

Virtual care works best when patients see their own family doctor, study finds

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APPLIED HEALTH RESEARCH QUESTION

DO VIRTUAL VISITS OUTSIDE AN EXISTING FAMILY PHYSICIAN RELATIONSHIP LEAD TO HIGHER HEALTHCARE USE?

KEY INSIGHTS

- Compared to patients who had a virtual visit with their own enrolling physician, those who had a virtual visit with a physician outside their enrolling group...
 - were **66%** more likely to visit the emergency department within 7 days.
 - were **25%** more likely to have an in-person visit and **88%** more likely to have another virtual visit within 7 days.

Methods: This study of 5,229,240 Ontario residents who had a virtual visit between April 1st, 2021 and March 31st, 2022 used propensity score matching to match 4,173,869 patients who had a virtual visit with their enrolling physician to 1,055,371 patients who had a virtual visit with a physician outside their enrolling group. The primary outcome was ED visits within 7 days.

Virtual care is associated with higher subsequent healthcare use when used outside the context of an existing clinician-patient relationship.

Applied Health Research Questions are funded by the Ontario Ministry of Health. To learn more about AHRQs, visit <https://inspire-phc.org/ahrq/>

Key Insights. Credit: University Health Network (UHN)

Compared to patients who had a virtual visit with their own family doctor, those who received virtual care from a doctor outside of their family care team were 66% more likely to visit the emergency department within seven days, according to new research.

The study, led by researchers at the University Health Network (UHN), Unity Health Toronto, and ICES, also showed that patients receiving virtual care outside of an existing family doctor-patient relationship were 25% more likely to have an in-person visit and 88% more likely to have another virtual visit within seven days.

"This study sheds light on how different types of virtual care impact downstream health care use—our findings show that the relationship between a patient and their virtual care doctor makes a difference," says lead author Dr. Lauren Lapointe-Shaw, Adjunct Scientist with ICES, General Internal Medicine [physician](#), and Scientist at UHN, and Innovation Fellow at the Women's College Hospital Institute for Health System Solutions and Virtual Care.

"Within an existing and ongoing relationship with a physician, patients are less likely to go elsewhere for further care," adds Dr. Lapointe-Shaw.

Published in the journal [JAMA Network Open](#), the study included more than 5 million Ontario residents who had a family doctor and had a virtual visit between April 2021 and March 2022, and methods were used to match 4.1 million patients whose virtual visit was with their own physician, and 1 million patients whose visit was with an outside physician.

In a secondary analysis, the researchers found that patients using "direct-to-consumer" telemedicine clinics were three times more likely to visit the emergency department within seven days, compared to patients seeing their own family doctor. "Direct-to-consumer" clinics are virtual-only walk-in clinics, and they offer on-demand virtual care without an in-person exam.

More than 6.5 million people in Canada don't have a family physician, and virtual care is believed to be an important access point for patients.

"Virtual care done right can improve timely access to care—both for people who do and don't have a family doctor," says co-author Dr. Tara Kiran, Adjunct Scientist at ICES and a family physician at St. Michael's Hospital of Unity Health Toronto. "But if it's not integrated with in-person care, or delivered by someone who has access to your health history, there is a risk that we're adding more churn to the system."

The data used for this study cannot tell us why [patients](#) with their own [family doctor](#) chose to have a virtual visit with an outside physician. This decision could relate to access challenges, convenience, or other factors, and further research is warranted.

Nonetheless, these findings support the use of primary care virtual services within an existing physician-patient relationship.

The study, "Virtual visits with own [family](#) physician versus an outside [family physician](#) and [emergency department](#) use" was published in *JAMA Network Open*.

More information: Lauren Lapointe-Shaw et al, Virtual Visits With Own Family Physician vs Outside Family Physician and Emergency Department Use, *JAMA Network Open* (2023). [DOI: 10.1001/jamanetworkopen.2023.49452](#)

Provided by ICES

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