Virtual care can improve access to care and continuity for patients if used appropriately as part of a long-term relationship with a regular provider. In contrast, for-profit virtual care presents a problematic approach to health care delivery as these models are fundamentally designed to maximize profits, potentially causing health outcomes to suffer.1

For-profit virtual care prioritizes revenue generation over patient health
- Corporations venture into health care offerings and design care delivery to maximize profits, not patient outcomes
- Some for-profit companies promote ordering medically unnecessary tests and advertising directly to patients and providers

For-profit virtual care leads to duplication of services and increased costs on the health care system
- Expansion of for-profit care often increases wait times in the public system
- Many for-profit virtual clinics lack a physical presence; when patients are advised to see a physician in person, the public health care system is charged twice when one in-person visit would have sufficed

For-profit virtual care threatens continuity of care
- Patients using episodic virtual care are less likely to regularly visit their family doctor
- For-profit providers often do not have access to a patient’s full health record and do not share information with the patient’s regular care provider

For-profit virtual care results in inequitable outcomes and extra costs for patients
- For-profit virtual walk-in services threaten to create a two-tiered system where individuals who can afford such care can “skip the line”
  - As a result, marginalized populations may experience unequal access to care and longer wait times
For-profit virtual care can reduce quality of care

- Research demonstrates that corporatized care often results in lower quality of care
  - In British Columbia, the College of Physicians and Surgeons is aware of numerous allegations of insufficient care provided by virtual walk-in clinics

For-profit virtual care risks patient privacy and health information

- For-profit companies are not bound by the same rules as individual physicians regarding custody of patient information; patient data can be shared with other businesses and foreign governments

For-profit virtual care may violate the Canada Health Act

- The virtual walk-in model may violate the Canada Health Act by charging patients for medically necessary care, potentially leading to a two-tiered system

What is needed to improve access to primary care virtual visits

Patients and their health care providers want timely access to care. However, quality, equity, continuity, and health outcomes cannot be compromised in enhancing accessibility.

All levels of government must commit to strengthening primary care

- Invest in team-based primary care models such as the Patient’s Medical Home (PMH)\(^2\) vision, which are linked to improved quality of care, lower costs to the health care system, and better access to care
- Prioritize publicly funded virtual care to continue to improve patients’ equitable access to care
- Support family practices in establishing and maintaining their virtual care offerings, including training staff and setting up IT services

To achieve this, the College of Family Physicians of Canada (CFPC) has called on the federal government to institute a $2 billion Primary Care Access Fund to enhance the accessibility of virtual and in-person care provided by collaborative primary care teams.

Endnotes

2. In the CFPC’s PMH vision, every family practice across Canada offers the medical care that Canadians want—readily accessible, centred on the patients’ needs, provided throughout every stage of life, and seamlessly integrated with other services in the health care system and the community.