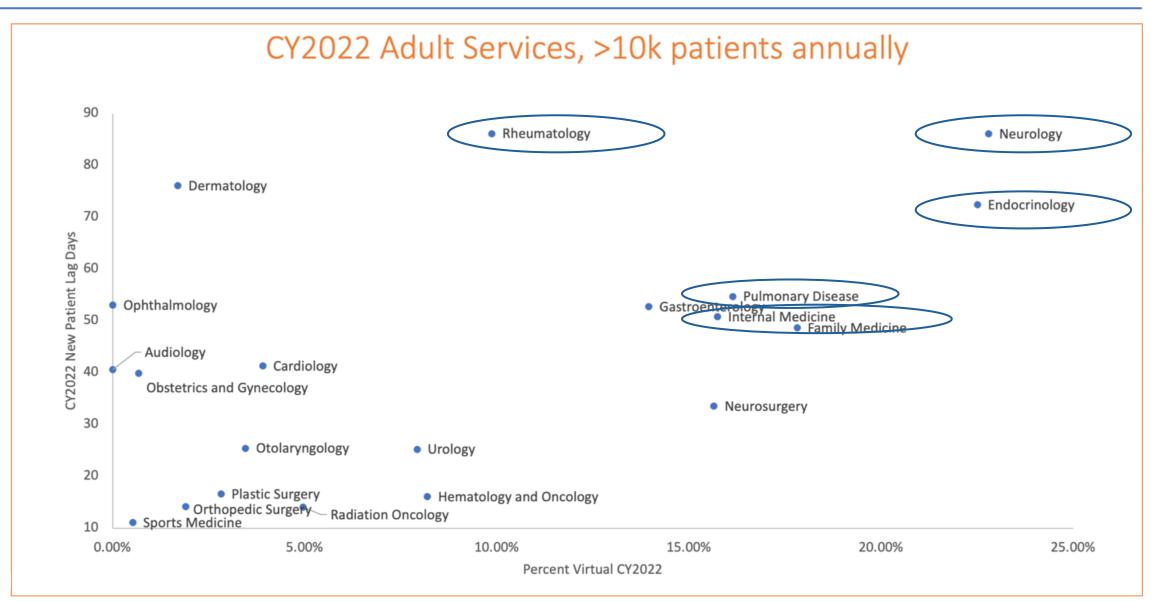


# **7** Specialties

Endocrinology, Rheumatology, Neurology, Pulmonology, Sleep Medicine, and Benign Heme/Sickle Cell, Primary Care 86%

"Top Box" Willingness to Recommend

#### Specialty Determination Matrix [High volume]



**STRATEGIC BENEFITS** 

## **Optimizing** Outpatient Telehealth Visits

**ACCESS METRICS** timeliness, new patient recruitment, visit loss Cost reductions, fee-for-service, contracted services, value-based **SUSTAINABILITY** performance metrics, patient retention, patient satisfaction, centralized staffing support with standardized workflows

% virtual, capacity management, patient satisfaction, access equity,

Work-from-anywhere, work-life balance, reduced burnout, improved staffing support

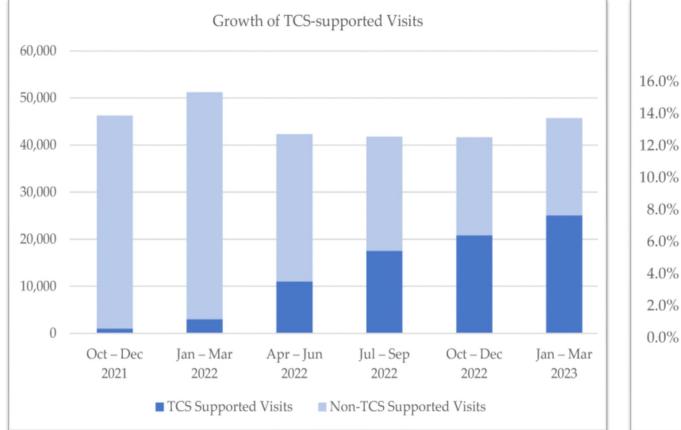
1,800 14,000 Visits per month **Providers Unique Patients** 700 97,000 Visits per day **Participants** 10,800 14 **CMAs** invited

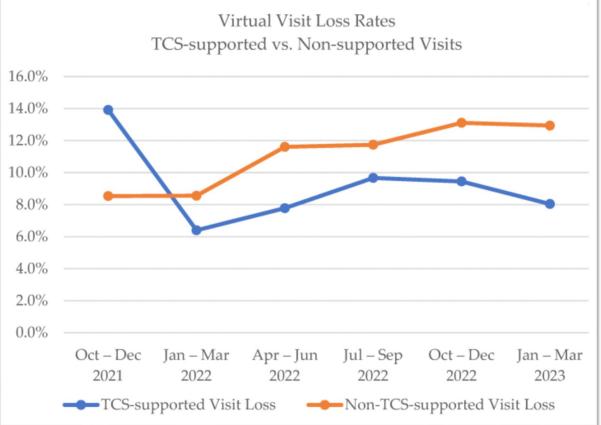




## **Centralized** Virtual Staff Reduces Friction









#### Establishing a Centralized Virtual Visit Support Team: Early Insights

by & James McElligott <sup>1,2</sup><sup>(0)</sup>, <sup>(2)</sup>, <sup>(</sup>

Healthcare 2023, 11(16), 2230; https://doi.org/10.3390/healthcare11162230

#### **Improving** Patient Experience



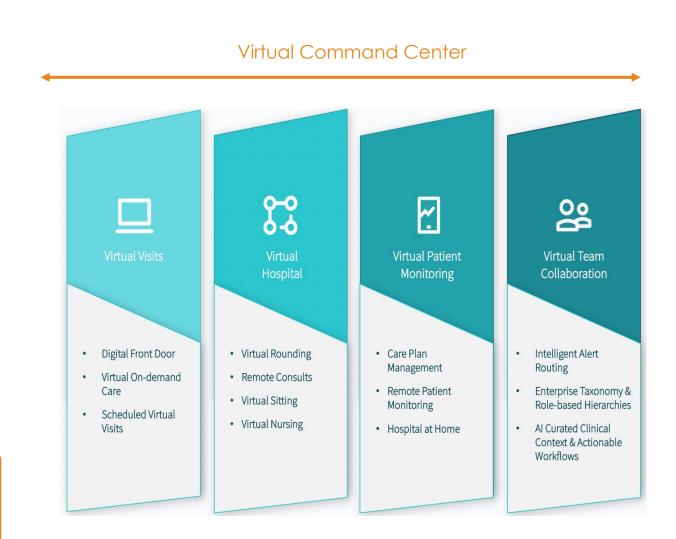
USC Health

#### Platform approach: dynamic interoperability





Collapsing historical point solutions into a unified, integrated platform approach (where possible) will enable future AI use cases



#### Platform approach: dynamic interoperability



 Singular dashboard approach provides workforce efficiency across the continuum of care

- All disciplines engage using dashboard functionality
- Platform integrations gain momentum and yield Al opportunities

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**Virtual Visits** 

7894561237

4567894567

456789457

7539517894

65498778984

7539874544

PATIENT NAM

John Doe

Mary Smith

Abraham Cole

Lesley Lory

Peter Parker

Moira Schitt

DATE OF BIRT

7894561237

4567894567

4567894577

7539517894

65498778984

7539874544

PROVIDER

David Lin

GENERIC

Jessica Cox

David Lin

Jessica Co

David Lin

CARE CENTER

SCHOOLS

SCHOOLS

SCHOOLS

SCHOOLS

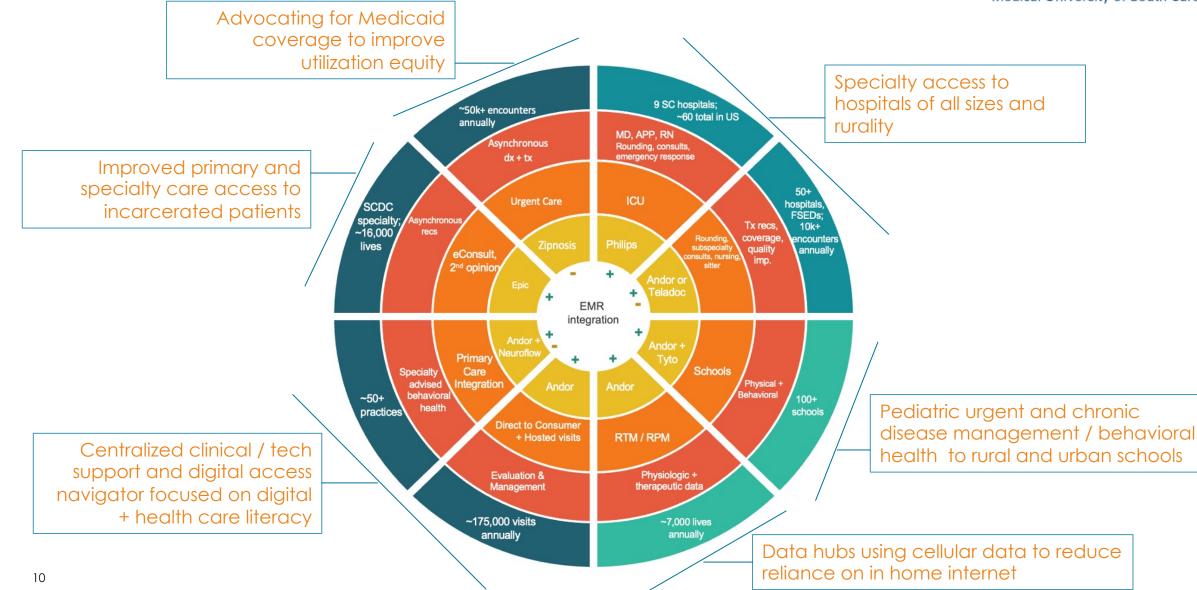
SCHOOLS

SCHOOLS

MRN

#### **Focus on Equity**





#### In Summary

- o fully virtual service lines
- investments in EHRintegrated telehealth platform
- development of a nurseled, centralized support team to assist ambulatory telehealth visits enterprisewide
- an increased focus on telehealth equity

