

TMT Interview with Bryan T. Arkwright: Is Your Hospital or Health System Ready for Telehealth Adoption? Four Key Questions

Leaders in telehealth are recognizing that the technologies and tactics to deliver virtual medical, health, and education services are on a trajectory to change healthcare in paradigm shifting ways. States continue to pass parity laws, breaking down past reimbursement barriers and challenges. The year 2015 marked the introduction of additional [telehealth payment innovations](#) by the Centers for Medicare and Medicaid Services. Regional and local market competition among hospitals and health systems rise as fee-for-service reimbursement declines.

Telehealth has introduced new competition with non-traditional market players, and it is important to know your exact market position and whether this new care delivery model and strategy is right for your organization.

True telehealth adoption is fundamental to advance an organization's population health and/or accountable care initiatives. Telehealth is no longer a cutting edge innovation. It is proven technology and a valuable piece of an integrated health system. Resistance to any of the four telehealth adoption questions or adherence to status quo processes and beliefs of early telehealth operations jeopardizes progress.

Key Telehealth Adoption Questions

Q: *Do we have an executive leader who will sponsor a telehealth initiative?*

Mr. Arkwright: If the answer is "Yes", your organization can focus on integrating telehealth with the overall vision and strategy.

If the answer is "No," this is non-negotiable to realize telehealth success. Seek to identify an executive, physician, or partner who can facilitate a telehealth workshop to educate your organization's leaders and assist finding the right sponsor.

Q: *How will telehealth (virtual, digital, and mobile health) fit within our broader portfolio*

of services?

Mr. Arkwright: Rather than evaluating telehealth as a one-off basis, step back and consider it in the context of your organization's strengths, weaknesses, opportunities and even ways to mitigate threats. Also, consider telehealth in the context and frame of your organization's overall vision and strategy. Telehealth may already be a consideration or have allocated resources, and the detailed plans and experience are all that is needed to implement it.

Q: Can we have success with telehealth?

Mr. Arkwright: Telehealth success is strongly dependent on adoption, vision, strategy, and subject matter experience. Your organization may have all four and simply need additional reserve troops to realize its goals.

However, it is more common for organizations to lack depth in any one of these four areas. Once the weak areas or needs are identified, the path to telehealth success can begin.

Q: Are we stuck in the past with our telehealth program?

Mr. Arkwright: Having a limited number of resources or no clear strategy to include executive sponsorship are signs that telehealth adoption is suboptimal. These and other signs and symptoms that an organization is stuck in the past and resistant to telehealth adoption are listed in Table 1. One should not consider this an all-inclusive list.

Asking these questions within your organization can assist and speed telehealth adoption. Hospitals and health systems succeeding with telehealth realize value and strong returns in clinical quality, patient/family satisfaction, cost savings, competitive advantage, and new revenue.

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Table 1. Indicators that an organization is stuck in the past and resistant to telehealth adoption

- Limited resources
- No clear strategy to include executive sponsorship
- Only a single or few services offered
- Low volumes/utilization
- Lack of clear reportable clinical and financial metrics/goals