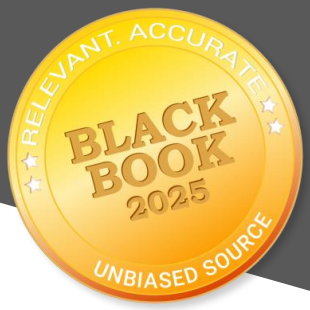

Top Vendors for Next-Generation Digital Health Platforms--

Virtual Care Platforms & AI- Driven Clinical Collaboration Solutions

2025 Comparative Performance Result Set Respondents:

Hospitals & Health Systems

Ambulatory & Specialty Care Providers

Post-Acute & Long-Term Care Providers

Behavioral & Mental Health Providers

Published: March 2025

Black Book™ Annual Intelligent Automation, Virtual Care & Artificial Intelligence User Survey

Black Book™ conducts an annual evaluation of leading healthcare and medical software and service providers, focusing on 18 key performance indicators (KPIs) of operational excellence, entirely from the client's perspective. The evaluation process is independent and free from vendor influence, with over 3,000,000 healthcare IT users participating in various customer satisfaction customer service data is available for buyers, analysts, investors, vendors, competitors, and media stakeholders. For further details or to request customized research results, please contact the Client Resource Center at +1 800.863.7590 or Research@BlackBookMarketResearch.com.

For more information, visit www.BlackBookMarketResearch.com

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2025 VIRTUAL CARE Survey Response Rates by Organization Type

2025 Survey Respondent Identification	Number of Responses Validated
• **Chief Medical Officer (CMO)** – Provides clinical oversight and evaluates care quality, AI-driven decision support, and the impact of virtual care on patient safety and provider efficiency**.**	90
• **Chief Nursing Officer (CNO)** – Assesses nursing workflow efficiency, virtual nursing adoption, AI-powered automation for care coordination, and patient engagement within virtual hospitals**.**	74
• **Vice President of Virtual Care & Digital Health** – Overseas enterprise-wide virtual care strategy, AI integration in virtual hospitals, and operational effectiveness of remote patient monitoring solutions**.**	25
• **Medical Director of Telehealth & Remote Patient Monitoring** – Evaluates clinical usability, provider adoption, AI-driven patient monitoring, and escalation effectiveness for high-risk patients**.**	35
• **Director of Nursing Informatics** – Reviews AI-based workflow automation, virtual nursing documentation efficiency, and integration of telehealth and monitoring data into clinical decision-making**.**	66
• **Hospital & Health System Chief Information Officer (CIO)** – Assesses technical interoperability, cybersecurity, AI-driven analytics, and scalability of virtual care platforms across inpatient and remote settings**.**	16
• **Director of Population Health & Value-Based Care** – Measures the impact of virtual care on patient outcomes, readmission reduction, chronic disease management, and AI-enabled risk stratification**.**	64
• **Director of Telehealth Operations & Virtual Nursing** – Ensures seamless implementation of virtual care models, evaluates AI-driven triage, and monitors provider and patient adoption rates**.**	55
• **Vice President of Care Coordination & Utilization Management (Payers & Providers) –** Examines payer-provider alignment, reimbursement models for virtual care, and cost-effectiveness of AI-enhanced remote patient monitoring**.**	149
• **Remote Patient Monitoring (RPM) & Virtual Care Program Manager** – Oversees daily operations of AI-powered virtual care, monitors real-time patient data escalation, and ensures clinical staff adoption and efficiency**.**	33
• IT and non Clinical Related **Technology** Staff and Management	20
• CFO, Business Office and **Financial** Staff and Management,	16
• **Clinicians, Nursing, Medical Staff and Ancillary Users**	191
TOTAL	**834**

The State of Virtual Care Platforms 2025

Virtual care platforms, including remote patient monitoring (RPM), virtual hospitals, digital front doors, and telehealth solutions, are transforming healthcare by enhancing access, efficiency, and care quality. Unlike electronic health records (EHRs), which focus on documentation and compliance, non-EHR virtual care platforms facilitate real-time remote care, patient engagement, and workflow automation. Adoption has surged due to technological advancements, value-based care incentives, and an increasing demand for digital health solutions. According to Black Book Research, which conducts independent evaluations of healthcare technology adoption and client satisfaction, over 74% of U.S. hospitals report using at least one virtual care platform, with significant adoption among health systems (82%) and physician organizations (55%). Long-term care facilities are also integrating virtual care solutions at a rapid pace, with 40% now leveraging RPM and virtual visits. Black Book's findings highlight a clear shift toward hybrid care models that integrate in-person and digital care delivery to improve patient outcomes and operational efficiency.

Several key trends are shaping the evolution of virtual care platforms. The expansion of virtual hospitals and remote monitoring is accelerating, as health systems increasingly invest in "Hospital at Home" initiatives that enable acute-level care outside traditional hospital settings. Remote patient monitoring has become a cornerstone of chronic disease management, with 63% of health systems using RPM for conditions such as heart failure, COPD, and diabetes, according to Black Book Research's 2024 Digital Health Survey. AI-powered digital front doors are streamlining patient intake, triage, and virtual visit scheduling, reducing administrative burdens while improving access. Black Book's latest research indicates that automated virtual assistants now handle over 30% of patient inquiries in health systems implementing AI-driven virtual care tools. Additionally, payer interest in virtual-first care models is increasing, with insurers expanding reimbursement for telehealth, RPM, and AI-assisted triage. Virtual care reimbursement parity laws are now in place in 43 states, ensuring that providers are compensated for virtual visits at rates comparable to in-person care. Another significant trend is the deeper integration of virtual care into hybrid models, with 75% of accountable care organizations (ACOs) using virtual care platforms to track quality measures, aligning with value-based care initiatives, per Black Book's 2024 rankings of top virtual care vendors.

As payers and providers demand more comprehensive, interoperable solutions, vendors are scaling up to deliver integrated platforms that encompass telehealth, remote monitoring, and AI-driven triage, a trend that Black Book projects will continue through 2025, as healthcare organizations move away from fragmented point solutions.

Virtual care platforms now serve a wide range of clinical and operational functions, from telehealth and virtual visits to RPM, virtual hospitals, AI-powered triage, and care coordination. Telehealth services are widely used for primary care, urgent care, behavioral health, post-op follow-ups, and chronic disease management, while RPM enables real-time tracking of vitals, medication adherence, and early intervention for high-risk patients. Virtual hospitals provide hospital-level care at home, reducing strain on inpatient facilities and improving patient recovery experiences. AI-powered triage and digital front doors help automate patient routing, self-scheduling, and symptom assessment, improving patient engagement and optimizing care access. These platforms are also enhancing provider collaboration by enabling real-time clinical documentation, interdisciplinary messaging, and automated task delegation, ensuring efficient care coordination between primary care physicians, specialists, and ancillary teams. As hybrid care models become the standard,

virtual care platforms will continue to evolve into broader digital health ecosystems that seamlessly integrate in-person and remote care services. Black Book's vendor performance assessments consistently indicate that platforms with strong interoperability, AI-driven automation, and intuitive clinician workflows receive the highest user satisfaction ratings.

The regulatory landscape for virtual care platforms is evolving rapidly, with new policies governing telehealth reimbursement, data privacy, and AI applications. Medicare has permanently expanded coverage for many virtual care services under the Consolidated Appropriations Act of 2023, ensuring continued funding for telehealth and RPM. Additionally, 43 states have implemented telehealth parity laws, mandating equal reimbursement for virtual and in-person care. Data security regulations are also tightening, with the Office for Civil Rights (OCR) and the Department of Health and Human Services (HHS) imposing stricter requirements for HIPAA compliance, end-to-end encryption, and advanced authentication for virtual care platforms. AI-driven virtual care solutions are facing increased scrutiny, with emerging federal guidelines requiring greater transparency in algorithm decision-making and bias mitigation. Black Book's recent security evaluations found that only 58% of surveyed virtual care vendors meet the highest standards for HIPAA compliance and cybersecurity protections, highlighting an area of ongoing concern for healthcare organizations. Vendors and healthcare organizations must stay ahead of these regulatory shifts to ensure compliance while leveraging virtual care technologies effectively.

Despite strong adoption, provider and payer satisfaction with virtual care platforms varies based on usability, integration, and reimbursement challenges. Black Book's 2024 Virtual Care Satisfaction Survey found that 83% of physicians believe virtual care improves patient access, yet 52% report dissatisfaction with platform usability and administrative burden. Payers largely support expanded virtual care reimbursement, with 72% in favor, but cite fragmented technology ecosystems as a significant barrier to cost-effective adoption. Black Book's research highlights a clear gap between virtual care innovation and real-world usability, with health systems that implement well-integrated solutions reporting patient satisfaction rates exceeding 90%, while those relying on disconnected systems see engagement levels closer to 65%. The key to improving satisfaction lies in greater interoperability, workflow automation, and payer-provider alignment on reimbursement policies. By focusing on seamless platform integration and reducing administrative friction, vendors can enhance user experience and drive higher long-term adoption.

Virtual care platforms are no longer optional, they are now a fundamental component of modern healthcare delivery. As the industry transitions to value-based care, hybrid models, and AI-powered automation, platforms that offer seamless integration, real-time clinical intelligence, and intuitive user experiences will lead the market. The next phase of virtual care will focus on refining AI-driven decision-making, improving usability, and ensuring robust regulatory compliance. Healthcare organizations must prioritize solutions that enhance provider efficiency, engage patients effectively, and support long-term adoption to fully realize the benefits of virtual care technology.

Black Book Methodology: Data Collection and Statistical Confidence

Data Collection Process

Black Book collects survey data on 18 key performance indicators (KPIs) of operational excellence to rank vendors across electronic medical and health record product lines. The data undergoes rigorous internal and external audits to verify completeness, accuracy, and respondent validity while maintaining the anonymity of client organizations. Each data set is independently reviewed by a Black Book executive and two additional auditors to ensure transparency and reliability. The results are categorized by industry, market size, geography, and outsourced functions, providing nuanced insights into vendor performance. Special market studies focus on high-interest areas such as e-prescribing, Health Information Exchange HIE), Accountable Care Organizations (ACOs), hospital software, and e-health services, with survey sections containing between 4 and 20 specific criteria tailored to these areas.

Ensuring Statistical Confidence

Black Book employs stringent methods to ensure statistical confidence in its vendor rankings:

Sample Size Requirements:

- Vendors ranked in the top 10 must receive a minimum of 10 unique client responses in specialized categories and 20 in broad categories.
- Data sets marked with an asterisk (*) indicate sample sizes below required thresholds and are used for tracking trends, not formal rankings, due to potentially large margins of error.

Confidence Levels:

- Vendors with 20+ unique client responses are eligible for top 10 rankings and achieve high confidence levels with minimal variation in reported scores. Data with sufficient responses is reported at a 95% confidence level, with a margin of error as low as ±0.15.

Survey Pool Details:

- Each survey reports the total number of completed responses and unique organizations contributing to the results, ensuring transparency and interpretability of the findings.

  n=Z2·p·(1−p)E2n = \frac{Z^2 \cdot p \cdot (1 - p)}{E^2}n=E2Z2·p·(1−p)

  Where:

  - nnn = Required sample size
  - ZZZ = Z-score corresponding to the confidence level (e.g., 1.96 for 95% confidence)
  - ppp = Estimated proportion of healthcare organizations using virtual care IT solutions
  - EEE = Margin of error (e.g., 5% or 0.05)

Step 1: Identify Total Population (N)

The total number of hospitals, health systems, long-term care facilities, and physician organizations in the U.S. includes:

- Hospitals & Health Systems: ~6,129 (AHA, 2024)
- Long-Term Care Facilities: ~65,000 (CMS, 2024)
- Physician Organizations (Multi-Specialty & Large Groups): ~23,000 (MGMA, AMA 2024)

Total Estimated Population (N):

6,129+65,000+23,000=94,129 organizations6,129 + 65,000 + 23,000 = 94,129 \text{ organizations}6,129+65,000+23,000=94,129 organizations

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Step 2: Estimate Proportion of Virtual Care Adoption (p)

- Hospitals using RPM, Virtual Visits & Virtual Hospitals: ~74% (AHA Digital Health Survey, 2023)
- Physician Groups using Virtual Care: ~55% (AMA Digital Health Report, 2023)
- Long-Term Care Facilities using Virtual Monitoring & Visits: ~40% (LeadingAge, 2023)

Using a weighted estimate:

p=(6,129×0.74)+(23,000×0.55)+(65,000×0.40)94,129=4,536+12,650+26,00094,129≈0.47p = \frac{(6,129 \times 0.74) + (23,000 \times 0.55) + (65,000 \times 0.40)}{94,129} = \frac{4,536 + 12,650 + 26,000}{94,129} \approx 0.47p=94,129(6,129×0.74)+(23,000×0.55)+(65,000×0.40)=94,1294,536+12,650+26,000≈0.47

Thus, p ≈ 0.47 (47% adoption rate).

Step 3: Determine Sample Size (n)

Using 95% confidence level (Z = 1.96) and 5% margin of error (E = 0.05):

Thus, at least 383 organizations need to be sampled for a 95% confidence level with a ±5% margin of error.

Step 4: Adjust for Finite Population

Since the total population (N=94,129N = 94,129N=94,129) is finite, we adjust the sample size:

Thus, the final adjusted sample size remains 381 organizations, which is very close to the original estimate.

Conclusion

To confidently estimate the adoption of virtual care IT solutions among hospitals, health systems, long-term care, and physician organizations, **a sample size of 381 organizations should be surveyed to maintain a 95% confidence level with a ±5% margin of error**.

In the 2025 Black Book survey of virtual care platform users, 834 respondents participated to exceed a 97% confidence level in the response quality and accuracy.

2025 Black Book Market Research Key Performance Indicators for Virtual Care Platforms

Traditional client satisfaction metrics like Net Promoter Score (NPS) and generic surveys offer broad sentiment analysis but lack the depth needed to evaluate the technical, clinical, and user experience aspects of virtual care platforms. While NPS indicates willingness to recommend, it fails to pinpoint specific operational inefficiencies, workflow friction, or patient engagement barriers. Virtual care platforms require a multidimensional evaluation framework that captures usability, real-time responsiveness, AI accuracy, and care personalization. Unlike standard surveys, these 18 qualitative KPIs assess the entire user journey, ensuring seamless coordination between patients, clinicians, and healthcare systems while addressing workflow integration, digital self-service efficiency, and clinical effectiveness.

Beyond traditional IT metrics like uptime and latency, which do not reflect real-world usability, these KPIs measure whether providers can efficiently collaborate, whether AI-driven automation enhances rather than complicates workflows, and whether patients receive timely, high-quality virtual care. Unlike vague satisfaction scores, they differentiate between technical inefficiencies, UX challenges, and clinical workflow barriers, ensuring healthcare organizations can evaluate virtual care vendors like Andor Health and its competitors based on actionable insights, operational impact, and user adoption patterns. By shifting from generic satisfaction scoring to qualitative, user-focused KPIs, decision-makers can prioritize real-world usability, engagement, and long-term virtual care success rather than relying on broad, non-specific satisfaction metrics.

Addressing the Complexity of Virtual Care Workflows

Unlike standard satisfaction surveys, these 18 qualitative KPIs evaluate the entire user journey, considering both patient experience and provider efficiency within virtual care ecosystems. Virtual care platforms must integrate remote patient monitoring, virtual hospitals, and telehealth visits while ensuring seamless coordination between multiple stakeholders. A generic “How satisfied are you with the platform?” question does not assess whether providers can easily switch between virtual visit modes, access patient data in real time, or complete documentation efficiently. These KPIs, however, ensure that usability, workflow integration, and care delivery effectiveness are assessed in detail.

Capturing Nuanced User Experience Data

Virtual care platforms require a multidimensional evaluation framework that considers ease of use, real-time system responsiveness, AI accuracy, and personalization of care delivery. Standard NPS surveys fail to differentiate between a platform’s reliability, communication tools, or alert effectiveness, often leading to ambiguous insights that do not drive product improvement. In contrast, these KPIs focus on specific qualitative indicators such as “Trust in AI-Driven Triage & Recommendations” and “Effectiveness of Real-Time Alerts & Notifications”, which directly measure the quality and impact of automated systems supporting virtual care.

Ensuring a Patient-Centric & Provider-Optimized Approach

Virtual care is unique in that it must simultaneously serve two distinct user groups—patients and clinicians—each with different needs and expectations. Patients prioritize ease of access, digital self-service efficiency, and quality of virtual interactions, whereas clinicians require workflow

automation, seamless documentation, and reduced cognitive burden. Traditional satisfaction surveys do not distinguish between these perspectives, making it difficult to determine whether adoption issues stem from technical inefficiencies, poor UX design, or clinical workflow barriers. These 18 KPIs specifically evaluate how well the platform meets the needs of both user groups, ensuring that engagement and usability are assessed holistically.

Evaluating Performance Beyond Traditional IT Metrics

While uptime, latency, and system reliability are important quantitative performance indicators, they do not reflect the lived experience of users interacting with the platform daily. A system may have 99.9% uptime, but if it is difficult to navigate, produces redundant alerts, or lacks intuitive scheduling tools, it will still fail to deliver value. These KPIs go beyond technical uptime metrics by assessing whether providers can efficiently collaborate across teams, patients receive timely care, and AI-driven automation truly enhances workflows rather than complicating them.

Providing Actionable Insights for Vendor Selection & Platform Optimization

For healthcare organizations evaluating Andor Health and its competitors, standard satisfaction metrics may indicate general sentiment, but they do not provide detailed qualitative insights into which platform functionalities drive higher engagement, clinical effectiveness, or provider efficiency. These 18 KPIs allow decision-makers to compare platforms based on real-world usability, workflow integration, and clinical impact, ensuring that vendors are evaluated not just on branding and user sentiment, but on actual performance within virtual care environments.

By shifting away from generic NPS and satisfaction scoring toward qualitative, user-focused KPIs, healthcare organizations can ensure that virtual care platforms are evaluated based on their ability to improve operational efficiency, enhance patient engagement, and deliver high-quality remote care. These 18 KPIs create a comprehensive framework for assessing virtual care IT solutions in a way that prioritizes real-world usability, clinical impact, and long-term adoption success.

The 18 Key Performance Indicators Utilized in 2025 Virtual Care Platform Evaluations

1. Ease of Use & Navigation

A virtual care platform must feel effortless for both patients and providers, ensuring smooth navigation across all functionalities. A system that requires multiple clicks, complex menu structures, or excessive training will frustrate users and slow down adoption. For clinicians, an intuitive interface should minimize cognitive load and allow seamless access to patient records, virtual consults, and monitoring tools. From a patient perspective, scheduling an appointment, accessing test results, and engaging with care teams should be as easy as using a familiar mobile app. If a patient must contact support just to schedule a telehealth visit, the system has failed on usability.

2. Quality of Virtual Interactions

A virtual care experience should replicate or enhance in-person consultations through high-quality video, real-time messaging, and AI-enhanced audio support. Pixelation, lag, or dropped calls can lead to miscommunication, misdiagnoses, and frustration for both patients and clinicians. Additionally, virtual interactions should support contextual intelligence, where providers can access real-time patient history, diagnostic tools, and note-taking within the same interface—eliminating the need to toggle between systems. Patients should feel engaged and heard, rather than experiencing the delays and stiffness of a poor-quality digital visit.

3. Timeliness of Care Access

The core promise of virtual care is its ability to reduce wait times and improve care accessibility, but this fails when patients face long queues, bottlenecks, or a lack of on-demand provider availability. The platform should use smart triaging and AI-assisted routing to ensure urgent cases (e.g., chest pain, severe infections) receive immediate escalation, while routine follow-ups or wellness consults are managed efficiently. Patients should feel in control of their care experience, with clear visibility into provider availability, estimated wait times, and self-service scheduling rather than endless "your estimated wait time is 45 minutes" messages.

4. Effectiveness of Care Coordination

Virtual care must eliminate fragmentation in communication between providers, ensuring real-time, role-based collaboration across primary care physicians, specialists, nurses, and home health teams. Patients frequently complain about "starting over" with each provider—this is a system failure. The platform should allow shared medical records, real-time consultation rooms, and interdisciplinary messaging, so that a discharged ICU patient in a virtual hospital program does not experience lapses in medication adjustments, rehab coordination, or follow-up scheduling. Seamless coordination should be the default, not an exception.

5. Integration with Clinical Workflows

A virtual care platform should enhance—not disrupt—clinical workflows. Rigid, disjointed systems force providers into inefficient workarounds, leading to documentation fatigue and physician burnout. The platform must enable EHR bi-directional syncing, voice-to-text documentation, and automated follow-ups, ensuring that clinicians can transition between virtual and in-person care effortlessly. If a telehealth consult requires manual entry of patient data post-visit, the platform is adding inefficiency rather than reducing it.

6. Trust in AI-Driven Triage & Recommendations

Patients and clinicians alike must trust the AI-driven decision support integrated into virtual care platforms. If patients distrust automated triage or question chatbot responses, they may bypass the system and flood ERs or urgent care centers unnecessarily. The AI should be transparent and explainable, offering clear rationale for recommendations while allowing clinician overrides when needed. A patient with migraines should not be misrouted to an orthopedist just because AI misinterpreted symptom keywords.

7. Accuracy & Responsiveness of Remote Monitoring

Remote monitoring must balance accuracy with usability, ensuring that devices, wearables, and connected apps provide real-time, actionable insights. Patients often abandon monitoring tools if devices are cumbersome, invasive, or produce excessive false alarms. The system should intelligently prioritize alerts, surfacing clinically relevant trends rather than overwhelming care teams with noise. If a patient's glucose levels fluctuate within an expected range, unnecessary alerts should not interrupt their daily activities or bombard providers with low-priority notifications.

8. Reduction in Avoidable ER Visits

Virtual care platforms should proactively steer patients away from unnecessary ER visits by offering intelligent intervention pathways, proactive check-ins, and escalation triggers. A patient experiencing mild chest discomfort should be seamlessly connected to a virtual cardiology consult, rather than defaulting to an ER visit due to lack of access to proper triage. If patients consistently use ER services despite being enrolled in a virtual care program, the platform has failed in patient guidance and intervention timing.

9. Continuity of Care in Virtual Hospitals

Patients moving through virtual hospital programs should experience fluid transitions between in-hospital, remote monitoring, and follow-up care. If a stroke patient discharged to home-based care lacks immediate access to virtual therapy sessions, this disconnect could delay recovery. The platform must provide real-time care plan updates, automated scheduling of rehab and follow-ups, and patient education tools that ensure they never feel "lost" after hospital discharge.

10. Patient Engagement & Adherence

A virtual care platform is only as effective as its patient engagement strategy. If patients fail to follow care plans, attend scheduled telehealth visits, or interact with digital health tools, outcomes suffer. The platform must incorporate behavioral nudging, gamification, and personalized reminders to encourage adherence. A chronic disease patient should receive daily motivation-driven nudges, rather than generic, easily-ignored alerts. Engagement should feel like a conversation, not a set of robotic reminders.

11. Scheduling & Self-Service Efficiency

Patients expect consumer-grade self-service tools, allowing them to book, modify, and reschedule appointments instantly through an intuitive interface. Automated waitlist optimization, last-minute availability detection, and smart provider-matching should ensure that patients are not stuck waiting for weeks for a simple follow-up. If rescheduling requires calling a support line, the system is failing in self-service usability.

12. Latency, System Performance & Interoperability Speed

The platform must deliver near-instantaneous response times, regardless of traffic volume. High latency in virtual consults, slow-loading dashboards, or data lags between remote monitoring devices and provider alerts can cause care delays and frustration. If a tele-ICU system takes 5 minutes to update vitals, the platform is functionally unusable in critical scenarios.

13. Provider Workload Optimization

Virtual care should reduce, not increase, provider workload. Platforms should include voice-enabled documentation, AI-powered summarization, and automated care coordination tools to cut down on administrative burden. If a provider spends more time navigating the virtual care system than seeing patients, the system is adding friction, not efficiency.

14. Effectiveness of Real-Time Alerts & Notifications

A high-performing virtual care system should intelligently prioritize alerts, preventing alarm fatigue while ensuring urgent notifications receive immediate attention. If a cardiac alert in a virtual ICU is buried under non-urgent vitals notifications, the system has failed.

15. Privacy & Security Perception

Users should feel confident that video visits, remote monitoring data, and patient records are secured against breaches. The platform should include AI-driven anomaly detection for suspicious logins, biometric authentication, and fully encrypted communication channels. If patients hesitate to use the platform due to security concerns, adoption rates will drop.

16. User Adoption & Engagement

Adoption rates should be tracked, analyzed, and optimized, ensuring that both patients and providers find ongoing value in the platform. If engagement numbers decline, the system must adapt through better onboarding, user education, and UX refinements to meet evolving expectations.

17. Personalization & Patient-Centered Care

Patients expect hyper-personalized experiences rather than generic, one-size-fits-all interactions. A postpartum patient should receive tailored educational content and postpartum-specific health tracking, rather than irrelevant chronic disease management recommendations.

18. Clinical Outcome Improvement & Virtual Care Impact

The success of a virtual care platform should be measured by its ability to improve health outcomes. If readmission rates remain unchanged or worsen, the system may not be delivering proactive, timely, and effective virtual interventions

Figure: Key to Raw Scores

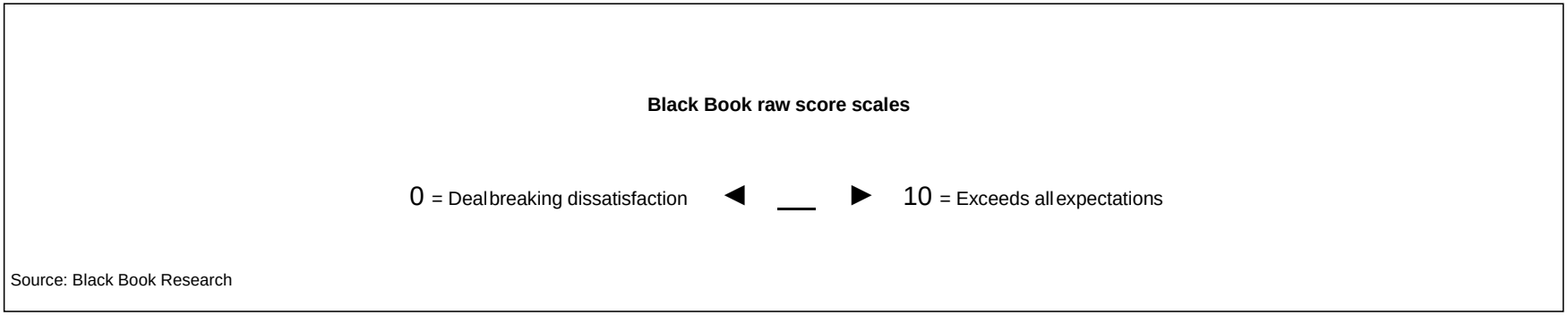
0.00–5.79 ►	◄ 5.80–7.32 ►	◄ 7.33–8.70 ►	◄ 8.71–10.00
Deal breaking dissatisfaction **Does not meet expectations** **Cannot recommend vendor**	**Neutral** **Meets/does not meet expectations consistently** **Would not likely recommend vendor**	**Satisfactory performance** **Meets expectations** **Recommends vendor**	**Overwhelming satisfaction** **Exceeds expectations** **Highly recommended vendor**

Source: Black Book Research

Color-Coded Stoplight Dashboard Scoring Key

Green	Top 10% scores better than 90% of Vendors. Green coded vendors have received constantly highest client satisfaction scores.	**8.71 +**
Clear	Top 33% scores better than two-thirds of Vendors. Well-scored vendor which have middle of the pack results.	**7.33 to 8.70**
Yellow	Mid Pack: scores are not extraordinarily high or low overall. Cautionary performance scores, areas of improvement required. Half of all vendors score mid pack.	**5.80 to 7.32**
Red	Lowest 10%: scores worse than 90% of Vendors. Poor performances reported potential cause for service and contractual cancellations.	**Less than 5.79**

Raw Score Compilation and Scale of Reference



Source: Black Book Research

Individual vendors can be examined by specific indicators on each of the main functions of Virtual Car platform vendors as well as grouped and summarized subsets. Details of each subset are contained so that each vendor may be analyzed by function and end-to-end services collectively.

Scoring Key

Overall Rank	Q1 Criteria Rank	Company	Patient Management	Clinical Documentation	Revenue Cycle Management	Compliance, Analytics & Reporting	Mean
5	1	Vendor Name	8.49	8.63	8.50	8.01	8.66

Source: Black Book Research

- **Overall rank** – this rank references the final position of all 18 criteria averaged by the mean score collectively. This vendor ranked fifth of the 20 competitors.
- **Criteria rank** – refers to the number of the question or criteria surveyed. This is the sixth question of the 18 criteria of which this vendor ranked first of the 20 vendors analyzed positioned only on this criteria or question. Each vendor required ten unique client ballots validated to be included in the top ten ranks.
- **Company** – name of the vendor.
- **Subsections** – each subset comprises one-fourth of the total vendor mean at the end of this row and includes all buyers and users who indicate that they contract each respective functional subsection with the supplier, specific to their physician enterprise.
- **Mean** – congruent with the criteria rank, the mean is a calculation of all four subsets of the functions surveyed. As a final ranking reference, it includes all market sizes, specialties, delivery sites and geographies.

Overall KPI Leaders: Non-EHR Virtual Care Platforms

Top Twenty Vendors Receiving Respondent Evaluations between Q3 2024 and Q1 2025

.

Table 1: Summary of Criteria Outcomes

Total Number One Criteria Ranks	VIRTUAL CARE PLATFORM VENDOR	Overall Rank
14	ANDOR HEALTH	**1**
2	EVISIT	**2**
1	EQUUM MEDICAL	**3**
1	AMWELL	**6**

Source: Black Book Research, 2025

Overall KPI Leaders: Revenue Cycle Management Solutions

Top Score Per Individual Criteria

Table 2: Top Score Per Individual Criteria

Question / Criteria		VIRTUAL CARE Services Vendor	Overall Rank
Q1	• Ease of Use & Navigation	ANDOR HEALTH	**1**
Q2	• Quality of Virtual Interactions	ANDOR HEALTH	**1**
Q3	• Timeliness of Care Access	ANDOR HEALTH	**1**
Q4	• Effectiveness of Care Coordination	ANDOR HEALTH	**1**
Q5	• Integration with Clinical Workflows	ANDOR HEALTH	**1**
Q6	• Trust in AI-Driven Triage & Recommendations	ANDOR HEALTH	**1**
Q7	• Accuracy & Responsiveness of Remote Monitoring	AMWELL	**6**
Q8	• Reduction in Avoidable ER Visits	ANDOR HEALTH	**1**
Q9	• Continuity of Care in Virtual Hospitals	ANDOR HEALTH	**1**
Q10	• Patient Engagement & Adherence	ANDOR HEALTH	**1**
Q11	• Scheduling & Self-Service Efficiency	EQUUM MEDICAL	**3**
Q12	• Latency, System Performance & Interoperability Speed	EVISIT	**2**
Q13	• Provider Workload Optimization	ANDOR HEALTH	**1**
Q14	• Effectiveness of Real-Time Alerts & Notifications	EVISIT	**2**
Q15	• Privacy & Security Perception	ANDOR HEALTH	**1**
Q16	• User Adoption & Engagement	ANDOR HEALTH	**1**
Q17	• Personalization & Patient-Centered Care	ANDOR HEALTH	**1**
Q18	• Clinical Outcome Improvement & Virtual Care Impact	ANDOR HEALTH	**1**

Source: Black Book™ 2025

Top Rating Assessment: Andor Health, exceeds client expectations for third consecutive year to be rated #1

The ranking of non-EHR virtual hospital platforms reflects the real-world performance of these systems in hospital settings, with Andor Health emerging as the clear leader based on client-based user ratings. Andor Health consistently excels across critical qualitative KPIs, including usability, AI-driven automation, workflow optimization, and patient engagement effectiveness. Its ability to seamlessly integrate into hospital workflows without disrupting operations sets it apart from competitors. Unlike fragmented telehealth solutions, Andor Health provides a comprehensive virtual hospital experience, leveraging real-time patient monitoring, automated clinical decision support, and AI-powered digital command centers to enhance care coordination. Hospitals using Andor Health report higher efficiency, reduced administrative burdens, and improved patient throughput, making it the top choice for healthcare organizations seeking an advanced, fully integrated virtual care solution.

One of Andor Health's defining strengths is its AI-driven automation, which transforms clinical workflows, virtual nursing programs, and hospital-at-home care models. Unlike other platforms that rely on manual coordination, Andor Health utilizes intelligent automation to manage patient engagement, remote monitoring alerts, and seamless transitions between inpatient and virtual settings. Its real-time communication tools and AI-enhanced triage system ensure that providers can diagnose, intervene, and coordinate care more efficiently, reducing delays and unnecessary hospital readmissions. In addition, Andor Health's customizable digital front door solutions enhance patient access, appointment scheduling, and provider connectivity, delivering a frictionless virtual-first hospital experience. These attributes have driven high client satisfaction ratings, particularly among hospitals seeking to scale virtual inpatient care, tele-ICU operations, and emergency department tele-triage services.

What makes Andor Health the top-ranked virtual hospital platform is its superior system reliability, AI-powered clinical intelligence, and deep interoperability with hospital infrastructure. While other platforms often struggle with integration issues or disconnected workflows, Andor Health ensures a unified, end-to-end virtual care ecosystem that enhances provider efficiency without introducing technical complexity. Hospitals using Andor Health report faster adoption, higher provider engagement, and seamless operational scaling, proving that a well-designed, AI-driven virtual care solution can improve patient outcomes while reducing clinician workload. As virtual hospitals continue to expand, Andor Health remains the premier choice for health systems looking to redefine remote patient care, optimize workforce efficiency, and deliver next-generation hospital-at-home programs with unparalleled precision and automation.

Individual Virtual Care Platform Vendor Key Performance

Raw/Aggregate IT Satisfaction Scores 2025

Rank	Vendor	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12	Q13	Q14	Q15	Q16	Q17	Q18	Mean
1	ANDOR HEALTH	9.55	9.60	9.71	9.59	9.83	9.62	9.32	9.65	9.62	9.31	9.31	9.58	9.51	9.50	9.85	9.63	9.94	9.45	**9.59**
2	EVISIT	9.51	9.37	8.99	8.94	9.30	9.50	8.27	9.11	9.32	9.11	8.73	9.68	9.49	9.71	9.66	9.39	9.82	9.07	**9.28**
3	EQUUM MEDICAL	9.40	9.28	9.42	9.39	9.36	9.14	8.55	9.24	9.54	9.24	9.69	9.12	9.05	9.37	8.49	8.78	9.09	9.26	**9.19**
4	HELLOCARE	9.25	8.83	8.88	8.56	9.63	8.52	8.80	8.56	9.28	8.54	9.62	7.95	9.04	8.73	9.21	8.75	8.62	8.20	**8.83**
5	HICUITY HEALTH	9.37	9.23	9.54	8.91	8.71	7.15	8.33	9.62	9.07	8.70	8.52	8.63	8.21	7.71	8.65	9.17	9.35	9.25	**8.78**
6	AMWELL	8.84	9.51	7.27	7.82	9.48	8.93	9.55	8.52	8.68	7.86	9.01	9.25	8.10	9.17	8.80	9.08	8.21	8.00	**8.67**
7	VSEE	8.90	9.04	9.49	9.22	8.16	7.22	8.65	9.29	8.79	9.27	8.05	8.84	8.56	7.85	8.52	6.96	9.44	8.86	**8.62**
8	CAREGILITY	8.87	9.14	8.75	8.59	9.52	9.30	7.56	8.05	7.09	8.95	9.29	8.48	8.99	8.09	9.49	8.98	7.44	8.08	**8.59**
9	AVASURE	8.55	8.62	9.04	9.41	8.81	8.12	7.30	8.43	9.10	9.20	9.31	8.96	7.92	8.22	7.86	8.16	8.22	8.43	**8.54**
10	TELADOC	9.15	8.45	9.05	7.18	9.23	8.36	8.06	7.89	9.55	7.82	9.22	8.06	8.87	8.30	8.65	9.05	7.21	8.52	**8.48**
11	AMN HEALTHCARE	7.20	8.00	8.54	7.87	8.02	6.89	9.38	8.67	8.22	6.91	8.95	8.81	9.00	8.95	7.28	9.33	8.37	8.23	**8.26**
12	VIVIFY	8.83	7.17	9.03	8.09	9.53	7.97	8.67	7.33	8.25	9.16	8.31	7.40	8.51	6.38	9.29	8.72	6.60	8.38	**8.20**
13	DECISIO HEALTH	8.08	8.30	7.16	8.67	8.06	7.86	9.26	8.19	8.94	7.14	8.65	7.78	8.28	8.76	8.57	7.80	6.49	7.12	**8.06**
14	AVERA ECARE	6.96	7.31	6.49	7.69	6.97	9.28	8.25	6.75	9.22	7.63	8.38	7.15	9.27	7.40	8.89	9.55	5.58	7.00	**7.77**
15	TELETRACKING	7.98	8.14	6.99	7.91	7.45	5.09	7.79	8.65	7.96	6.79	6.93	8.42	7.73	9.25	7.84	7.48	6.75	6.32	**7.53**
16	MERCY VIRTUAL	8.02	7.04	7.80	8.25	7.89	7.22	7.17	7.50	6.02	6.70	8.64	8.07	6.11	8.68	7.03	8.22	9.06	5.75	**7.51**
17	VITEL NET	6.11	7.09	8.13	8.33	7.06	7.48	6.34	8.54	9.26	6.54	7.11	8.06	6.60	5.66	7.15	8.83	6.15	7.29	**7.32**
18	HC RECOVERY SOL	8.00	5.28	5.44	6.74	7.57	8.22	7.44	6.07	8.18	7.76	7.62	6.35	6.65	8.15	7.76	5.97	6.37	7.07	**7.04**
19	PAGER	7.24	7.11	5.78	7.80	7.80	6.89	6.40	6.15	6.83	5.40	8.72	6.64	7.02	9.04	7.16	6.00	7.12	5.99	**6.95**
20	CONDUIT	5.77	6.07	6.06	5.55	7.01	8.98	8.12	6.04	8.10	6.49	6.76	5.52	5.47	8.41	8.63	5.39	5.15	7.09	**6.70**

1. Ease of Use & Navigation

A virtual care platform must feel effortless for both providers and patients, as complex and unintuitive systems create frustration, slow adoption, and negatively impact satisfaction. Hospitals require interfaces that enable seamless navigation across virtual hospitals, remote patient monitoring, and virtual nursing workflows without adding unnecessary steps. For AI-enabled platforms, ease of use extends to how effectively AI integrates into daily workflows—if clinicians struggle to access AI-driven insights, adoption will decline. A smooth, well-structured interface minimizes cognitive load, reducing clinician burnout and enhancing patient self-service capabilities.

OVERALL RANK	Q1 CRITERIA RANK	VIRTUAL CARE SERVICES VENDOR	HOSPITALS	HEALTH SYSTEMS	INDEPENENT PHYSICIAN PRACTICES	MEDICAL GROUPS, CLINICS, IPAs & ACOs	MEAN
1	1	ANDOR HEALTH	9.78	9.27	9.63	9.51	**9.55**
2	2	EVISIT	9.37	9.53	9.41	9.73	**9.51**
3	3	EQUUM MEDICAL	9.23	9.41	9.52	9.43	**9.40**
5	4	HICUITY HEALTH	9.26	9.71	9.36	9.13	**9.37**
4	5	HELLOCARE	9.36	9.05	9.18	9.41	**9.25**
10	6	TELADOC	8.83	9.13	9.23	9.41	**9.15**
7	7	VSEE	9.34	8.75	8.78	8.72	**8.90**
8	8	CAREGILITY	9.59	8.41	8.53	8.95	**8.87**
6	9	AMWELL	9.36	8.65	8.41	8.94	**8.84**
12	10	VIVIFY	9.00	9.45	7.92	8.94	**8.83**

Source: Black Book Research™ Q1 2025

2. Quality of Virtual Interactions

The effectiveness of virtual care depends on the clarity and reliability of virtual interactions, whether through telehealth consultations, remote monitoring, or AI-assisted triage. High-definition video, AI-powered speech-to-text capabilities, and real-time contextual data integration significantly impact satisfaction levels. In virtual hospitals and nursing care, the platform must allow real-time provider-patient engagement that feels natural and uninterrupted. If latency, video lag, or miscommunication occurs, it diminishes trust in virtual care, leading to patient dissatisfaction and provider frustration.

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OVERALL RANK	Q2 CRITERIA RANK	VIRTUAL CARE SERVICES VENDOR	HOSPITALS	HEALTH SYSTEMS	INDEPENENT PHYSICIAN PRACTICES	MEDICAL GROUPS, CLINICS, IPAs & ACOs	MEAN
1	1	ANDOR HEALTH	9.54	9.37	9.71	9.78	**9.60**
6	2	AMWELL	9.48	9.66	9.61	9.30	**9.51**
2	3	EVISIT	9.25	9.44	9.32	9.47	**9.37**
3	4	EQUUM MEDICAL	8.98	9.10	9.71	9.36	**9.28**
5	5	HICUITY HEALTH	8.92	9.11	9.77	9.08	**9.23**
8	6	CAREGILITY	8.83	9.07	9.48	9.19	**9.14**
7	7	VSEE	8.90	9.31	9.17	8.79	**9.04**
4	8	HELLOCARE	8.69	8.82	8.91	8.88	**8.83**
9	9	AVASURE	8.78	9.47	8.05	8.18	**8.62**
10	10	TELADOC	8.67	7.47	9.09	8.58	**8.45**

Source: Black Book Research™ Q1 2025

3. Timeliness of Care Access

Virtual care platforms must deliver care without unnecessary delays by ensuring fast AI-driven triage, smart scheduling, and automated provider matching. A highly rated virtual hospital platform must reduce patient wait times for consultations, accelerate nurse response times in remote monitoring, and provide real-time AI insights for clinical decision-making. When platforms fail to efficiently triage high-risk vs. low-risk patients, virtual nursing teams experience inefficiencies, leading to delays in care, increased workload, and lower satisfaction scores from both patients and providers.

OVERALL RANK	Q3 CRITERIA RANK	VIRTUAL CARE SERVICES VENDOR	HOSPITALS	HEALTH SYSTEMS	INDEPENENT PHYSICIAN PRACTICES	MEDICAL GROUPS, CLINICS, IPAs & ACOs	MEAN
1	1	ANDOR HEALTH	9.62	9.50	9.84	9.87	**9.71**
5	2	HICUITY HEALTH	9.61	9.56	9.70	9.31	**9.54**
7	3	VSEE	9.35	9.65	9.41	9.56	**9.49**
3	4	EQUUM MEDICAL	9.23	9.33	9.65	9.45	**9.42**
10	5	TELADOC	9.40	8.65	8.98	9.17	**9.05**
9	6	AVASURE	9.19	9.21	8.55	9.20	**9.04**
12	7	VIVIFY	9.28	9.26	8.69	8.88	**9.03**
2	8	EVISIT	9.50	8.50	9.00	8.97	**8.99**
4	9	HELLOCARE	9.12	9.02	9.12	8.27	**8.88**
8	10	CAREGILITY	8.56	9.16	8.59	8.67	**8.75**

Source: Black Book Research™ Q1 2025

4. Effectiveness of Care Coordination

For virtual hospitals and remote patient monitoring, fragmented communication leads to patient dissatisfaction, medical errors, and provider inefficiency. The best platforms integrate real-time interdisciplinary collaboration, where AI assists in clinical documentation, alerts providers to relevant patient data, and automates care transitions between virtual nurses, physicians, and specialists. Hospitals using AI-driven virtual care platforms with seamless coordination tools report fewer miscommunications, stronger care continuity, and higher provider engagement—key factors in driving customer satisfaction and clinical efficiency.

OVERALL RANK	Q4 CRITERIA RANK	VIRTUAL CARE SERVICES VENDOR	HOSPITALS	HEALTH SYSTEMS	INDEPENENT PHYSICIAN PRACTICES	MEDICAL GROUPS, CLINICS, IPAs & ACOs	MEAN
1	1	ANDOR HEALTH	9.69	9.65	9.51	9.49	**9.59**
9	2	AVASURE	8.91	9.60	9.54	9.59	**9.41**
3	3	EQUUM MEDICAL	9.42	9.45	9.40	9.29	**9.39**
7	4	VSEE	9.56	9.32	8.99	9.00	**9.22**
2	5	EVISIT	9.21	8.32	8.77	9.44	**8.94**
5	6	HICUITY HEALTH	8.92	8.75	8.91	9.06	**8.91**
13	7	DECISIO HEALTH	8.83	8.75	8.20	8.88	**8.67**
8	8	CAREGILITY	9.01	8.84	8.23	8.28	**8.59**
4	9	HELLOCARE	8.13	9.25	8.43	8.41	**8.56**
17	10	VITEL NET	8.35	8.18	8.57	8.20	**8.33**

Source: Black Book Research™ Q1 2025

5. Integration with Clinical Workflows

A well-integrated virtual care platform should align with existing hospital operations without requiring major workflow disruptions. Platforms that fail to integrate into remote patient monitoring dashboards, virtual nursing workflows, and AI-supported triage systems create frustration among clinicians. High client satisfaction is directly tied to how effortlessly a platform merges into daily operations—for example, if AI-based patient deterioration alerts seamlessly trigger rapid response interventions within a virtual hospital, hospitals experience better clinical outcomes and improved staff satisfaction.

OVERALL RANK	Q5 CRITERIA RANK	VIRTUAL CARE SERVICES VENDOR	HOSPITALS	HEALTH SYSTEMS	INDEPENENT PHYSICIAN PRACTICES	MEDICAL GROUPS, CLINICS, IPAs & ACOs	MEAN
1	1	ANDOR HEALTH	9.93	9.86	9.69	9.82	**9.83**
4	2	HELLOCARE	9.66	9.51	9.60	9.75	**9.63**
12	3	VIVIFY	9.43	9.78	9.61	9.29	**9.53**
8	4	CAREGILITY	9.34	9.66	9.42	9.64	**9.52**
6	5	AMWELL	9.06	9.56	9.50	9.75	**9.48**
3	6	EQUUM MEDICAL	9.02	9.59	9.75	9.08	**9.36**
2	7	EVISIT	9.15	9.32	9.09	9.62	**9.30**
10	8	TELADOC	8.86	9.24	9.35	9.48	**9.23**
9	9	AVASURE	8.72	8.96	8.80	8.76	**8.81**
5	10	HICUITY HEALTH	8.85	8.76	8.80	8.43	**8.71**

Source: Black Book Research™ Q1 2025

6. Trust in AI-Driven Triage & Recommendations

A virtual care platform utilizing AI-based triage, predictive analytics, and automated clinical decision support must instill trust in both patients and providers. If AI recommendations lack transparency or override human clinical judgment without explanation, trust deteriorates, resulting in low adoption and negative client sentiment. Highly rated virtual care solutions ensure explainability, offer provider overrides, and demonstrate measurable clinical accuracy. In remote patient monitoring and virtual nursing, an AI-driven platform that accurately escalates critical patients while reducing false alarms significantly improves satisfaction among healthcare teams.

OVERALL RANK	Q6 CRITERIA RANK	VIRTUAL CARE SERVICES VENDOR	HOSPITALS	HEALTH SYSTEMS	INDEPENENT PHYSICIAN PRACTICES	MEDICAL GROUPS, CLINICS, IPAs & ACOs	MEAN
1	1	ANDOR HEALTH	9.83	9.58	9.49	9.70	**9.62**
2	2	EVISIT	9.33	9.50	9.34	9.63	**9.50**
8	3	CAREGILITY	9.28	8.84	9.50	9.76	**9.30**
14	4	AVERA ECARE	8.93	9.51	9.63	9.28	**9.28**
3	5	EQUUM MEDICAL	9.16	9.52	9.23	9.25	**9.14**
20	6	CONDUIT	9.06	8.68	9.60	9.39	**8.98**
6	7	AMWELL	9.33	8.96	8.88	9.31	**8.93**
4	8	HELLOCARE	8.84	8.89	9.17	9.29	**8.52**
10	9	TELADOC	8.58	8.50	8.65	8.80	**8.36**
18	10	HC RECOVERY SOL	8.64	8.44	9.12	7.91	**8.22**

Source: Black Book Research™ Q1 2025

7. Accuracy & Responsiveness of Remote Monitoring

For virtual hospitals and AI-powered remote monitoring, data accuracy and speed of intervention are key drivers of satisfaction. If AI-enabled monitoring tools generate false positives or miss critical health changes, provider trust in the system declines. Clients highly rate platforms that prioritize clinically relevant data, filter out noise, and escalate cases requiring human intervention. The ability to reduce alarm fatigue while improving patient outcomes makes AI-powered virtual care platforms stand out in user experience rankings.

OVERALL RANK	Q7 CRITERIA RANK	VIRTUAL CARE SERVICES VENDOR	HOSPITALS	HEALTH SYSTEMS	INDEPENENT PHYSICIAN PRACTICES	MEDICAL GROUPS, CLINICS, IPAs & ACOs	MEAN
6	1	AMWELL	9.78	9.58	9.47	9.36	**9.55**
11	2	AMN HEALTHCARE	9.46	9.37	9.29	9.40	**9.38**
1	3	ANDOR HEALTH	9.32	9.36	9.49	9.10	**9.32**
13	4	DECISIO HEALTH	9.32	9.22	9.37	9.13	**9.26**
4	5	HELLOCARE	8.41	8.84	9.25	8.68	**8.80**
12	6	VIVIFY	8.81	8.91	8.73	8.24	**8.67**
7	7	VSEE	9.04	8.75	8.14	8.65	**8.65**
3	8	EQUUM MEDICAL	8.62	8.46	8.19	8.93	**8.55**
5	9	HICUITY HEALTH	8.95	7.24	8.83	8.25	**8.33**
2	10	EVISIT	8.71	7.81	8.89	7.66	**8.27**

Source: Black Book Research™ Q1 2025

8. Reduction in Avoidable ER Visits

A top-rated virtual care platform must demonstrate its ability to prevent unnecessary emergency room visits by offering AI-driven proactive interventions, automated patient education, and rapid virtual consultations. Patients who experience delayed triage or ineffective symptom management will lose confidence in the platform. AI-powered remote patient monitoring solutions that identify early deterioration and trigger real-time interventions significantly improve satisfaction ratings by reducing avoidable hospital admissions and improving patient safety.

OVERALL RANK	Q8 CRITERIA RANK	VIRTUAL CARE SERVICES VENDOR	HOSPITALS	HEALTH SYSTEMS	INDEPENENT PHYSICIAN PRACTICES	MEDICAL GROUPS, CLINICS, IPAs & ACOs	MEAN
1	1	ANDOR HEALTH	9.67	9.49	9.69	9.74	**9.65**
5	2	HICUITY HEALTH	9.57	9.51	9.65	9.76	**9.62**
7	3	VSEE	9.34	8.70	9.51	9.59	**9.29**
3	4	EQUUM MEDICAL	9.62	9.02	9.41	8.91	**9.24**
2	5	EVISIT	9.07	8.71	9.23	9.43	**9.11**
11	6	AMN HEALTHCARE	8.47	8.87	8.20	9.11	**8.67**
15	7	TELETRACKING	8.38	8.49	8.85	8.87	**8.65**
4	8	HELLOCARE	8.55	9.03	8.12	8.54	**8.56**
17	9	VITEL NET	8.84	8.10	8.99	8.21	**8.54**
6	10	AMWELL	8.31	7.53	8.99	9.26	**8.52**

Source: Black Book Research™ Q1 2025

9. Continuity of Care in Virtual Hospitals

For virtual hospital services and AI-enabled care models, maintaining seamless care transitions between virtual nursing, hospital-at-home services, and outpatient follow-ups is essential for patient and provider satisfaction. AI can improve handoffs between care teams, ensure real-time care plan updates, and notify virtual nurses and physicians of relevant health changes, reducing disruptions in care and enhancing patient experience. A fragmented patient journey leads to dissatisfaction, whereas AI-assisted continuous monitoring and proactive care transitions drive high user ratings.

OVERALL RANK	Q9 CRITERIA RANK	VIRTUAL CARE SERVICES VENDOR	HOSPITALS	HEALTH SYSTEMS	INDEPENENT PHYSICIAN PRACTICES	MEDICAL GROUPS, CLINICS, IPAs & ACOs	MEAN
1	1	ANDOR HEALTH	9.71	9.59	9.78	9.40	**9.62**
10	2	TELADOC	9.33	9.57	9.60	9.69	**9.55**
3	3	EQUUM MEDICAL	9.68	9.33	9.69	9.47	**9.54**
2	4	EVISIT	9.37	9.86	8.79	9.24	**9.32**
4	5	HELLOCARE	9.34	8.97	9.78	9.03	**9.28**
17	6	VITEL NET	9.59	9.15	9.26	9.02	**9.26**
14	7	AVERA ECARE	9.33	9.17	9.76	8.60	**9.22**
9	8	AVASURE	8.91	9.83	8.79	8.85	**9.10**
5	9	HICUITY HEALTH	8.68	9.27	9.44	8.89	**9.07**
13	10	DECISIO HEALTH	8.37	9.32	9.06	9.00	**8.94**

Source: Black Book Research™ Q1 2025

10. Patient Engagement & Adherence

Virtual care success is heavily dependent on patient adherence to remote monitoring, medication management, and virtual care follow-ups. AI-driven personalized engagement strategies, including automated reminders, behavioral nudging, and interactive patient education, significantly improve user engagement and satisfaction. Patients are more likely to remain compliant with care plans when AI personalizes interventions based on their behaviors, health status, and engagement levels. Platforms that fail to offer customized patient engagement see higher dropout rates and lower long-term satisfaction scores.

OVERALL RANK	Q10 CRITERIA RANK	VIRTUAL CARE SERVICES VENDOR	HOSPITALS	HEALTH SYSTEMS	INDEPENENT PHYSICIAN PRACTICES	MEDICAL GROUPS, CLINICS, IPAs & ACOs	MEAN
1	1	ANDOR HEALTH	9.04	9.50	9.39	9.29	**9.31**
7	2	VSEE	9.14	9.29	9.29	9.36	**9.27**
3	3	EQUUM MEDICAL	8.69	9.70	9.25	9.30	**9.24**
9	4	AVASURE	9.07	9.51	8.61	9.60	**9.20**
12	5	VIVIFY	9.24	8.80	9.44	9.16	**9.16**
2	6	EVISIT	8.54	9.46	9.61	8.83	**9.11**
8	7	CAREGILITY	8.83	9.15	8.81	9.00	**8.95**
5	8	HICUITY HEALTH	8.44	8.96	9.01	8.38	**8.70**
4	9	HELLOCARE	8.28	8.74	8.90	8.23	**8.54**
6	10	AMWELL	7.89	7.95	8.01	7.58	**7.86**

Source: Black Book Research™ Q1 2025

11. Scheduling & Self-Service Efficiency

For a virtual hospital or AI-powered remote care platform, self-service scheduling must be frictionless. If a patient struggles to book a virtual visit, modify a remote monitoring schedule, or access AI-assisted triage services, frustration builds. The highest-rated platforms offer intuitive, automated, and dynamic scheduling tools, enabling patients and providers to manage availability in real-time without administrative bottlenecks. A streamlined, automated scheduling system significantly boosts satisfaction ratings in virtual care settings.

OVERALL RANK	Q11 CRITERIA RANK	VIRTUAL CARE SERVICES VENDOR	HOSPITALS	HEALTH SYSTEMS	INDEPENENT PHYSICIAN PRACTICES	MEDICAL GROUPS, CLINICS, IPAs & ACOs	MEAN
3	1	EQUUM MEDICAL	9.53	9.94	9.42	9.87	**9.69**
4	2	HELLOCARE	9.48	9.75	9.77	9.49	**9.62**
1	3	ANDOR HEALTH	9.36	9.41	9.10	9.36	**9.31**
9	4	AVASURE	9.59	9.57	8.77	9.32	**9.31**
8	5	CAREGILITY	9.47	9.32	9.30	9.03	**9.29**
10	6	TELADOC	9.41	9.28	9.09	9.11	**9.22**
6	7	AMWELL	9.09	9.24	8.38	9.31	**9.01**
11	8	AMN HEALTHCARE	9.03	8.96	8.75	9.03	**8.95**
2	9	EVISIT	9.02	8.31	7.95	9.64	**8.73**
19	10	PAGER	9.06	8.92	7.74	9.15	**8.72**

Source: Black Book Research™ Q1 2025

12. Latency, System Performance & Interoperability Speed

A virtual hospital platform's reliability and speed of AI-driven decision-making directly impact patient safety and provider confidence. If an AI-powered virtual care solution experiences latency in updating vital signs, processing triage data, or syncing with provider dashboards, response times are compromised, negatively impacting outcomes. Highly rated systems prioritize real-time data exchange, fast AI processing, and seamless interoperability, ensuring low latency and high clinical efficiency.

OVERALL RANK	Q12 CRITERIA RANK	VIRTUAL CARE SERVICES VENDOR	HOSPITALS	HEALTH SYSTEMS	INDEPENENT PHYSICIAN PRACTICES	MEDICAL GROUPS, CLINICS, IPAs & ACOs	MEAN
2	1	EVISIT	9.75	9.71	9.52	9.73	**9.68**
1	2	ANDOR HEALTH	9.47	9.61	9.78	9.46	**9.58**
6	3	AMWELL	9.56	8.69	9.64	9.08	**9.25**
3	4	EQUUM MEDICAL	9.14	8.71	9.59	9.04	**9.12**
9	5	AVASURE	8.85	8.65	9.19	9.14	**8.96**
7	6	VSEE	8.84	9.46	8.71	8.34	**8.84**
11	7	AMN HEALTHCARE	9.13	8.68	9.03	8.39	**8.81**
5	8	HICUITY HEALTH	8.96	8.49	8.15	8.91	**8.63**
8	9	CAREGILITY	8.88	7.38	8.93	8.74	**8.48**
15	10	TELETRACKING	8.80	9.05	7.85	7.96	**8.42**

Source: Black Book Research™ Q1 2025

13. Provider Workload Optimization

Virtual care should reduce, not add to, provider workload. The top-rated platforms incorporate AI-powered clinical documentation, automated decision support, and administrative task reduction to optimize provider efficiency. If a platform requires extra manual documentation, redundant workflows, or complex navigation, user satisfaction plummets. AI-driven automation that enhances productivity and minimizes cognitive load drives strong positive ratings from providers.

OVERALL RANK	Q13 CRITERIA RANK	VIRTUAL CARE SERVICES VENDOR	HOSPITALS	HEALTH SYSTEMS	INDEPENENT PHYSICIAN PRACTICES	MEDICAL GROUPS, CLINICS, IPAs & ACOs	MEAN
1	1	ANDOR HEALTH	9.64	9.40	9.58	9.42	**9.51**
2	2	EVISIT	9.40	9.54	9.55	9.47	**9.49**
14	3	AVERA ECARE	9.12	9.25	9.42	9.27	**9.27**
3	4	EQUUM MEDICAL	9.06	8.87	9.16	9.09	**9.05**
4	5	HELLOCARE	8.71	8.94	9.56	8.95	**9.04**
11	6	AMN HEALTHCARE	9.01	8.81	8.95	9.21	**9.00**
8	7	CAREGILITY	9.05	8.89	8.65	9.35	**8.99**
10	8	TELADOC	8.74	8.54	9.44	8.74	**8.87**
7	9	VSEE	8.83	8.12	8.49	8.81	**8.56**
12	10	VIVIFY	8.77	8.66	7.82	8.77	**8.51**

Source: Black Book Research™ Q1 2025

14. Effectiveness of Real-Time Alerts & Notifications

AI-powered alerting must be smart, context-aware, and prioritize high-risk cases while filtering out unnecessary noise. If providers experience alert fatigue from AI-driven virtual monitoring, satisfaction levels drop. Highly rated platforms fine-tune alerts based on clinical urgency, ensuring critical cases receive immediate attention while minimizing distractions.

OVERALL RANK	Q14 CRITERIA RANK	VIRTUAL CARE SERVICES VENDOR	HOSPITALS	HEALTH SYSTEMS	INDEPENENT PHYSICIAN PRACTICES	MEDICAL GROUPS, CLINICS, IPAs & ACOs	MEAN
2	1	EVISIT	9.59	9.81	9.60	9.84	**9.71**
1	2	ANDOR HEALTH	9.65	9.00	9.73	9.62	**9.50**
3	3	EQUUM MEDICAL	9.44	9.21	9.45	9.38	**9.37**
15	4	TELETRACKING	8.93	9.54	9.23	9.31	**9.25**
6	5	AMWELL	8.88	9.18	9.33	9.29	**9.17**
19	6	PAGER	9.00	9.15	9.12	8.88	**9.04**
11	7	AMN HEALTHCARE	8.96	8.91	8.86	9.06	**8.95**
13	8	DECISIO HEALTH	8.71	9.05	8.01	9.27	**8.76**
4	9	HELLOCARE	9.17	8.86	8.22	8.66	**8.73**
16	10	MERCY VIRTUAL	8.91	8.82	7.91	9.08	**8.68**

Source: Black Book Research™ Q1 2025

15. Privacy & Security Perception

Trust in AI-powered virtual hospitals and remote monitoring solutions is heavily tied to perceived security and HIPAA compliance. The best-rated platforms ensure end-to-end encryption, biometric authentication, and AI-driven anomaly detection for cybersecurity threats, reassuring both patients and providers.

OVERALL RANK	Q15 CRITERIA RANK	VIRTUAL CARE SERVICES VENDOR	HOSPITALS	HEALTH SYSTEMS	INDEPENENT PHYSICIAN PRACTICES	MEDICAL GROUPS, CLINICS, IPAs & ACOs	MEAN
1	1	ANDOR HEALTH	9.89	9.79	9.86	9.87	**9.85**
2	2	EVISIT	9.64	9.75	9.70	9.54	**9.66**
8	3	CAREGILITY	9.56	9.29	9.55	9.54	**9.49**
12	4	VIVIFY	9.34	8.89	9.41	9.51	**9.29**
4	5	HELLOCARE	9.04	9.41	9.37	9.00	**9.21**
14	6	AVERA ECARE	9.19	9.39	9.05	7.92	**8.89**
6	7	AMWELL	9.24	8.99	8.20	8.78	**8.80**
10	8	TELADOC	8.98	8.78	8.10	8.74	**8.65**
5	9	HICUITY HEALTH	8.38	7.94	9.09	9.20	**8.65**
20	10	CONDUIT	8.70	8.84	8.24	8.73	**8.63**

Source: Black Book Research™ Q1 2025

16. User Adoption & Engagement

If providers and patients fail to engage with the platform, adoption stagnates. AI-powered, intuitive platforms that reduce barriers to usage and integrate seamlessly into daily workflows see higher adoption rates and stronger client satisfaction scores.

OVERALL RANK	Q16 CRITERIA RANK	VIRTUAL CARE SERVICES VENDOR	HOSPITALS	HEALTH SYSTEMS	INDEPENENT PHYSICIAN PRACTICES	MEDICAL GROUPS, CLINICS, IPAs & ACOs	MEAN
1	1	ANDOR HEALTH	9.72	9.63	9.61	9.56	**9.63**
14	2	AVERA ECARE	9.54	9.68	9.63	9.33	**9.55**
2	3	EVISIT	9.36	9.20	9.33	9.67	**9.39**
11	4	AMN HEALTHCARE	9.47	9.32	9.42	9.09	**9.33**
5	5	HICUITY HEALTH	9.31	9.27	9.18	8.90	**9.17**
6	6	AMWELL	8.83	9.18	8.95	9.34	**9.08**
10	7	TELADOC	9.21	8.72	9.00	9.28	**9.05**
8	8	CAREGILITY	8.87	9.27	9.22	8.56	**8.98**
17	9	VITEL NET	8.31	8.75	9.27	8.99	**8.83**
3	10	EQUUM MEDICAL	8.88	8.68	8.63	8.91	**8.78**

Source: Black Book Research™ Q1 2025

17. Personalization & Patient-Centered Care

AI-enabled platforms that personalize care plans, engagement strategies, and virtual interactions foster stronger patient relationships and increase retention and satisfaction rates.

OVERALL RANK	Q17 CRITERIA RANK	VIRTUAL CARE SERVICES VENDOR	HOSPITALS	HEALTH SYSTEMS	INDEPENENT PHYSICIAN PRACTICES	MEDICAL GROUPS, CLINICS, IPAs & ACOs	MEAN
1	1	ANDOR HEALTH	9.99	9.92	9.89	9.96	**9.94**
2	2	EVISIT	9.83	9.80	9.84	9.82	**9.82**
7	3	VSEE	9.11	9.44	9.77	9.43	**9.44**
5	4	HICUITY HEALTH	9.45	9.15	9.55	9.25	**9.35**
3	5	EQUUM MEDICAL	9.03	9.34	9.01	8.99	**9.09**
16	6	MERCY VIRTUAL	9.20	8.85	9.01	9.17	**9.06**
4	7	HELLOCARE	9.12	8.41	8.59	8.32	**8.62**
11	8	AMN HEALTHCARE	8.39	8.11	8.83	8.15	**8.37**
9	9	AVASURE	9.14	7.19	8.94	7.61	**8.22**
6	10	AMWELL	7.95	8.44	7.58	8.85	**8.21**

Source: Black Book Research™ Q1 2025

18. Clinical Outcome Improvement & Virtual Care Impact

Ultimately, the best-ranked virtual care platforms are those that deliver measurable clinical outcomes, with AI-driven predictive analytics, proactive interventions, and improved patient recovery times. Users highly rate platforms that demonstrate success in reducing hospitalizations, improving chronic disease management, and enhancing care quality.

OVERALL RANK	Q18 CRITERIA RANK	VIRTUAL CARE SERVICES VENDOR	HOSPITALS	HEALTH SYSTEMS	INDEPENENT PHYSICIAN PRACTICES	MEDICAL GROUPS, CLINICS, IPAs & ACOs	MEAN
1	1	ANDOR HEALTH	9.39	9.63	9.37	9.40	**9.45**
3	2	EQUUM MEDICAL	9.09	9.39	9.14	9.43	**9.26**
5	3	HICUITY HEALTH	9.15	9.27	9.37	9.20	**9.25**
2	4	EVISIT	8.90	8.90	9.32	9.16	**9.07**
7	5	VSEE	8.68	8.93	8.85	8.97	**8.86**
10	6	TELADOC	8.83	8.00	9.27	7.99	**8.52**
9	7	AVASURE	8.52	7.67	8.64	8.88	**8.43**
12	8	VIVIFY	8.59	8.09	8.69	8.14	**8.38**
11	9	AMN HEALTHCARE	8.76	8.29	7.55	8.33	**8.23**
4	10	HELLOCARE	7.80	7.49	8.83	8.69	**8.20**

Source: Black Book Research™ Q1 2025

Appendix`

Black Book Market Research Surveys & IT User Polling

We aim for the data and analysis in this report to assist you in making well-informed and strategic decisions regarding revenue cycle management. If you require additional insights or customized research, the Black Book research team is available to assist. For inquiries about our custom survey capabilities, please contact us at research@blackbookmarketresearch.com.

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