

# How the pandemic helped healthcare go digital

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Bupa Australia



# Foreword

Rapid advances in technology and digital during the first two decades of the 21st Century have ushered in a new era in convenience, simplicity and personalisation for consumers. From shopping to music, banking to travel and everything in between, digital technology has transformed the way we live our lives. Perhaps everywhere, except, when it comes to our healthcare.



That changed in March 2020, as the nation went into lockdown due to COVID-19, and life as we knew it changed. In the space of days, we went from an office-based workforce to 'working from home'. For many healthcare providers and their patients, the choice was to embrace digital or have no choice at all.

At Bupa, we wanted to ensure customers didn't neglect their health because of difficulties accessing treatment and services. That's why we moved quickly to cover customers for consultations and treatments delivered digitally. We wanted to keep healthcare accessible, relevant and simple.

Our customers and providers embraced the change, and we were proud to be the first health insurer to announce permanent funding for many telehealth services.

Alongside the alternate modes of delivery of traditional healthcare, we saw preventive health adapt quickly with wellness programs moving the gym to our homes and the introduction of physiotherapy consults delivered through virtual reality.

The pandemic rapidly escalated adoption of digital technologies in healthcare. For the benefit of consumers everywhere, we must continue to innovate and embrace change.

## **Emily Amos**

Managing Director,  
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# Is telehealth here to stay?

In an unprecedented year for health consumers and providers, the challenges of 2020 forced the healthcare sector to adapt quickly and be open to rapid change. This led to the acceleration of trends and innovations such as 'telehealth' or healthcare services delivered over the phone or internet, and via virtual technologies.

While digital health is not new, a greater understanding of its application and benefits experienced during COVID is expected to have a lasting impact on the way healthcare is delivered in Australia and globally for the future.

While Australia is moving to a state of "COVID-normal", notwithstanding snap lockdowns, and telehealth appointments and claims have dropped from their peak during the major lockdowns of 2020, it is likely that digital health delivery will continue to have an ongoing role for both Australian practitioners and their patients. The Commonwealth Government has extended Medicare Benefits Schedule (MBS) funding for telehealth to the end of this year. Bupa supports this move and encourages the government to consider permanent support for the services.

The speed at which uptake continues will be determined by a number of factors with clinicians and designers working together to create platforms that deliver the best health outcomes for Australian consumers.





# Healthcare goes digital

On March 25, 2020 Australia was in the early days of a nationwide lockdown due to COVID-19. Under government directives, some non-urgent medical care was cancelled for in-person consultations.

Recognising the impact this could have on our members and providers, Bupa moved quickly to announce the temporary funding of video and telephone consultations for customers, helping to ensure our members could continue to receive the healthcare treatment they needed.

**“The speed at which telehealth was turned on shows the system can move at pace,”**

Bupa’s Director of Clinical Governance, Dr Zoe Wainer\*, says.

Since that time Bupa has paid claims for more than 30,000 telehealth consultations for our Australian customers and more than 165,000 claims for our members studying or working in Australia who are not citizens.

Given overseas students and workers do not have access to Medicare, Bupa covers GP consultations as part of their policies. This accounted for approximately 85% of their telehealth consultations since March 2020.

This paper focuses on digital health services provided to our Australian customers (not overseas students or workers), our insights and digital trends in usage for claimable ancillary or Extras services such as psychology, physiotherapy and speech therapy.

## Telehealth over time

A healthcare consultation that takes place over the phone or by video call, rather than in-person, is known as telehealth.

Before the COVID-19 pandemic, the use of telehealth was largely limited to rural and remote Australians for specialist consultations.

During 2020 with COVID-19 restrictions in place, the use of telehealth for GP appointments and allied health services such as physiotherapy, psychology and speech therapy became common place and ‘essential’ – ensuring Australians could look after their health from home.

Now, with Australia moving towards a state of COVID-normal and non-urgent healthcare service resuming across the country, telehealth consultation numbers have stabilised.

Post-pandemic, and as our comfort in digital delivery of healthcare increases, it is expected to continue to play an important role in the healthcare plans of many Australians.

\*Dr Zoe Wainer has now been appointed Deputy Secretary for Public Health for the Victorian Department of Health, and left Bupa in early June 2021.

## Twelve months of telehealth

Australians initially turned to telehealth as a COVID-safe alternative to in-person appointments, but soon realised that the benefits extended well beyond safety:

**“I was more relaxed in my consultation. I was in my familiar environment and the specialist and I were both at ease. I didn’t have the stress of getting the two people I care for sorted before the 90-minute drive to the city hospital for this appointment. I saved money on fuel and parking fees. I didn’t have to sit in a full waiting room. I didn’t have to turn down work for that entire day because of the travel time and waiting room time blowouts.”**

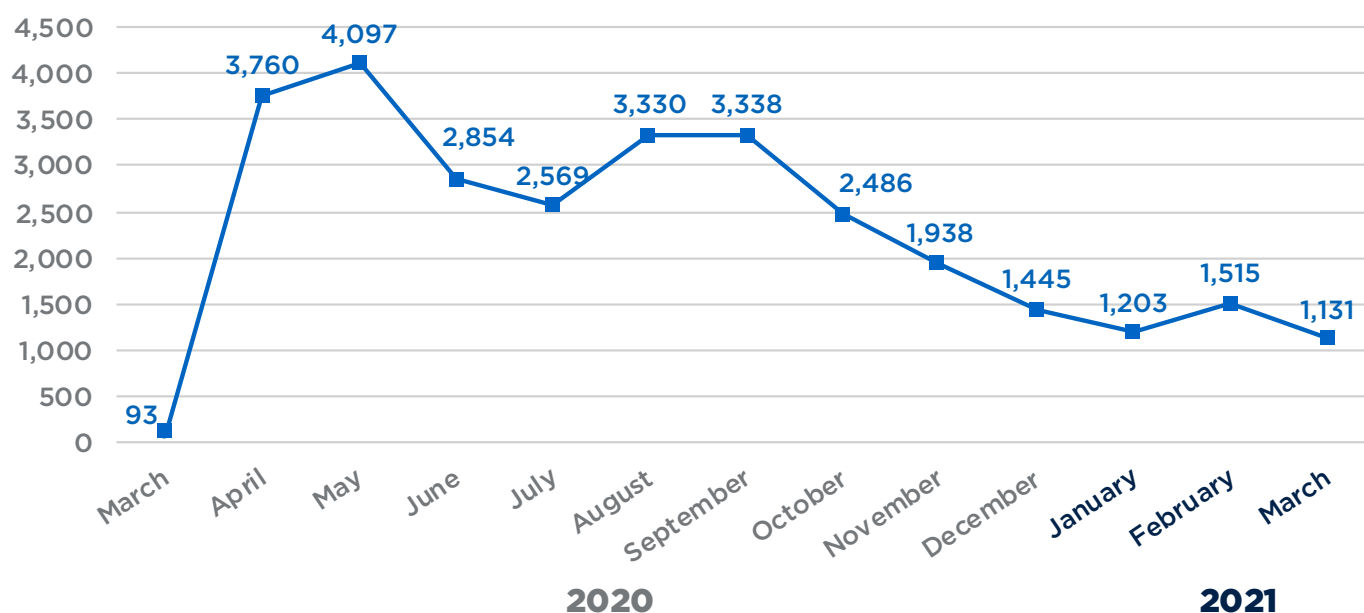
-Australia’s Health Panel respondent, Consumers Health Forum, May 2020.<sup>1</sup>



### Telehealth services claims by month

COVID-19 was officially declared a pandemic by the World Health Organisation in March 2020. That month, Bupa members made just 93 claims. But with the first national restrictions being introduced at the end of that month, claims soon quickly escalated to a peak of 4,097 by May.

#### COVID 19 Ancillary Telehealth Claims, Bupa



<sup>1</sup> <https://chf.org.au/media-releases/patients-feeling-better-telehealth>

## Twelve months of telehealth (Continued)

This surge showed members took to a safe, convenient way to consult with clinicians who in turn embraced the technology and “webside manner” needed to deliver telehealth services.

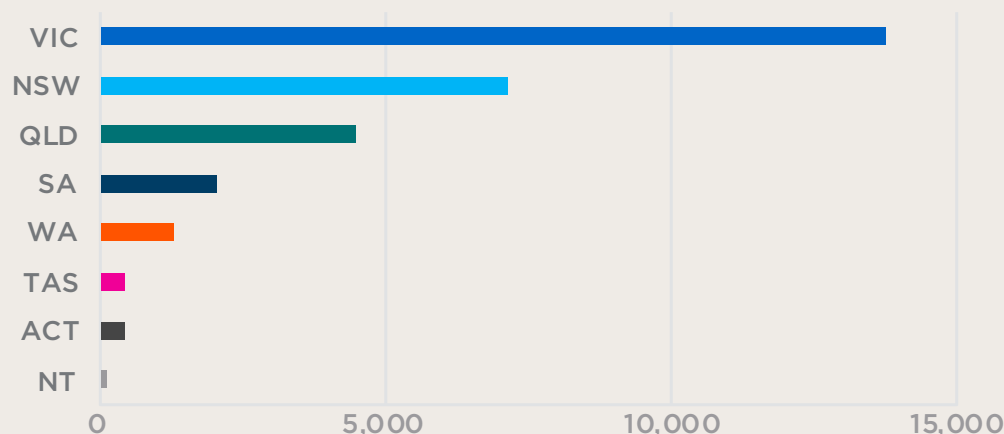
As restrictions eased, claims dipped before rising again when Melbourne went into hard lockdown in early August and Victoria was declared a state of disaster.

With restrictions lifted nationally and by state, claims have settled coming in at just over 1,100 in March 2021.

While this new level of claiming is significantly lower than during the lockdown periods, it does point to an ongoing role for digital health care.

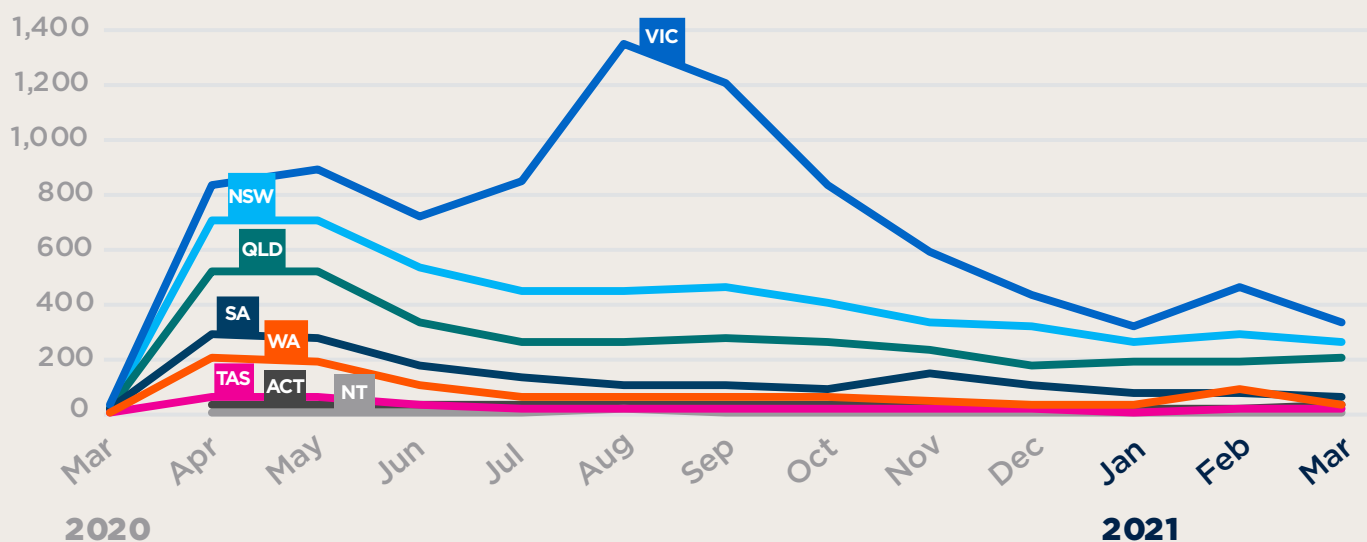
Analysis of MBS data by the University of Queensland’s Centre for Online Health also shows telehealth appointments for mental health and allied health appointments steadying over the first quarter of 2021.<sup>1</sup>

## Total telehealth services by state\*



Victorians were the biggest users of telehealth from March 2020 – April 2021, with usage spiking in the state during stage 4 lockdowns.

## Distinct people claiming telehealth services by month/year\*



Ibid. Claims for 30.3.20 – 2.4.21





## Australians turn to telehealth

From the outset, Bupa worked with a number of industry groups and associations to ensure appropriate guidelines were in place for healthcare providers, and to clarify what type of services would be covered. Dental, for instance, was excluded given the limited role telehealth can play in treatment of that nature.

The agreed list of providers consisted of psychology, physiotherapy, counselling, occupational therapy, speech pathology, dietetics, exercise physiology and select midwifery services. Generally speaking, these services can be provided using phone or video conference solutions and treatment can be provided or supervised without requiring physical contact.

Physiotherapy was a quick adopter of the technology, accounting for just over a quarter of total claims, while psychology has emerged as the most claimed service during the initial 12 months of operation, responsible for almost one-third of all claims. Speech therapy (15%) and dietetics (13%) were also popular with members.

### Top telehealth services

	Psychology	33%
	Physiotherapy	26%
	Speech therapy	15%
	Dietetics	13%

Psychology claims were particularly prevalent for those aged under 50, with uptake remaining strong throughout the year. Physiotherapy was the most common telehealth claim for members aged 50 and above.

At its peak, telehealth accounted for almost half **(49%)** of all mental health MBS consultations in April and May 2020. By March 2021, it had steadied to approximately 20 per cent.<sup>1</sup>



<sup>1</sup> <https://coh.centre.uq.edu.au/telehealth-and-coronavirus-medicare-benefits-schedule-mbs-activity-australia>



# What the future holds

Australian consumers are expected to continue demanding current telehealth offerings (video and phone calls) and new digital innovations, too. Deloitte Australia's Technology, Media and Predictions 2021 report says more than 10 per cent of Australians will be using telehealth in 2021, far exceeding the global average<sup>1</sup>.

**“(And) by 2026 there will be a shift to virtual health as a consumer norm,”**  
Deloitte says.

According to PwC's *Australian Insights from the 2021 Global Top Health Industry Issues*<sup>2</sup>, prior to the COVID-19 pandemic, only one in five people aged 45 and above had received care virtually. This number jumped to one in two during the pandemic, showing the willingness of older generations to take up telehealth where previously they may have been uncomfortable with the platform. Eighty nine per cent of people who used video virtual care during this time said they would be willing to use it again.

Dr Zoe Wainer says in the future, digital healthcare should not just focus on the ‘tele’ (video) side of consultations.

**“We are quick to look at the platform and its funding when discussing the future of telehealth, rather than clinicians and designers focusing on delivering the best outcomes for patients and designing the model of care that will deliver.”**



**“The conversation now needs to be about when is telehealth the right mode to deliver the optimal health outcomes, so that it augments delivering the right care at the right place and at the right time. This may be video, phone, face-to-face or bundling a combination of these settings together along the health journey,”**

Dr Wainer says.

What is clear is clinicians and the designers of digital health software and hardware need to collaborate in an iterative fashion, as more technology becomes available and patients and clinicians become more savvy users. This will be critical to connecting the patient experience.

“Cutting costs does not deliver the best outcomes and telehealth won't always be the right option in every scenario. We are strong believers in supporting the best outcomes the first time around. There is a strong return on investment if we can keep people healthy,” Dr Wainer says.

So, all stakeholders should ideally be learning and working together on developing telehealth for the best results - for every patient.

<sup>1</sup> <https://www2.deloitte.com/au/en/pages/technology-media-and-telecommunications/articles/tmt-predictions.html>

<sup>2</sup> <https://www.pwc.com.au/health/top-health-industry-issues.html?icid=GTHII-social-linkedin-organic-pwcaushare>

# Australians set to benefit from telehealth

According to Dr Wainer many Australians would benefit from the ongoing availability of telehealth in various forms:



**Regional, rural and remote:** Telehealth offers the potential to meet with specialists remotely, giving more Australians access to more services regardless of their location. International specialists could also be contacted for second opinions.



**Seniors:** Older Australians who find it harder to make their ways to appointments can be consulted from the comfort of their living room.



**Immuno-compromised:** Whether it's a regular flu season or a global pandemic, attending a consultation from home will often be the safer option for those with underlying illnesses or vulnerabilities



**Time-poor:** As the lines between work and personal lives increasingly blur, the ability to attend appointments for basic health needs from home will suit many Australians.



**Practitioners:** It also allows doctors who are vulnerable to COVID or immuno-compromised to continue to provide consultations.

## Telehealth in Australia's heartland

For many Australians living in regional, rural and remote areas, attending a healthcare appointment in-person can be time consuming and inconvenient, which means they may be letting some of their healthcare needs slip. Dr Wainer said the convenience of telehealth services have obvious benefits for regional Australians.



"When your nearest physio or dietitian is an hour's drive away, it can be easy to let your health concerns go untreated. While there will continue to be a need for in-person treatment, telehealth has driven greater equity of access for all Australians, regardless of where they live.

"As the mental health impacts of the pandemic continue to unfold, we need to make it as easy as possible for people to seek help. Psychology services delivered via telehealth will continue to play an important role by removing the geographical constraints for regional Australians," Dr Wainer said.

# Overcoming challenges

Dr Wainer stresses there are challenges for the sector's growth:



Some practitioners are reluctant to move to video because they prefer a more traditional style of consultation that comes with face-to-face appointments, as there are non-verbal cues that can be helpful to the clinician.



The proliferation of apps, wearable devices and software transformations using artificial intelligence means managing multiple co-morbidities could be a challenge. This highlights the need for apps and devices to integrate as well as be able to monitor and manage multiple complex conditions simultaneously.



Telehealth services in the future need to be incentivised to deliver the positive health outcomes that matter to patients.

## A global perspective

While there are varying considerations and challenges contributing to the uptake of telehealth across the globe, Bupa Group CEO Iñaki Ereño said the pandemic had accelerated the pace of healthcare digitalisation by at least a decade.

“The rapid pace of change in digitalisation we’ve seen recently will be pivotal in shaping the future of healthcare. We have many digital health solutions across the various Bupa Group businesses globally already and are now planning for significantly more digital health coverage in each of the countries we operate. This is bigger than just telehealth, with opportunities spanning across primary and specialist care, health coaching and chronic care management,” Mr Ereño said.





Sanitas, Bupa Group's Spanish subsidiary, has been at the forefront of digital health since it first introduced its digital health platform Blua in 2016.

Blua used technology to bring patients and doctors closer together through a comprehensive video consultation service alongside a full set of digital features and home services. During the four years to 2020, Blua grew from a platform of 37 doctors to more than 3,100 doctors connecting with patients virtually. When Spain entered COVID-19 lockdowns in March 2020, Blua quickly moved from hosting 300 video consultations a day to 5000.

Recognising the change in consumer behaviour and the need to continually evolve, in October 2020, Sanitas built on the Blua platform to launch BluaU – an innovative digital health product that allows users to monitor their general wellness while still connecting remotely with health care professionals. Using wearables, the Internet of Things, big data and artificial intelligence, BluaU acts as a 'digital hospital' that can remotely monitor COVID-19 patients after being discharged. The app can also be used to monitor patients suffering from asthma, heart disease or obesity, and to monitor pregnancy. Users can also access a digital prevention program and record live tracking of their vital signs such as heart rate, breathing rates and blood pressure using their mobile phone camera, while still having same day access to virtual consultations with doctors from ten specialty areas.

This data-led digital approach to healthcare allows practitioners to diagnose and treat patients with regularly updated information, making for a precise and personalised experience.



Bupa Group CEO  
Iñaki Ereño said:

**“The difference this technology could make to individual wellbeing, public health and sustainability is immeasurable.”**



# Consumer trends

## Preventive health programs

With gymnasiums and sporting centres closed due to lockdown and exercise outdoor time restricted for some locations, many Australians turned to digital services to fulfill their fitness and preventive health needs.

At Bupa we offered our customers three months' free access to online fitness and

nutrition program 28 by Sam Wood and had more than 75,000 customers sign up.

We were encouraged by the consumer appetite for these types of programs. While there will always be a place for gyms, this showed the technology was capable of delivering fitness needs and will play a future role in preventive health and wellbeing.

## Mental health

In addition to the funding of telehealth services for psychology and counselling, Bupa also introduced or continued a number of specific mental health solutions, including podcasts, cognitive behaviour therapy and mindfulness training.

These programs resonated with many consumers and again serve as a model of what a reimagined mental health care plan could include beyond traditional face to face care.





## Physio goes virtual and more cutting-edge tech

Virtual reality (VR) headsets have come along in leaps and bounds since they were first sold to consumers to play video games in the 1990s. They are now used for an increasingly wide range of applications from educational tools to delivering mental health programs and training jet fighter pilots.

In September 2020, Bupa partnered with VR technology and health innovator XRHealth in the US to deliver physiotherapy programs in a ground-breaking trial. After patients were partnered with a clinician, they received a VR headset loaded with apps to guide them visually through their treatment plan. It's not only convenient, but a fun and engaging way to be guided to recovery.

Progress can be monitored through a real-time data-driven dashboard and there is no need to attend a clinic in-person.

The trial results were overwhelmingly positive with Bupa customers now able to access XRHealth physio as a Members First provider.

Other gamechangers for virtual health include new applications of smartphones and smartwatches as diagnostic tools. An Australian company, ResApp Health, has developed an app which uses smartphones to record a cough for diagnosis remotely. Along with advances in artificial intelligence, cameras in smartphones will be able to continuously monitor vital signs – a service developed by Israeli start-up binah.ai.





# Tips for consumers and providers of telehealth

## Consumers:

A video consultation with a healthcare provider can be convenient, safe, and effective with some preparation.

Here's a guide to help those who have not used telehealth services before:

- Does the clinician offer telehealth and is it appropriate for the appointment? The clinician may prefer to see the patient in-person depending on the reason for the visit
- Patients need the right technology - a mobile phone, tablet or computer with a web-cam, speaker and microphone. A good internet connection is required
- An app may have to be downloaded or an account opened - the clinic will give details
- Patients may prepare for the consultation by writing down what needs to be discussed and check any prescriptions which may need to be renewed. Scripts can be sent direct to the nearest pharmacy for pick-up
- Video calls should be made in a quiet room and facing a window – bright light behind callers makes it hard to be seen
- Callers should sit close to the camera so head and shoulders can be seen
- They should speak clearly and take notes, repeating any instructions to ensure they are correct.

## Practitioners:

- Consumers are very keen to use telehealth yet are not necessarily being given the option - an April 2020 survey by Australia's Health Panel found 98 per cent of consumers had heard of it yet only 34 per cent had been offered the service<sup>1</sup>. There is scope for practitioners to better promote their telehealth services
- Practitioners need to adopt the technology which means a video link and software approved by the Australian Government
- Patients need to be assured that the quality of the service is high and that an in-person appointment may be preferred
- Safety and privacy of patient data needs to be guaranteed
- Practitioners may require training to ensure their "webside manner" is appropriate so patients feel confident they are receiving the same standard of care as if they were attending an appointment in-person
- Patients may still prefer to visit in-person, with some believing they receive a higher standard of care.

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<sup>1</sup> [https://chf.org.au/sites/default/files/docs/ahp\\_survey\\_report\\_-\\_what\\_we\\_think\\_about\\_telehealth\\_-\\_mar-apr\\_2020\\_0.pdf](https://chf.org.au/sites/default/files/docs/ahp_survey_report_-_what_we_think_about_telehealth_-_mar-apr_2020_0.pdf)

