

### Description:

This episode of the podcast focuses on the current state of adoption as well as steps that are being taken to popularize telehealth and accelerate its adoption.

### Transcript:

**VO:** Welcome to the Infosys healthcare and life sciences perspectives, the podcast and video interview series with thought leaders.

**Pramod:** Very good morning and welcome to another edition of our podcast series. We are very happy and fortunate to have Venky Ananth, our Global Head for Healthcare. One of the topics in this edition we want to touch upon is telemedicine. It's a very fascinating subject. Something which has been there for some time but yet, not really been as primitive as other technologies we are talking about. So, Venky, welcome to this edition of our podcast. I know telemedicine is something we've been talking about for some time, it's been in the news but isn't really scaled up as much as it ought to be. Why do you think is this situation?

**Venky:** Yeah, first of all, thanks for having me and it's a great question. While the benefits of telehealth are well understood, there is clear evidence that it's a great technology that can be incorporated in healthcare. The adoption is still not much as one would like it to be. But if you look at data, in the last five years alone, back in about 2015, we used to have about 5% adoption by physicians in telehealth. Now in about four-five years we have about 22% adoption, so it is increasing. Having said that, technology has much more progressed than the adoption rates by physicians and there are two main challenges. One is from a people and chain management perspective. The second dimension is the regulatory aspect. But having said that, any physician or any practice that has adopted this definitely sees the benefit and they are continuing to evolve and adopt. But having said that, what we really need to think about is how do you bring in a systemic change, a structural intervention into workflows of physicians? How do you make it comfortable for them? How can we design workflows so that it is natural for physicians to have telehealth as another channel of delivering care? That's really the shift that we need to do to, to, kind of, bring this change at scale. That's really how I think about it. But nevertheless, I think we're getting there because, as I said, statistically there's a 4x increase in adoption by physicians in the last four-five years alone. That's clear evidence.

**Pramod:** I think you make a valid point in terms of the shift and the change. Is it largely also to do with a more cultural, behavioral aspect from a patient perspective and not just about the patient but is that also really curtailing the adoption in the large sense, in terms of telemedicine or telehealth as we call it?

**Venky:** Yeah, most definitely. From a patient perspective, obviously it's a big change. Again, a lot of patients understand the benefits of it. Who won't like it? For example, I was looking at another piece of data. On an average if you decide to go and have an in-person consultation, the typical time that it takes is about one hundred and twenty-two minutes. Whereas in a telehealth model, it's about six minutes. So, it cuts out all the wait time, the need to call, get an appointment, the need for the physician practice to call you back and say "Hey, by the way, Mr. Joe, your appointment is tomorrow and it's at so and so time. Can you please confirm?" If you take the whole cycle, about one hundred and twenty-two minutes. So, it is a no brainer, right? But nevertheless, the general perception is that in-person is always better, which in certain situations is definitely true. But having said that, for

simple things like a post follow up, a non-ER visit, a non-emergency visit, a simple symptom like flu, etc. patients also understand that it is a great alternative. Physicians understand it. And these are, in my opinion, great starting points to actually drive telehealth as a primary mode of clinical care rather than in-person. That's really how I think about it.

**Pramod:** I think you make a very valid point again. Telehealth or telemedicine is more of an initial interaction with the doctor but not necessarily, I mean there's a lot of skepticism saying that there's not really a serious surgery or serious meeting. Is that actually also weighing in people's mind, in terms of adopting that?

**Venky:** There is. But then I would like to give you another interesting experience or project that we have clicked with in the neo-natal space. They called it a neo-natal program where they were able to deliver skills that are very specialized in the neo-natal space. This is for remote areas, where it is very hard to get there. Weather conditions, geographical reach, etc. is hard. But a bunch of community care members were given directions by the specialized team in a remote model. These are very specific programs that are in the early stages of adoption. But nevertheless, I think it bridges time, space and geography challenges for delivering very specialized healthcare clinical delivery.

**Pramod:** Very interesting perspective, Venky. One of things that telemedicine or telehealth will talk about, not about the patient as well as the hospitals, physicians, but the entire cost itself can be a huge gain for the entire system. Is that an increasing angle we should be looking into?

**Venky:** I look at it from two dimensions. One is, care costs are dramatically different in terms of being lower than in-person. The second aspect is the major gap that we have today in supply and demand. Demand far exceeds the supply that we have in terms of physicians, etc. In a telehealth model, the productivity will be far higher because you are able to now cater to...as a physician I can be much more productive if you have telehealth as part of your workflow. So, I believe, and therefore the overall cost at a scale would be much lower. So, absolutely telehealth will definitely bring down cost while addressing the gap that we have between the supply and demand in terms of clinical services available to the larger population.

**Pramod:** One other common perception is that it's not necessarily the best mode of doctor appointment, medical treatment for critical conditions. Is that something people are looking into? Or is it a regulatory viewpoint on this aspect? If you can shed some light on that part.

**Venky:** Sure. If from a regulation angle, it hasn't completely bloomed in terms of aligning with telehealth models, I should say it's very encouraging. For example, last year there was a new mandate from Medicare, where for chronic care conditions, Medicare did support telehealth models. Just see in October 2019, California, for example, passed two bills that supports expansion of telehealth models to either deliver prescriptions or for that matter, drive parity on payouts from payers. Be it a telehealth model or for that matter in-person model. So, from that perspective legislation is definitely keeping up and I'm very confident that it is only going to go up because this is a model that is the future.

**Pramod:** I think, again, you've raised right points. While commenting that keeps coming to everybody's minds is the infrastructure. Infrastructure, I mean it's a no brainer that it reduces costs, it makes productivity high with the physicians. Do we really have the infrastructure equipped to do that? And I'm not even talking from the provider's side. But even as an end consumer, do I really need to be equipped with a larger infrastructure to actually make this model work? Is that again a concern?

**Venky:** It's definitely a concern. In fact, interestingly FCZ planned on a major investment on how to upgrade infrastructure, particularly in remote areas where broadband continues to be a challenge in a country, primarily to support telehealth. So, that's definitely a problem today. But having said that, I think there are right investments that are being made to bring in that infrastructure support. Having said that, even on the private side, there are some very interesting developments. For example, Walmart stepped in and said that in rural areas, in remote areas, members or patients could actually leverage the broadband networks that the stores have so that if you or I don't have a proper broadband network to support a telehealth model getting care at my home, I could walk into my nearest Walmart and actually use the broadband network of the store to actually connect. These are models that are evolving. Public-private partnerships are evolving to support a business model like this. I think we are in early stages of adoption again, but I think we'll get momentum on this.

**Pramod:** I think you bring a great point on public-private partnership. I know the cause and talking about how the various telecom players can come into the picture. Do you increasingly see non-traditional companies getting into this model and then integrating with core healthcare providers? Is that something that's going to be padding out in the near future.

**Venky:** With the expanse of 5G networks etc. you have large telco players increasingly getting into the mix. Today healthcare delivery is a much-fragmented model but with the integration of infrastructure like 5G it can be much more experiential. Even the telehealth model today is a video but if you bring in technologies like AR/VR kind of a concept, which needs much robust infrastructure supported by large telco players, it's going to make that experience much richer. That's really where the future is going.

**Pramod:** Wonderful. My last question. Companies like us, Infosys, where we can increase technology in the actual sphere of healthcare. Are we really seeing that in aspect of telemedicine, telehealth with our partnership that we're doing, are we robust on that? Your viewpoint on that?

**Venky:** The way we think about it is, like you earlier asked, this is multiple industries coming together to deliver to member or patient. So you have traditional constituents like your provider or a physician, you have the payer, then you have the member and then you have the underlying infrastructure that needs to come into play, supported by very robust technology that is seamless. Because experience is key here, process is very key because you have to bring in adoption. To orchestrate all this, that's where we see seminal role in terms of bringing all the constituents together and making telehealth a reality in healthcare. That's how we see it.

**Pramod:** Wonderful. Thank you so much, Venky, again for your time. You shared great insights, great perspectives. We look forward to another edition of our podcast series. Thanks again, Venky for your time.

**Venky:** Thanks for having me.