



Video Transcript

Value-for-Money Audit: Virtual Care: Use of Communication Technologies for Patient Care (2020)

As part of our 2020 Annual Report, we performed a value-for-money audit on Virtual Care in Ontario.

Virtual care, often called telemedicine, is a non-traditional way of delivering health-care services remotely using telephone or video visits. There has been a recent explosion of interest in digital health strategies across Canada, especially due to the COVID-19 pandemic. Virtual care enables patients to access care without leaving their homes, reducing the risk of disease transmission.

The Ontario Telemedicine Network, part of Ontario Health, is responsible for the province's virtual care program. The Ministry of Health provides oversight. Ministry expenditures on physician billing for virtual care increased almost 400%, from \$18 million to \$90 million, between 2014/15 and 2019/20. This does not include billings for virtual care using temporary arrangements introduced in mid-March 2020 during COVID-19.

We reviewed the Ministry and Ontario Telemedicine Network to ensure virtual care services were being run efficiently and effectively, and were meeting the needs of Ontarians.

We found that long-term goals and targets for virtual care have not been established, and progress to integrate the services into the broader scope of health-care services in Ontario has been slow. The Telemedicine Network has been around for almost 15 years, but the Ministry has not yet outlined a framework for what virtual care should look like in Ontario. The Ministry only began allowing physicians to bill for video and telephone visits outside of the Telemedicine Network because of COVID-19.

Some private companies have begun to offer virtual care services to patients for a fee. This has created health-care inequities between those who can afford it and those who cannot. These companies also operate without Ministry of Health oversight.

As well, oversight on physician billings could be improved. For example, in 2019/20, one physician billed \$1.7 million for virtual care and reported seeing as many as 321 patients virtually in a single day. Another physician billed the Ministry almost \$113,000 for over 2,200 virtual care visits, but had no corresponding visits recorded by the Telemedicine Network.



This report contains **13** recommendations, consisting of **28** actions including:

- Study virtual-care delivery models in other jurisdictions to determine whether the Telemedicine Network's role should be changed given the evolution of virtual care.
- Develop a framework for monitoring virtual-care visit and billing data and conduct reviews when unreasonable or unusual trends are noted.
- Review physician delivery and billing for virtual care to expand the availability of virtual-care options.
- Revisit virtual care strategy in light of COVID-19 and identify long-term targets, and
- Conduct a comprehensive analysis of virtual-care usage and costs during the pandemic, and decide whether the temporary changes should be made permanent.