



# Can remote monitoring address concerning heart health trends, and what's most important to employers when choosing their vendor?



Research and White Paper by EHIR and Hello Heart

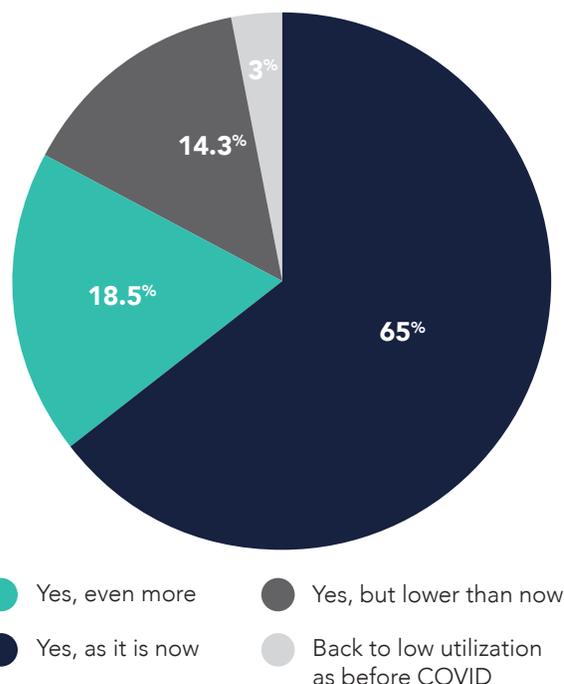
During September and October 2020, we surveyed 100 top F500 benefits executives across 68 large self-insured employers about remote care and heart health trends. The results revealed the following key insights.

## Remote care is here to stay.

The silver lining of COVID-19 was the rise of remote care. Members saw adoption and engagement with digital therapeutics and remote patient monitoring tools increase among their populations. Employers widely agreed that the adoption of remote patient tools as well as digital therapeutics are here to stay post Covid. In our research, we found that **83% of employers believe that the use of remote monitoring will be as high or even higher than it is today, post COVID.**

## Employers want tools that integrate with their care ecosystem, work with all doctors, and deliver best-in-class clinical outcomes.

We are witnessing an explosion of remote patient monitoring systems that are connected to brick and mortar healthcare systems, minute clinics, pharmacists, and telehealth teams.

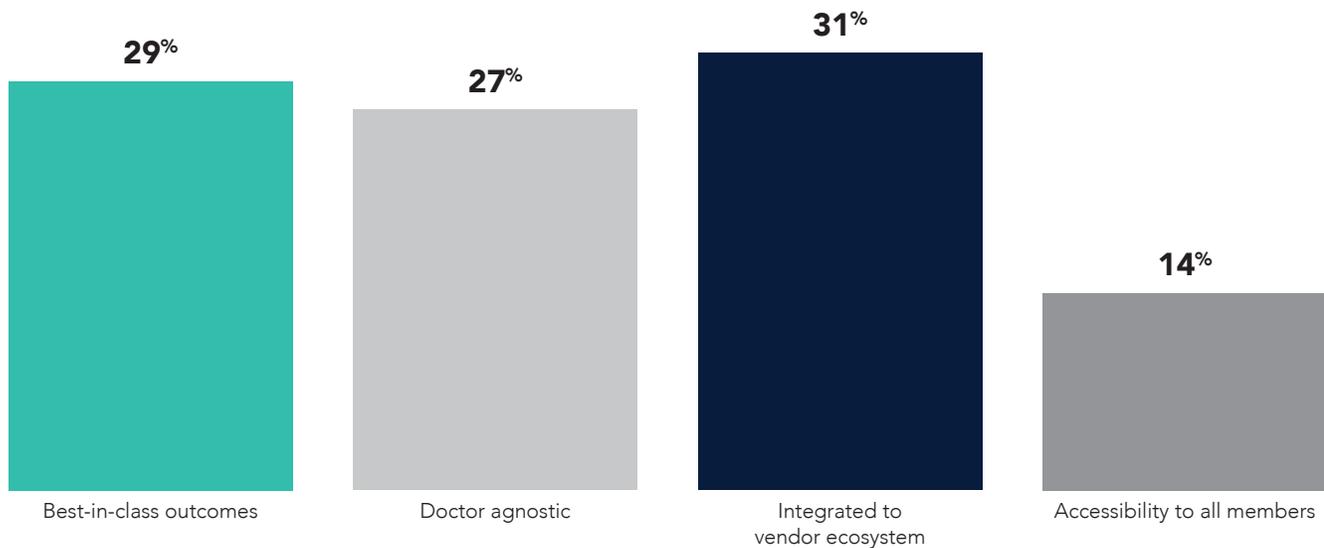


What's most important to employers when choosing from these various remote patient and/or digital therapeutics tools? First, let's distinguish between them:

- RPM (remote patient monitoring) solutions are used to facilitate care between a specific group of clinicians and members at home. The technology that is utilized enables the monitoring of patients outside of traditional clinical settings, such as in the patient's home or in a remote area.
- DTx (Digital therapeutics) deliver evidence-based therapeutic interventions to patients. They are software-based solutions with high-quality digital user experience, and deep technological capabilities that move the needle on population health. They are used to prevent, manage, treat, or identify risk of a broad spectrum of physical, mental, and behavioral conditions.
- In some cases, Digital Therapeutics also have RPM capabilities, and in these cases, they tend to be integrated with all of the member's care teams rather than with a specific one (they are "doctor agnostic").

So what's most important to employers when choosing remote patient and/or digital therapeutics tools?

## What do you think is important in a solution that supports remote doctor visits in the new era of care?



Among remote patient tools, employers explained how and why they ranked clinical outcomes, support for doctor agnosticism, integrations, and accessibility as most important to remote care. From the research, we found that **employers value integration with their ecosystem partners and care systems and best-in-class clinical outcomes as most important to them** when selecting a vendor partner.

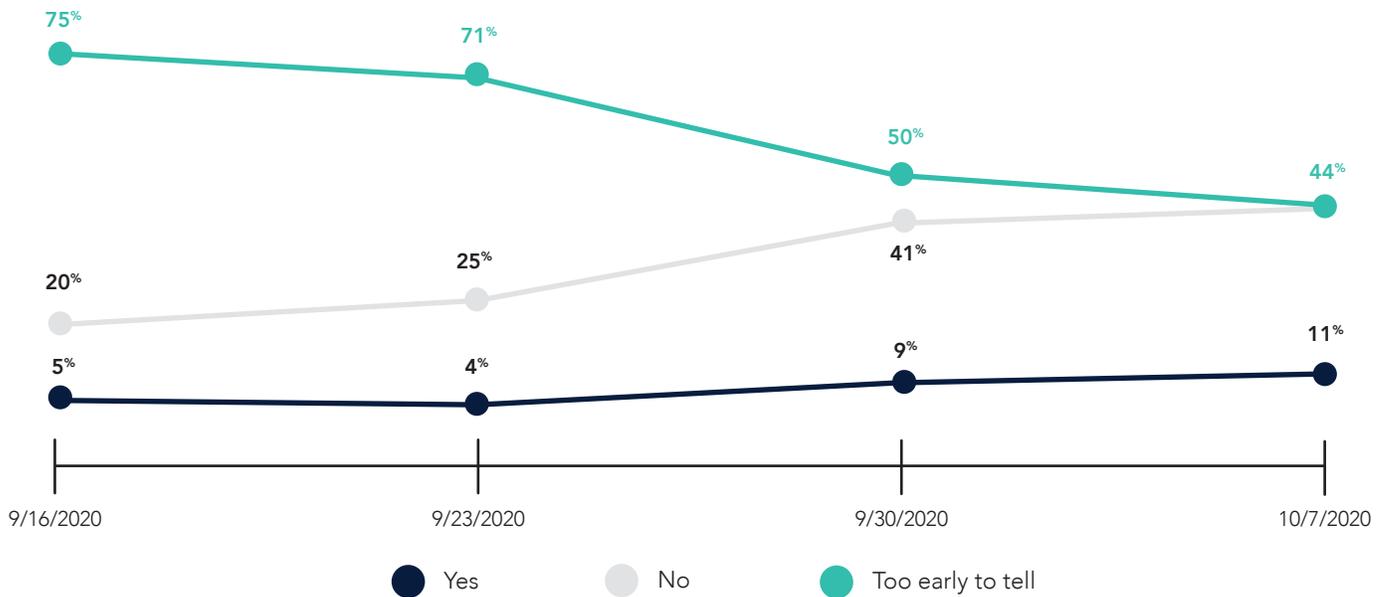
Why are these factors most important in a solution that supports remote doctor visits?

- **Best-in-class:** Employers saw clinical outcomes as one of the most important criteria. Solutions must have outstanding and sustainable clinical outcomes. Sustained clinical outcomes have a significant impact on reducing member risk and lowering employer costs.
- **Doctor Agnostic:** The relationship with a patient's doctor is critical. Supporting that ongoing relationship by enabling patients to send clinical readings and information to their doctor directly has emerged as an important outcome of COVID. When patients are able to share this important information with their care teams via email or fax, more issues can be addressed and treated remotely.
- **Integrated with Vendor Ecosystem:** Employers also highly value the ability to integrate remote solutions with their existing vendor partners and care systems. This ability to integrate leads to increased engagement for all of the employer programs. Remote tools don't replace employer health and wellness programs, but serve as a complement to them, especially if their members have multiple systems or care teams in place.
- **Accessibility to All Members:** Accessibility and inclusion is crucial to employers. This allows every member, regardless of age, gender, ethnicity, language, and education, the ability to have equal access to solutions that impact their health and well-being.

## Most employers didn't see a dramatic change in cost in 2020, but there was a higher mortality rate from hypertension and heart health.

When our research started, employers were unclear if there was a spike in claims cost, as most thought it was too early to make this determination. However, over time, there was a shift to more certainty regarding claims cost spikes. The American Heart Association reports that there has been an increase in mortality related to heart disease, with some geographies seeing a 398% increase in heart-related deaths and an 11% increase overall in 2020.<sup>1 2</sup>

### Are you seeing a spike this year in catastrophic events and deaths related to heart disease in your population?



Although it was unclear whether COVID-19 had an impact on claims in the early stages, there were some anecdotal reports among employers that suggested spikes in mortality due to heart attacks and strokes.

**Case in point:** An employer shared that the mother of one of her employees hadn't been able to see her doctor during the pandemic. She decided to be seen at the emergency room after experiencing what was thought to be heart issues. While waiting for five hours in the emergency room for triage, she had a catastrophic heart attack and stroke.

### Key Takeaways

**Continued adoption and engagement with remote care tools is expected to grow even more in the post-COVID era. Employers are prioritizing best-in-class clinical outcomes and ecosystem integrations as key features in their desire to partner with remote solutions.**

## Sources

Thank you to all the benefits leaders who shared their feedback for this survey:



## Citations:

<sup>1</sup><https://www.heart.org/en/news/2020/07/10/more-people-are-dying-during-the-pandemic-and-not-just-from-covid-19>

<sup>2</sup><https://www.cidrap.umn.edu/news-perspective/2021/01/more-us-cardiac-deaths-less-heart-testing-globally-covid>