Engaging Key Partners for Effective V1C Care Transitions

Partnerships are the foundation of effective care transitions. Thoughtfully structured partnerships between virtual-care first (V1C) providers, healthcare purchasers, and other traditional or virtual providers can address the common barriers and sources of friction that impede successful care initiation, longitudinal co-management, and downstream referrals for necessary services. These partnerships and transitions are fundamental to ensuring that V1C realizes its full promise to improve access, equity, effectiveness, and efficiency of care and does not simply become yet another silo.

 The most effective relationships will stitch together fragmented care journeys and form the basis for high-value, clinically integrated hybrid care networks. They will ensure that care teams have the means for appropriate and timely bidirectional communication and that financial incentives are aligned to achieve new standards of excellence in patient experience, outcomes, and economics.

Partnerships drive effective V1C care transitions and greater value for healthcare purchasers, providers, and patients by:

- Increasing trust and awareness of the V1C model as clinical protocol-driven, evidence-based medicine led by clinicians
- Promoting collaboration rather than competition
- Improving alignment around shared goals and incentives
- Providing a basis for clinical integration activities such as co-created evidence-based pathways and transition workflows across the patient journey
- Streamlining communication through data sharing norms and targeted integration and interoperability efforts.

Top priorities for successful partnering with V1C providers:

- Be hyper-aware of existing payor network relationships and seek opportunities for V1C providers to augment rather than abrade networks.

- Demonstrate that V1C fills a gap—offering services that others in the network can't or don't want to at better quality/cost. These may be lower relative value unit (RVU) services essential to chronic management or on-demand access to high-touch specialty care for the most complex patients in a primary care population.

- Leverage sophisticated analytics and digitally-enabled automation platforms that are a hallmark of V1C providers to gain deep population and patient-level risk stratification capabilities. Empower V1C partners to prevent and avert costly exacerbations and excess utilization through performance-based rather than fee-for-service payment models.

Virtual First
Care Coalition   by   **DiME**
DIGITAL
MEDICINE
SOCIETY

- Insist on partners that can substantiate outcomes and economic claims with high-quality data.
- Favor those V1C providers prepared to demonstrate how they coordinate with other providers in a care network.

The optimal partnership model varies by partner type and motivations. To support V1C partnerships with the most critical stakeholder groups to power success, effective care transitions, and better care for patients, access the following quickstart guides for developing your relationships with key partner organizations:

ACOs	Employers	Payors

Visit the **V1C Care Transitions Toolkit** to view additional helpful resources.