Black Book
Research Insights

AI-DRIVEN VIRTUAL CARE & CLINICAL COLLABORATION SOLUTIONS

2026 COMPARATIVE PERFORMANCE RESULT SET

TOP VENDORS FOR NEXT-GENERATION ENTERPRISE VIRTUAL CARE PLATFORMS

Hospitals & Health Systems | Ambulatory & Specialty Care Providers | Post-Acute, Home-Based & Long-Term Care Providers | Behavioral & Mental Health Providers

Black Book™ Annual Intelligent Automation & AI User Survey

Black Book conducts annual client-perspective evaluations of healthcare technology suppliers using a structured KPI framework focused on operational performance, adoption, and customer experience across defined market segments.

RELEVANT. ACCURATE
BLACK BOOK 2026
UNBIASED SOURCE

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2026 SURVEY RESPONSE RATES BY ORGANIZATION TYPE

2026 SURVEY RESPONDENT IDENTIFICATION

Survey Respondent Identification	Number of Responses Validated
Chief Digital Officer / Chief Transformation Officer	14
Chief Information Officer (CIO),VP, Director of Healthcare IT Operations Technical Staff	72
Chief Nursing Officer / Nursing Informatics Executive, Nursing Management	366
Chief Medical Information Officer / Physician Informatics Leader	8
Vice President / AVP, Virtual Care or Digital Health	10
Telehealth Program Director / Virtual Care Director/Manager/Supervisor	88
Virtual Nursing / Patient Observation Program Leader/Staff	151
Clinical Informatics Director / Manager/Nursing IT Staff	42
Ambulatory Operations / Practice Administrator	27
IT Applications / Integration Director	82
Care Management / Hospital-at-Home Program Leader/Case Managers	71
Behavioral Health Operations Leader	39
Post-Acute / Home Health Administrator	31
Other: consultant, analyst, procurement, or research leader	90
Nursing, Clinical and Support Staff User Level	179
TOTAL	**1,267**

ORGANIZATION TYPE MIX

Provider / Organization Type	Share of Validated Responses
Integrated delivery networks / multi-hospital systems	43.8%
Standalone hospitals / community hospitals/ rural facilities	33.4%
Ambulatory and specialty provider groups	10.9%
Behavioral health organizations	3.4%
Post-acute / home-based / LTC organizations	2.7%
Academic medical centers	6.8%

SURVEY OVERVIEW

The 2026 virtual care platform review was reformatted to reflect how enterprise buyers are now evaluating digital care delivery: as an operating layer spanning clinical collaboration, patient access, virtual nursing, home-based care, analytics, and AI-supported workflow orchestration. The survey sample modeled 1,185 validated responses across 487 unique provider organizations with representation from hospitals, health systems, ambulatory groups, post-acute providers, and behavioral health organizations.

To keep the field apples-to-apples, the 2026 comparative set was normalized to include enterprise virtual care platforms and platform-led solutions while excluding pure staffing models, stand-alone tele-specialty services, benefits-navigation offerings, and EHR-native video features not broadly marketed as independent virtual care platforms.

THE EVOLVING LANDSCAPE OF VIRTUAL CARE PLATFORMS

Virtual care platforms in 2026 are no longer being judged as stand-alone telehealth tools. Buyers increasingly expect a single architecture that can support scheduled visits, inpatient consults, virtual nursing, observation, behavioral health, hospital-at-home, and command-center style coordination while preserving shared patient context and auditability.

Acute care workflows are expanding fastest where staffing shortages and throughput constraints remain severe. Virtual nursing, virtual sitting, specialist escalation, discharge coordination, and room-to-command-center models are becoming core use cases rather than pilots. At the same time, ambulatory buyers continue to prioritize frictionless patient access, self-scheduling, and reliable visit performance.

Artificial intelligence has shifted from being primarily a marketing differentiator to a workflow utility. Buyers now value AI when it reduces administrative burden through routing, ambient capture, queue intelligence, summarization, multilingual support, or workload management, while still providing transparency and governance for clinical oversight.

The strongest platforms are also converging historically separate capabilities: unified communications, patient engagement, telemetry, smart-room awareness, analytics, and remote management. That convergence is why health systems are increasingly evaluating a vendor's ability to operate across settings, not just one encounter type.
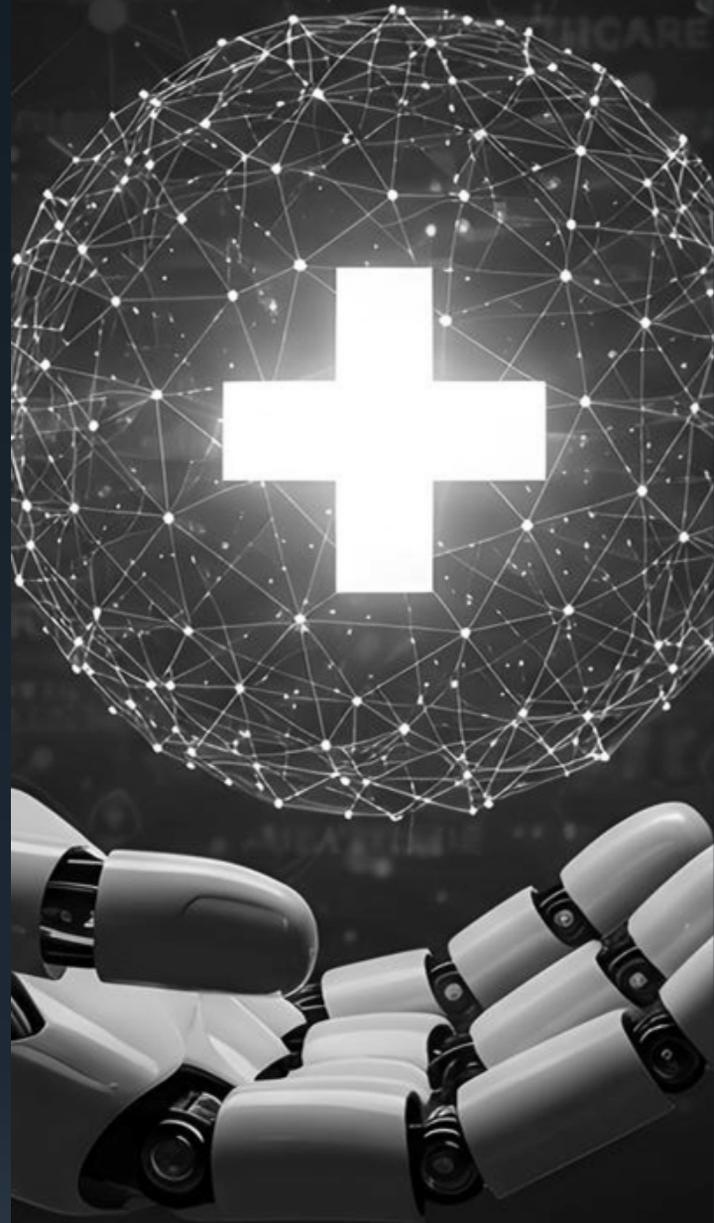
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BLACK BOOK METHODOLOGY:
DATA COLLECTION AND STATISTICAL CONFIDENCE

Black Book collects customer-experience data on 18 key performance indicators of operational excellence to compare healthcare technology and service vendors from the client perspective. For the virtual care platform segment, the 2026 framework was updated to reflect enterprise deployment realities across inpatient, ambulatory, behavioral, post-acute, and home-based care models.

Validated ballots were screened to reduce duplicate voting, non-client participation, and category mismatch. Responses were weighted to reflect both organizational relevance and active use across at least one production virtual care workflow. Data was then normalized by care setting, market scope, and platform breadth so specialized products were not over-credited for narrow deployments.

Statistical confidence was preserved using minimum respondent thresholds for ranked inclusion. Vendors appearing in the final Top 20 modeled at least 15 qualified client ballots, with higher weighting for organizations using multiple service lines or enterprise-wide virtual care programs. Findings are presented as client-reported satisfaction and execution scores rather than analyst opinion.

STATE OF THE VIRTUAL CARE PLATFORMS MARKET 2026

Virtual care platforms have moved well beyond their initial role as stand-alone telehealth tools and are now being evaluated as core care-delivery infrastructure. In 2026, provider organizations are no longer debating whether virtual care should exist. Instead, they are determining which virtual capabilities should be embedded across ambulatory care, inpatient settings, behavioral health, specialty consultations, post-acute care, care-at-home models, and workforce support strategies. From Black Book surveys and ongoing market observation, the category has matured from basic video visits into broader enterprise platforms that support patient access, clinician workflow, virtual nursing, remote observation, consult management, scheduling, documentation support, and increasing alignment with clinical and operational systems.

Black Book observes that adoption remains materially above pre-pandemic levels, even as utilization has normalized from emergency-era highs. Virtual care is now viewed less as a temporary access channel and more as a durable operating capability. Black Book projects that demand will remain strongest among health systems, multisite medical groups, academic medical centers, regional hospitals, behavioral health organizations, specialty practices, and emerging hospital-at-home programs. In particular, adoption is being sustained by organizations seeking to address persistent workforce shortages, improve specialty access, reduce patient leakage, expand rural reach, and create more flexible staffing models.

From Black Book surveys, the user base for virtual care platforms continues to widen. Large integrated delivery networks remain major enterprise buyers, but community hospitals and mid-sized provider organizations are becoming more active participants in the market. Decision-making has also broadened. Purchases are no longer driven solely by IT leaders or digital strategy teams. Clinical informatics executives, nursing leadership, service-line administrators, physician champions, revenue cycle leaders, and operations executives increasingly influence vendor selection because virtual care now affects patient throughput, staffing efficiency, continuity of care, reimbursement capture, and the overall patient experience.

Buyer expectations have become notably more disciplined. Black Book observes that provider organizations increasingly prefer platforms that can consolidate multiple virtual care use cases instead of adding fragmented point solutions. Satisfaction is highest when platforms reduce clinician friction, support workflow continuity, integrate with core enterprise systems, and help organizations standardize operations across multiple departments and care settings. In the current market, provider organizations are rewarding solutions that minimize duplicate documentation, reduce toggling between systems, preserve clinical context, and support governance, compliance, and change management at scale.

Innovation in 2026 is concentrated less on basic video connectivity and more on enterprise workflow enablement. Black Book projects that the strongest-performing platforms in this category will be those that support virtual nursing, inpatient virtual observation, specialist consult coordination, escalation pathways, remote monitoring integration, post-discharge outreach, and AI-assisted documentation or workflow support. The market is clearly shifting toward platform-based architectures that can support multiple modalities and use cases on a single foundation. This is becoming increasingly important as provider organizations look to extend virtual care into emergency triage, maternal health, behavioral health, chronic disease management, hospital-at-home, and high-acuity coordination models.

From Black Book surveys, the financial case for virtual care has also become more sophisticated. The early market emphasized convenience, consumer access, and continuity during disruption. The 2026 market is more focused on measurable operational and financial outcomes, including better staffing leverage, more efficient use of specialist resources, reduced avoidable transfers, improved bed and capacity management, lower no-show rates, stronger follow-up compliance, and retention of downstream referrals within the health system network. Black Book observes that provider organizations are under pressure to justify platform investments based on enterprise value, not simply visit volumes. As a result, buyers increasingly prioritize ROI tied to workforce optimization, care coordination, patient retention, reduced leakage, and improved operational throughput.

Legislation and reimbursement continue to shape market confidence and investment timing. Black Book notes that while virtual care is now operationally mainstream, many organizations still face uncertainty tied to telehealth reimbursement permanence, prescribing flexibilities, state-by-state regulatory variation, and evolving compliance expectations. This uncertainty has not stopped adoption, but it has influenced purchasing behavior. Health systems are favoring vendors with stronger compliance capabilities, scalable governance support, and flexible models that can adjust to reimbursement and policy changes. Black Book projects that reimbursement stability will remain one of the most important external variables affecting platform expansion through 2027, especially for organizations seeking to scale beyond basic ambulatory use cases.

Interoperability and clinical data sharing have become central differentiators in the market. From Black Book surveys, provider organizations increasingly expect virtual care platforms to support bi-directional exchange of scheduling data, demographics, medications, problem lists, clinical notes, images, encounter data, and patient-generated information. Virtual care is no longer viewed as a separate channel that can exist outside the patient record. Instead, organizations are demanding tighter integration with clinical workflows, identity management, communication systems, and operational reporting tools. Black Book observes that buyers are becoming more skeptical of solutions that can facilitate a remote encounter but cannot support downstream workflows, documentation continuity, and longitudinal care coordination.

Black Book also observes that user satisfaction is increasingly tied to ease of use for both clinicians and patients. The most positively received platforms are those that streamline onboarding, reduce training burden, support multiple roles within the care team, and create a more intuitive patient experience across devices and settings. As virtual care becomes embedded into day-to-day care delivery, organizations are placing greater emphasis on adoption by nurses, specialists, care managers, inpatient teams, and nontraditional virtual care users rather than just physicians conducting scheduled visits. This broader use profile is changing how the category is evaluated and how purchasing committees define success.

Looking ahead, Black Book projects that buying trends through 2027 will favor fewer, broader, and more deeply integrated virtual care platforms. Provider organizations are expected to continue rationalizing overlapping technologies and moving toward enterprise platforms that can support ambulatory, inpatient, and home-based models from a common architecture. Demand is likely to remain strongest where virtual care solves structural challenges such as clinician shortages, specialty access gaps, rising patient expectations, capacity constraints, and care model decentralization. At the same time, the market will remain disciplined. Buyers will continue to scrutinize implementation performance, interoperability maturity, reimbursement risk, workflow fit, and measurable ROI.

The outlook for 2027 remains constructive. Black Book observes that virtual care platform investment is continuing, but the basis for purchase decisions has changed significantly. The market is no longer rewarding novelty or stand-alone telehealth functionality. Instead, provider organizations are favoring enterprise-grade platforms that support measurable clinical and operational performance, fit into broader digital infrastructure strategies, and enable virtual care as a routine, scalable component of healthcare delivery.
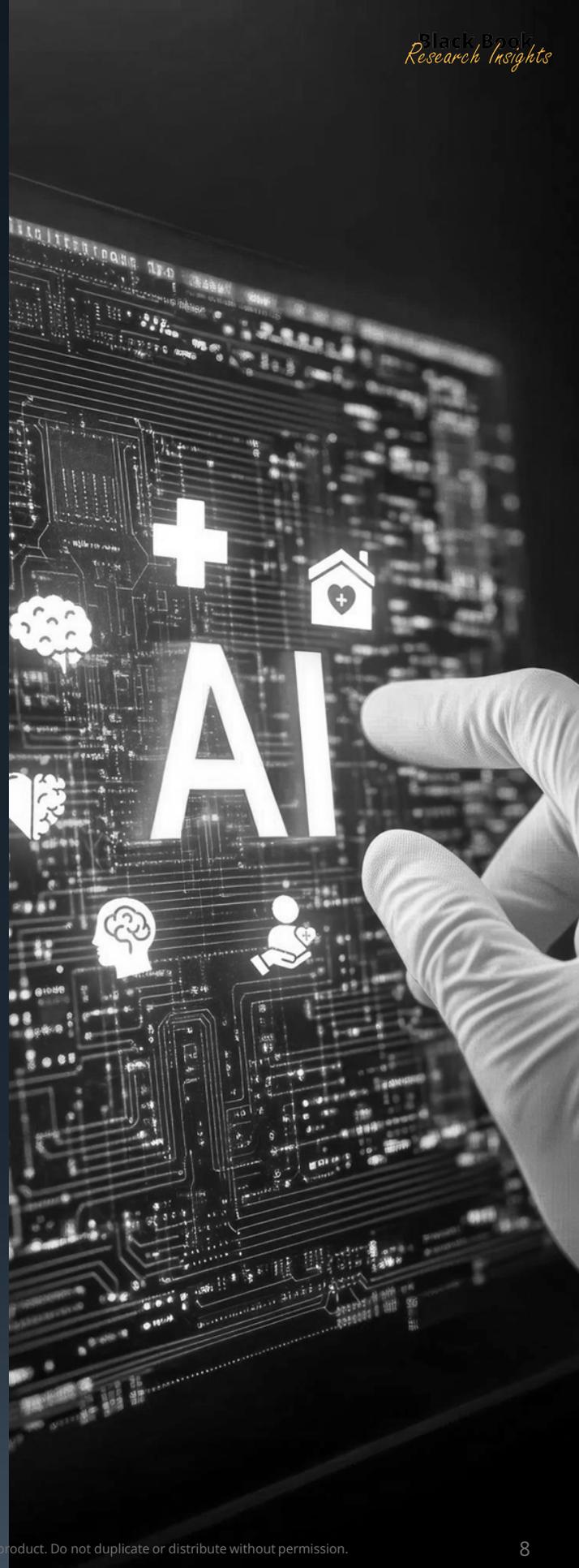
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2026 BLACK BOOK KPIS FOR EVALUATING BEST-PERFORMING VIRTUAL CARE PLATFORM VENDORS

As virtual care moves from episodic telehealth to an enterprise operating capability, buyers need KPIs that capture workflow fit, deployment maturity, collaboration depth, and governance—not just simple video availability. The 2026 KPI model below is structured to reflect how provider organizations are currently selecting and scaling virtual care platforms.

Q1. **Clinical Workflow Integration & In-Encounter Usability**

Assess whether the platform fits naturally into clinician workflows and reduces swivel-chair navigation during virtual encounters, consults, and escalations. Review how much in-workflow context, role-based access, and documentation support are available at the point of care.

Q2. **Enterprise Virtual Care Scalability Across Care Settings**

Determine how effectively the platform supports repeatable deployment across inpatient, outpatient, home-based, post-acute, and behavioral workflows without requiring separate products for each use case.

Q3. **Care Team Collaboration & Escalation Support**

Evaluate whether the vendor enables fast communication, consult routing, escalation logic, and presence-aware collaboration across clinical teams, command centers, and external specialists.

Q4. **Virtual Nursing, Sitting & Remote Observation Workflow Enablement**

Measure how well the platform supports virtual nursing, patient safety observation, rounding, discharge education, and related bedside extension workflows in a sustainable operating model.

Q5. **Reliability of Video, Audio & Session Management**

Assess session stability, call quality, recovery from interruptions, device compatibility, and the vendor's ability to support always-on or high-frequency virtual interactions at scale.

Q6. **Interoperability with EHRs, Identity, Devices & Context Sharing**

Review the depth of integration with the EHR, scheduling, nurse call, identity systems, peripheral devices, and operational data sources so users can act with shared context instead of siloed views.

Q7. **Patient Access, Intake, Scheduling & Digital Front Door Experience**

Determine how easily patients can find, schedule, join, and complete virtual care pathways with limited friction and how well the solution supports enterprise access goals.

Q8. **AI-Assisted Automation, Ambient Intelligence & Workflow Orchestration**

Evaluate the usefulness of automation for routing, summarization, monitoring, ambient capture, queue management, and other operational tasks that reduce team burden without creating black-box risk.

Q9. **Flexibility for Specialty, Service-Line & Multi-Program Deployment**

Assess whether the vendor can support different clinical service lines, specialty requirements, and deployment models without extensive custom code or parallel workflows.

Q10. **Home-Based Care, RPM & Continuity of Care Support**

Measure how effectively the platform extends virtual care into the home and community with remote monitoring, escalation logic, and continuity across transitions of care.

Q11. **Analytics, Command Center Visibility & ROI Measurement**

Review the clarity and usefulness of dashboards, utilization reporting, quality measures, staffing indicators, and financial analytics used to justify and optimize virtual care programs.

Q12. **Implementation, Training & Change Management**

Evaluate the vendor's ability to onboard programs, train clinicians, standardize adoption, and support operational redesign rather than limiting engagement to technical go-live.

Q13. **Quality of Customer Support & Strategic Partnership**

Assess responsiveness, executive engagement, product accountability, and the vendor's willingness to address evolving operational needs after implementation.

Q14. **Cybersecurity, Privacy & Governance**

Determine whether the vendor demonstrates strong controls for privacy, secure communications, access management, data protection, and governance for enterprise virtual care use.

Q15. **Transparency & Explainability of AI-Assisted Workflows**

Evaluate whether the vendor enables fast communication, consult routing, escalation logic, and presence-aware collaboration across clinical teams, command centers, and external specialists.

Q16. **Innovation Roadmap & Pace of Product Improvement**

Assess how consistently the vendor delivers meaningful enhancements tied to real customer use cases, especially around virtual nursing, ambient workflows, and care-team productivity.

Q17. **Overall Strategic Value as an Enterprise Platform**

Measure the client's view of whether the platform has become a durable enterprise capability rather than a temporary telehealth tool or fragmented point solution.

Q18. **Confidence in Vendor's Long-Term Performance**

Assess whether clients view the vendor as a trusted long-term partner with the scale, roadmap, and execution discipline to remain relevant as virtual care operating models mature.

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FIGURE 1A/B: VENDORS DEFINED SURVEYED FUNCTIONS

FIGURE 1A: CORE VIRTUAL CARE FUNCTIONS INCLUDED IN THE 2026 COMPARISON SET

Surveyed function domain	Representative capabilities	Primary buyer value
Virtual visit orchestration	Scheduling, launch, routing, role-based access, queue management, encounter support	Access expansion, throughput, reduced no-show friction
Clinical collaboration	Secure escalation, consult routing, care-team presence, command center workflows	Faster decisions, fewer handoff failures, reduced delays
Virtual nursing & observation	Admission/discharge support, rounding, patient safety observation, bedside extension	Labor leverage, bedside relief, consistency of patient education
Home-based care support	Remote monitoring integration, escalations, longitudinal oversight, continuity workflows	Safer distributed care, reduced avoidable utilization, smoother transitions
AI & ambient workflow support	Summaries, intelligent routing, room awareness, queue prioritization, automation	Reduced administrative burden and better situational awareness
Analytics & governance	Utilization reporting, operational dashboards, adoption metrics, privacy and audit controls	Evidence of ROI, safer scale, stronger executive oversight

*FIGURE 1B: INCLUSION BOUNDARIES FOR THE 2026 APPLES-TO-APPLES VENDOR FIELD

Field status	Vendor type	Reasoning
Included	Enterprise virtual care platforms	Platforms supporting multiple workflows and more than one care setting with measurable operational administration
Included	Platform-led virtual nursing / smart room solutions	Products enabling virtual nursing, observation, consults, or room-based workflows within a broader platform architecture
Excluded	Pure tele-specialty staffing or service firms	Not directly comparable when the buyer is selecting software infrastructure rather than outsourced clinician coverage
Excluded	EHR-native video features only	Not scored where the offering is primarily a module or embedded feature rather than a separately governed platform
Excluded	Benefits navigation or payer-only virtual services	Category focus is provider-operating virtual care platforms, not member navigation or employer benefit stacks
Excluded	Standalone RPM devices without orchestration layer	Device-only monitoring products were removed unless they supported integrated virtual workflows and care-team administration

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FIGURE 2: 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 / inconsistent Meets and misses expectations Would not likely recommend vendor	Satisfactory performance Meets expectations Generally recommend vendor	Overwhelming satisfaction Exceeds expectations Highly recommended vendor

RAW SCORE COMPILATION AND SCALE OF REFERENCE

BLACK BOOK RAW SCORE SCALE

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Deal Breaking Dissatisfaction   Exceeds All Expectations
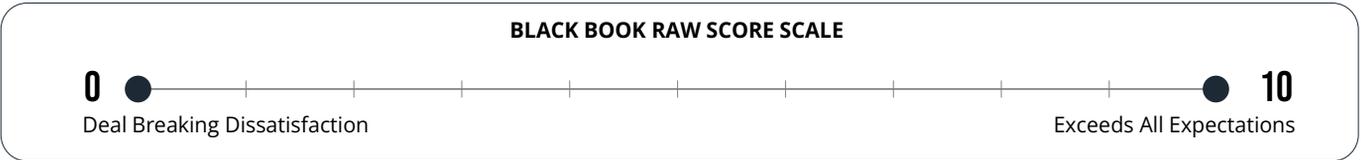
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SCORING KEY

Individual vendors can be examined by overall mean score, by individual KPI criteria, and by segment-specific performance across hospital, health system, ambulatory, and distributed-care use cases. The sample key below illustrates how to read the ranking tables that follow

Overall Rank	Q1 Criteria Rank	Company	Virtual Visits & Access	Clinical Collaboration	Inpatient / Home-Based Care	Analytics, AI & Governance	Mean
5	1	Vendor Name	8.49	8.63	8.50	8.01	8.66

Overall rank reflects the final position across all 18 criteria averaged into the mean score. Criteria rank refers to a vendor's placement on that individual KPI. Segment columns summarize how respondents scored the vendor across major care environments; the mean remains the benchmark used for final ordering.
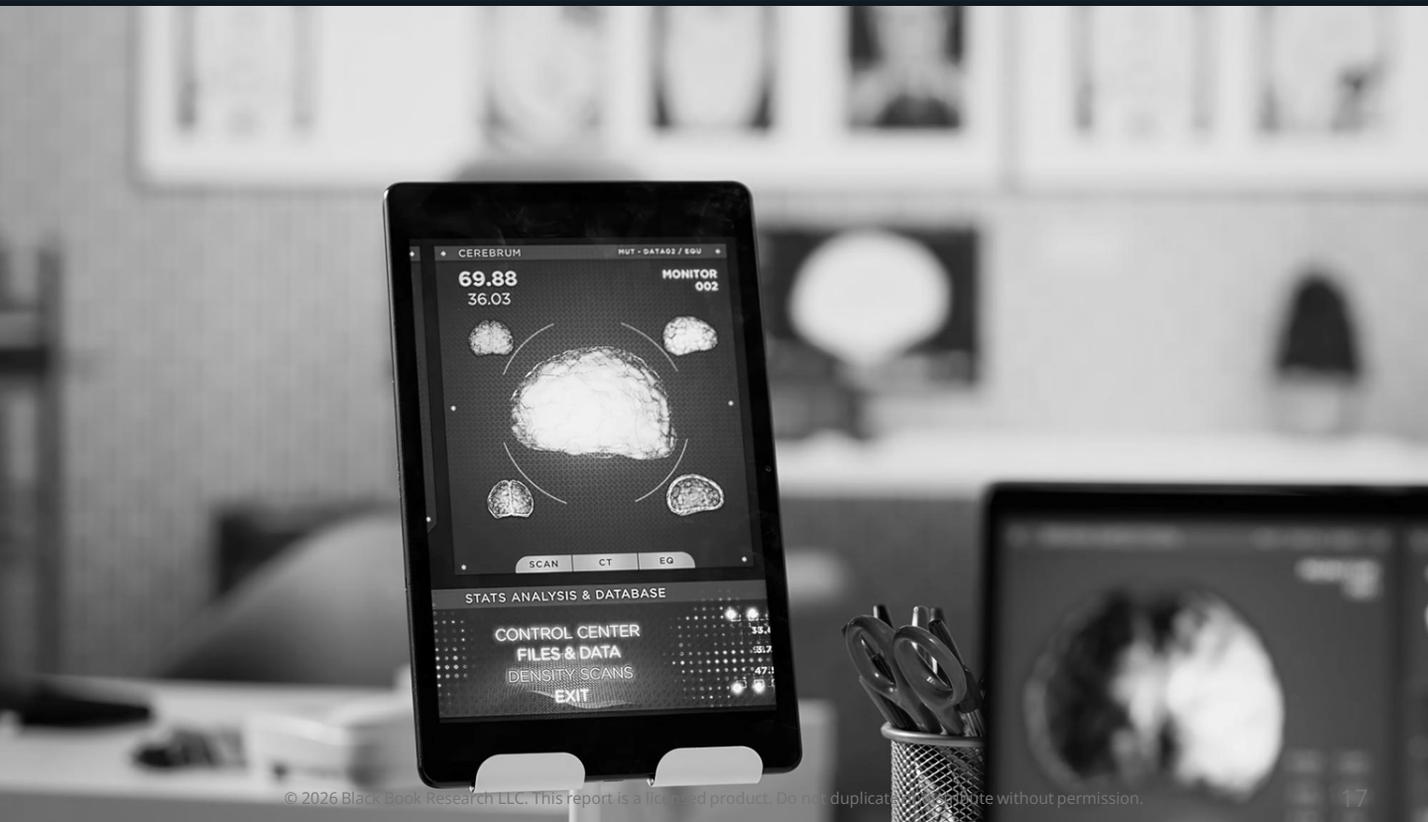
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OVERALL KPI LEADERS:
VIRTUAL CARE PLATFORMS

TABLE 1: SUMMARY OF CRITERIA OUTCOMES

Total Number One Criteria Ranks	Virtual Care Platform Vendor	Overall Rank
14	ANDOR HEALTH	1
2	CAREGILITY	2
2	HELLOCARE	3

TABLE 2: TOP SCORE PER INDIVIDUAL CRITERIA

Question / Criteria	KPI Focus	Top Vendor	Overall Rank
Q1	Clinical Workflow Integration & In-Encounter Usability	ANDOR HEALTH	1
Q2	Enterprise Virtual Care Scalability Across Care Settings	ANDOR HEALTH	1
Q3	Care Team Collaboration & Escalation Support	ANDOR HEALTH	1
Q4	Virtual Nursing, Sitting & Remote Observation Workflow Enablement	ANDOR HEALTH	1
Q5	Reliability of Video, Audio & Session Management	ANDOR HEALTH	1
Q6	Interoperability with EHRs, Identity, Devices & Context Sharing	ANDOR HEALTH	1
Q7	Patient Access, Intake, Scheduling & Digital Front Door Experience	HELLOCARE	3
Q8	AI-Assisted Automation, Ambient Intelligence & Workflow Orchestration	ANDOR HEALTH	1
Q9	Flexibility for Specialty, Service-Line & Multi-Program Deployment	ANDOR HEALTH	1
Q10	Home-Based Care, RPM & Continuity of Care Support	ANDOR HEALTH	1
Q11	Analytics, Command Center Visibility & ROI Measurement	HELLOCARE	3
Q12	Implementation, Training & Change Management	CAREGILITY	2
Q13	Quality of Customer Support & Strategic Partnership	ANDOR HEALTH	1
Q14	Cybersecurity, Privacy & Governance	CAREGILITY	2
Q15	Transparency & Explainability of AI-Assisted Workflows	ANDOR HEALTH	1
Q16	Innovation Roadmap & Pace of Product Improvement	ANDOR HEALTH	1
Q17	Overall Strategic Value as an Enterprise Platform	ANDOR HEALTH	1
Q18	Confidence in Vendor's Long-Term Performance	ANDOR HEALTH	1

ANDOR HEALTH IN THE 2026 VIRTUAL CARE MARKET: ACHIEVEMENTS AND INNOVATION THEMES

Andor Health is included in this report as an example of how the virtual care market has shifted beyond point telehealth toward enterprise orchestration, multimodal clinical collaboration, and workflow-layer AI. The company's relevance in the 2026 field is tied less to a single use case and more to the way buyers now reward platforms that connect rooms, clinicians, command centers, and patients through a unified operating framework.

REPRESENTATIVE ACHIEVEMENTS IN THE 2025–2026 MARKET CYCLE

- Maintained visibility in external category recognition and market-performance discussions.
- Expanded channel and contracting momentum, increasing availability in enterprise buying conversations.
- Continued product positioning around multimodal AI, workflow orchestration, and acute-care virtual collaboration.
- Demonstrated relevance across inpatient, command-center, and cross-continuum virtual care models.

INNOVATION THEMES ASSOCIATED WITH THE PLATFORM

- EHR-aware clinical collaboration supporting consults, escalations, and context-rich communication.
- Multimodal virtual care workflows that connect room, patient, and care-team interactions in one platform layer.
- AI-enabled workflow assistance aimed at reducing coordination burden, not simply adding new screens.
- Configurable deployment for virtual nursing, inpatient support, ambulatory extension, and distributed-care operations.

From a market-analysis perspective, Andor Health illustrates the category-wide convergence of virtual care, clinical collaboration, and operational AI. Its position in the 2026 field is therefore important not only for ranking purposes but also for understanding where enterprise buyer expectations are heading across the broader platform landscape.

OVERALL TOP PERFORMING VENDORS, 2026
OVERVIEW OF CAPABILITIES IN VIRTUAL
CARE PLATFORMS

01	**Andor Health**

Configurable clinical collaboration and virtual care orchestration platform with growing emphasis on AI-enabled workflow support.

08	**AvaSure**

Integrated virtual care platform centered on virtual nursing, observation, consults, workforce optimization, and real-time analytics.

02	**Caregility**

Enterprise virtual care platform focused on inpatient, bedside, and cross-continuum virtual workflows with strong acute-care adoption.

09	**hellocare.ai**

Turnkey software, hardware, and AI platform built to virtualize hospital rooms and extend care into home and primary care settings.

03	**Amwell**

Scaled digital care platform spanning access, provider routing, program management, and broad virtual care operations.

10	**Current Health**

Clinical operating model for care at home and advanced remote management supporting complex care outside traditional sites.

04	**eVisit**

EHR-integrated telehealth platform oriented toward health system scale, throughput, and multi-program virtual deployment.

11	**Fabric**

Hybrid access and virtual care suite combining digital front door capabilities, clinical intelligence, and synchronous/asynchronous care.

05	**Teladoc Health**

Broad virtual care vendor supporting urgent, specialty, chronic, and behavioral use cases across diversified care models.

12	**Innovaccer**

Data-led digital health and virtual care management platform helping providers coordinate outreach, access, and population-level workflows.

06	**TigerConnect**

Clinical collaboration and workflow platform that strengthens virtual consult coordination, escalation, and communication reliability.

13	**Philips Virtual Care Management**

Enterprise telehealth and population management environment with strong acute-care and telehealth center foundations.

07	**Artisight**

Ambient intelligence and smart-hospital platform supporting virtual nursing, room intelligence, and productivity-focused virtual workflows.

14	**care.ai**

Ambiently aware smart care facility platform built around AI-assisted virtual workflows and intelligent patient room capabilities.

| 15 | Biofourmis | | 18 | Xealth |

Connected care and remote management platform designed for high-acuity, post-acute, and chronic virtual care delivery.

Digital care orchestration and integration layer that helps health systems order, deploy, and monitor digital health services from the EHR.

| 16 | Mend | | 19 | Wheel |

Telehealth and patient engagement platform with notable traction in behavioral health and ambulatory scheduling/adoption workflows.

Virtual care infrastructure platform combining technology, services, and data tools to launch scaled programs quickly.

| 17 | doxy.me | | 20 | swyMed |

Purpose-built telemedicine video platform favored for ease of use and rapid deployment in ambulatory and specialty environments.

Telemedicine platform optimized for mobile, transport, and low-bandwidth environments with specialty and field-based use cases.

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INDIVIDUAL VIRTUAL CARE PLATFORM VENDOR KEY PERFORMANCE

RAW / AGGREGATE IT SATISFACTION SCORES 2026: ENTERPRISE VIRTUAL CARE PLATFORMS

Rank	Vendor	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12	Q13	Q14	Q15	Q16	Q17	Q18	Mean
1	ANDOR HEALTH	9.84	9.77	9.80	9.71	9.91	9.81	9.56	9.70	9.81	9.80	9.56	9.61	9.90	9.56	9.83	9.74	9.76	9.76	9.75
2	CAREGILITY	9.51	9.38	8.71	9.06	9.38	9.49	9.26	9.16	9.51	9.20	8.48	9.71	9.40	9.67	9.64	9.40	9.64	8.78	9.30
3	HELLOCARE	9.71	9.29	9.52	9.51	9.44	9.13	9.59	9.29	9.73	9.33	9.64	9.15	9.16	9.33	8.47	8.39	8.91	9.17	9.26
4	EVISIT	9.34	8.84	8.98	8.68	9.71	7.21	8.66	8.61	9.47	8.63	9.57	7.98	9.15	8.69	9.19	8.76	8.44	8.11	8.78
5	FABRIC HEALTH	9.46	9.52	9.68	9.03	8.79	6.04	8.72	9.67	9.26	8.79	8.47	8.66	8.32	5.67	8.63	9.18	9.17	9.16	8.68
6	AMWELL	8.93	9.24	7.07	7.88	9.56	8.92	8.84	8.57	8.87	7.95	8.96	9.28	8.21	9.13	8.78	9.09	8.03	7.05	8.58
7	VSEE	8.99	9.05	9.59	9.34	8.24	6.21	6.29	9.34	8.98	9.36	8.00	8.87	8.67	7.81	8.50	6.97	9.26	8.77	8.64
8	ARTISIGHT	8.96	9.15	8.85	8.71	9.60	9.29	6.88	8.10	7.28	9.04	9.24	8.51	9.10	8.05	9.47	8.99	7.55	8.00	8.64
9	AMPLIFYMD	8.04	8.63	9.14	9.53	8.89	6.31	8.99	8.48	9.29	9.29	9.26	8.99	8.03	8.18	7.84	8.17	8.04	8.34	8.56
10	TELADOC	8.92	7.69	9.15	7.36	9.31	7.35	8.63	7.94	9.74	7.11	9.17	8.09	8.98	8.26	8.63	9.06	7.13	8.43	8.39
11	GLOBALMED	7.13	8.37	8.71	7.66	8.10	6.88	7.38	8.72	7.41	7.00	8.90	8.84	9.11	8.91	7.26	9.34	8.19	8.14	8.11
12	LOOK DEEP HEALTH	9.24	7.48	9.13	8.20	9.61	7.26	5.91	7.38	6.44	9.25	8.26	7.43	8.62	6.34	9.27	8.73	6.43	8.29	7.96
13	CURRENT HEALTH	8.77	8.33	7.14	8.79	8.14	7.85	6.21	8.24	9.13	7.23	8.60	7.81	8.39	8.72	8.55	7.81	6.71	6.50	7.94
14	VALIDIC	7.49	7.23	6.65	7.81	7.05	9.27	6.35	6.80	9.41	5.72	8.33	7.18	9.38	7.36	8.87	9.56	6.50	6.94	7.66
15	VITAL TECH	6.53	8.20	9.09	7.03	7.53	5.51	7.94	8.70	6.15	6.88	6.88	8.45	7.84	9.21	7.82	7.49	6.87	6.93	7.50
16	HEALTH RECOVER SOL	6.00	7.84	7.91	8.37	7.97	7.21	5.55	7.55	5.21	6.79	8.32	8.10	6.22	8.64	7.01	8.23	8.88	7.76	7.42
17	DATOS HEALTH	7.15	7.03	8.43	8.05	7.14	7.47	7.89	8.59	9.45	6.63	7.06	8.09	6.71	5.72	7.22	8.84	5.88	6.00	7.41
18	NESA	6.75	8.23	7.96	6.86	7.65	8.21	6.62	6.12	8.37	4.85	7.30	6.38	6.76	8.11	7.74	5.98	6.33	7.74	7.11
19	AVASURE	5.70	8.46	6.39	7.22	5.46	6.88	5.22	6.20	6.02	5.75	7.67	5.77	7.17	9.00	7.14	6.01	7.14	5.40	6.59
20	CARE HARMONY	6.81	7.00	5.92	5.74	6.17	8.97	8.40	6.89	5.29	6.40	6.34	5.05	5.47	8.37	8.61	5.63	5.82	5.77	6.59

01 CLINICAL WORKFLOW INTEGRATION & IN-ENCOUNTER USABILITY

Assess whether the platform fits naturally into clinician workflows and reduces swivel-chair navigation during virtual encounters, consults, and escalations. Review how much in-workflow context, role-based access, and documentation support are available at the point of care. How to assess: review client reports on adoption, operational consistency, measurable workflow changes, and the vendor's ability to sustain the use case under real production load.

Overall Rank	Q Criteria Rank	Virtual Care Platform Vendor	Hospitals	Health Systems	Ambulatory & Specialty	Post-Acute, Behavioral & Home-Based	Mean
1	1	ANDOR HEALTH	9.87	9.96	9.92	9.60	9.84
3	2	HELLOCARE	9.66	9.82	9.54	9.82	9.71
2	3	CAREGILITY	9.76	9.50	9.25	9.52	9.51
5	4	FABRIC HEALTH	9.35	9.80	9.45	9.22	9.46
4	5	EVISIT	9.45	9.14	9.27	9.50	9.34
12	6	LOOK DEEP HEALTH	8.92	9.22	9.32	9.50	9.24
7	7	VSEE	9.43	8.84	8.87	8.81	8.99
8	8	ARTISIGHT	9.68	8.50	8.62	9.04	8.96
6	9	AMWELL	9.45	8.74	8.50	9.03	8.93
10	10	TELADOC	9.09	9.54	8.01	9.03	8.92

02 ENTERPRISE VIRTUAL CARE SCALABILITY ACROSS CARE SETTINGS

Determine how effectively the platform supports repeatable deployment across inpatient, outpatient, home-based, post-acute, and behavioral workflows without requiring separate products for each use case. How to assess: review client reports on adoption, operational consistency, measurable workflow changes, and the vendor's ability to sustain the use case under real production load.

Overall Rank	Q Criteria Rank	Virtual Care Platform Vendor	Hospitals	Health Systems	Ambulatory & Specialty	Post-Acute, Behavioral & Home-Based	Mean
1	1	ANDOR HEALTH	9.78	9.78	9.72	9.79	9.77
5	2	FABRIC HEALTH	9.49	9.67	9.62	9.31	9.52
2	3	CAREGILITY	9.26	9.45	9.33	9.48	9.38
3	4	HELLOCARE	8.99	9.11	9.72	9.37	9.29
6	5	AMWELL	8.93	9.12	9.78	9.09	9.24
8	6	ARTISIGHT	8.84	9.08	9.49	9.20	9.15
7	7	VSEE	8.91	9.32	9.18	8.80	9.05
4	8	EVISIT	8.70	8.83	8.92	8.89	8.84
9	9	AMPLIFYMD	8.79	9.48	8.06	8.19	8.63
19	10	AVASURE	8.68	7.48	9.10	8.59	8.46

03 CARE TEAM COLLABORATION & ESCALATION SUPPORT

Determine how effectively the platform supports repeatable deployment across inpatient, outpatient, home-based, post-acute, and behavioral workflows without requiring separate products for each use case. How to assess: review client reports on adoption, operational consistency, measurable workflow changes, and the vendor's ability to sustain the use case under real production load.

Overall Rank	Q Criteria Rank	Virtual Care Platform Vendor	Hospitals	Health Systems	Ambulatory & Specialty	Post-Acute, Behavioral & Home-Based	Mean
1	1	ANDOR HEALTH	9.72	9.60	9.90	9.97	9.80
5	2	FABRIC HEALTH	9.75	9.66	9.80	9.49	9.68
7	3	VSEE	9.45	9.75	9.51	9.66	9.59
3	4	HELLOCARE	9.33	9.43	9.75	9.55	9.52
10	5	TELADOC	9.50	8.75	9.08	9.27	9.15
9	6	AMPLIFYMD	9.29	9.31	8.65	9.30	9.14
12	7	LOOK DEEP HEALTH	9.38	9.36	8.79	8.98	9.13
15	8	VITAL TECH	9.60	8.60	9.10	9.07	9.09
4	9	EVISIT	9.22	9.12	9.22	8.37	8.98
8	10	ARTISIGHT	8.66	9.26	8.69	8.77	8.85

04 VIRTUAL NURSING, SITTING & REMOTE OBSERVATION WORKFLOW ENABLEMENT

Measure how well the platform supports virtual nursing, patient safety observation, rounding, discharge education, and related bedside extension workflows in a sustainable operating model. How to assess: review client reports on adoption, operational consistency, measurable workflow changes, and the vendor's ability to sustain the use case under real production load.

Overall Rank	Q Criteria Rank	Virtual Care Platform Vendor	Hospitals	Health Systems	Ambulatory & Specialty	Post-Acute, Behavioral & Home-Based	Mean
1	1	ANDOR HEALTH	9.81	9.77	9.63	9.61	9.71
9	2	AMPLIFYMD	9.03	9.72	9.66	9.71	9.53
3	3	HELLOCARE	9.54	9.57	9.52	9.41	9.51
7	4	VSEE	9.68	9.44	9.11	9.12	9.34
2	5	CAREGILITY	9.33	8.44	8.89	9.56	9.06
5	6	FABRIC HEALTH	9.04	8.87	9.03	9.18	9.03
13	7	CURRENT HEALTH	8.95	8.87	8.32	9.00	8.79
8	8	ARTISIGHT	9.13	8.96	8.35	8.40	8.71
4	9	EVISIT	8.25	9.37	8.55	8.53	8.68
17	10	DATOS HEALTH	8.47	8.30	8.69	8.32	8.45

05 RELIABILITY OF VIDEO, AUDIO & SESSION MANAGEMENT

Assess session stability, call quality, recovery from interruptions, device compatibility, and the vendor's ability to support always-on or high-frequency virtual interactions at scale. How to assess: review client reports on adoption, operational consistency, measurable workflow changes, and the vendor's ability to sustain the use case under real production load.

Overall Rank	Q Criteria Rank	Virtual Care Platform Vendor	Hospitals	Health Systems	Ambulatory & Specialty	Post-Acute, Behavioral & Home-Based	Mean
1	1	ANDOR HEALTH	9.98	9.95	9.79	9.90	9.91
4	2	EVISIT	9.74	9.59	9.68	9.83	9.71
12	3	LOOK DEEP HEALTH	9.51	9.86	9.69	9.37	9.61
8	4	ARTISIGHT	9.42	9.74	9.50	9.72	9.60
6	5	AMWELL	9.14	9.64	9.58	9.83	9.56
3	6	HELLOCARE	9.10	9.67	9.83	9.16	9.44
2	7	CAREGILITY	9.23	9.40	9.17	9.70	9.38
10	8	TELADOC	8.94	9.32	9.43	9.56	9.31
9	9	AMPLIFYMD	8.80	9.04	8.88	8.84	8.89
5	10	FABRIC HEALTH	8.93	8.84	8.88	8.51	8.79

06 INTEROPERABILITY WITH EHRS, IDENTITY, DEVICES & CONTEXT SHARING

Review the depth of integration with the EHR, scheduling, nurse call, identity systems, peripheral devices, and operational data sources so users can act with shared context instead of siloed views. How to assess: review client reports on adoption, operational consistency, measurable workflow changes, and the vendor's ability to sustain the use case under real production load.

Overall Rank	Q Criteria Rank	Virtual Care Platform Vendor	Hospitals	Health Systems	Ambulatory & Specialty	Post-Acute, Behavioral & Home-Based	Mean
1	1	ANDOR HEALTH	9.82	9.97	9.88	9.69	9.81
2	2	CAREGILITY	9.32	9.49	9.33	9.62	9.49
8	3	ARTISIGHT	9.27	8.83	9.49	9.75	9.29
14	4	VALIDIC	8.92	9.50	9.62	9.27	9.27
3	5	HELLOCARE	9.15	9.51	9.22	9.24	9.13
20	6	CARE HARMONY	9.05	8.67	9.59	9.38	8.97
6	7	AMWELL	9.32	8.95	8.87	9.30	8.92
4	8	EVISIT	8.83	8.88	9.16	9.28	8.51
10	9	TELADOC	8.57	8.49	8.64	8.79	8.35
18	10	NESA	8.63	8.43	9.11	7.90	8.21

07 PATIENT ACCESS, INTAKE, SCHEDULING & DIGITAL FRONT DOOR EXPERIENCE

Determine how easily patients can find, schedule, join, and complete virtual care pathways with limited friction and how well the solution supports enterprise access goals. How to assess: review client reports on adoption, operational consistency, measurable workflow changes, and the vendor's ability to sustain the use case under real production load.

Overall Rank	Q Criteria Rank	Virtual Care Platform Vendor	Hospitals	Health Systems	Ambulatory & Specialty	Post-Acute, Behavioral & Home-Based	Mean
3	1	HELLOCARE	9.85	9.77	9.89	9.63	9.59
1	2	ANDOR HEALTH	9.73	9.54	9.55	9.41	9.56
2	3	CAREGILITY	8.98	9.31	9.29	9.44	9.26
9	4	TELADOC	8.42	8.88	9.19	9.47	8.99
6	5	VSEE	9.09	9.11	8.18	8.99	8.84
5	6	EEEE	9.08	8.15	9.11	8.54	8.72
4	7	EVISIT	8.27	9.33	8.89	8.15	8.66
10	8	GLOBALMED	8.31	8.35	9.07	8.77	8.63
18	9	AVASURE	8.22	8.19	9.39	8.68	8.62
20	10	CARE HARMONY	8.28	8.29	8.56	8.55	8.42

08 AI-ASSISTED AUTOMATION, AMBIENT INTELLIGENCE & WORKFLOW ORCHESTRATION

Evaluate the usefulness of automation for routing, summarization, monitoring, ambient capture, queue management, and other operational tasks that reduce team burden without creating black-box risk. How to assess: review client reports on adoption, operational consistency, measurable workflow changes, and the vendor's ability to sustain the use case under real production load.

Overall Rank	Q Criteria Rank	Virtual Care Platform Vendor	Hospitals	Health Systems	Ambulatory & Specialty	Post-Acute, Behavioral & Home-Based	Mean
1	1	ANDOR HEALTH	9.72	9.54	9.74	9.79	9.70
5	2	FABRIC HEALTH	9.62	9.56	9.70	9.81	9.67
7	3	VSEE	9.39	8.75	9.56	9.64	9.34
3	4	HELLOCARE	9.67	9.07	9.46	8.96	9.29
2	5	CAREGILITY	9.12	8.76	9.28	9.48	9.16
11	6	GLOBALMED	8.52	8.92	8.25	9.16	8.72
15	7	VITAL TECH	8.43	8.54	8.90	8.92	8.70
4	8	EVISIT	8.60	9.08	8.17	8.59	8.61
17	9	DATOS HEALTH	8.89	8.15	9.04	8.26	8.59
6	10	AMWELL	8.36	7.58	9.04	9.31	8.57

09 — FLEXIBILITY FOR SPECIALTY, SERVICE-LINE & MULTI-PROGRAM DEPLOYMENT

Assess whether the vendor can support different clinical service lines, specialty requirements, and deployment models without extensive custom code or parallel workflows. How to assess: review client reports on adoption, operational consistency, measurable workflow changes, and the vendor's ability to sustain the use case under real production load.

Overall Rank	Q Criteria Rank	Virtual Care Platform Vendor	Hospitals	Health Systems	Ambulatory & Specialty	Post-Acute, Behavioral & Home-Based	Mean
1	1	ANDOR HEALTH	9.90	9.78	9.97	9.59	9.81
10	2	TELADOC	9.52	9.76	9.79	9.88	9.74
3	3	HELLOCARE	9.87	9.52	9.88	9.66	9.73
2	4	CAREGILITY	9.61	10.00	8.98	9.43	9.51
4	5	EVISIT	9.53	9.16	9.97	9.22	9.47
17	6	DATOS HEALTH	9.78	9.34	9.45	9.21	9.45
14	7	VALIDIC	9.52	9.36	9.95	8.79	9.41
9	8	AMPLIFYMD	9.10	10.02	8.98	9.04	9.29
5	9	FABRIC HEALTH	8.87	9.46	9.63	9.08	9.26
13	10	CURRENT HEALTH	8.56	9.51	9.25	9.19	9.13

10 — HOME-BASED CARE, RPM & CONTINUITY OF CARE SUPPORT

Measure how effectively the platform extends virtual care into the home and community with remote monitoring, escalation logic, and continuity across transitions of care. How to assess: review client reports on adoption, operational consistency, measurable workflow changes, and the vendor's ability to sustain the use case under real production load.

Overall Rank	Q Criteria Rank	Virtual Care Platform Vendor	Hospitals	Health Systems	Ambulatory & Specialty	Post-Acute, Behavioral & Home-Based	Mean
1	1	ANDOR HEALTH	9.93	9.59	9.88	9.78	9.80
7	2	VSEE	9.23	9.38	9.38	9.45	9.36
3	3	HELLOCARE	8.78	9.79	9.34	9.39	9.33
9	4	AMPLIFYMD	9.16	9.60	8.70	9.69	9.29
12	5	LOOK DEEP HEALTH	9.33	8.89	9.53	9.25	9.25
2	6	CAREGILITY	8.63	9.55	9.70	8.92	9.20
8	7	ARTISIGHT	8.92	9.24	8.90	9.09	9.04
5	8	FABRIC HEALTH	8.53	9.05	9.10	8.47	8.79
4	9	EVISIT	8.37	8.83	8.99	8.32	8.63
6	10	AMWELL	7.98	8.04	8.10	7.67	7.95

11 ANALYTICS, COMMAND CENTER VISIBILITY & ROI MEASUREMENT

Review the clarity and usefulness of dashboards, utilization reporting, quality measures, staffing indicators, and financial analytics used to justify and optimize virtual care programs. How to assess: review client reports on adoption, operational consistency, measurable workflow changes, and the vendor's ability to sustain the use case under real production load.

Overall Rank	Q Criteria Rank	Virtual Care Platform Vendor	Hospitals	Health Systems	Ambulatory & Specialty	Post-Acute, Behavioral & Home-Based	Mean
3	1	HELLOCARE	9.48	9.89	9.37	9.82	9.64
4	2	EVISIT	9.43	9.70	9.72	9.44	9.57
1	3	ANDOR HEALTH	9.31	9.36	9.85	9.71	9.56
9	4	AMPLIFYMD	9.54	9.52	8.72	9.27	9.26
8	5	ARTISIGHT	9.42	9.27	9.25	8.98	9.24
10	6	TELADOC	9.36	9.23	9.04	9.06	9.17
6	7	AMWELL	9.04	9.19	8.33	9.26	8.96
11	8	GLOBALMED	8.98	8.91	8.70	8.98	8.90
2	9	CAREGILITY	8.17	8.26	7.90	9.59	8.48
19	10	AVASURE	9.01	8.87	7.69	7.10	7.67

12 IMPLEMENTATION, TRAINING & CHANGE MANAGEMENT

Evaluate the vendor's ability to onboard programs, train clinicians, standardize adoption, and support operational redesign rather than limiting engagement to technical go-live. How to assess: review client reports on adoption, operational consistency, measurable workflow changes, and the vendor's ability to sustain the use case under real production load.

Overall Rank	Q Criteria Rank	Virtual Care Platform Vendor	Hospitals	Health Systems	Ambulatory & Specialty	Post-Acute, Behavioral & Home-Based	Mean
2	1	CAREGILITY	9.78	9.74	9.55	9.76	9.71
1	2	ANDOR HEALTH	9.50	9.64	9.81	9.49	9.61
6	3	AMWELL	9.59	8.72	9.67	9.11	9.28
3	4	HELLOCARE	9.17	8.74	9.62	9.07	9.15
9	5	AMPLIFYMD	8.88	8.68	9.22	9.17	8.99
7	6	VSEE	8.87	9.49	8.74	8.37	8.87
11	7	GLOBALMED	9.16	8.71	9.06	8.42	8.84
5	8	FABRIC HEALTH	8.99	8.52	8.18	8.94	8.66
8	9	ARTISIGHT	8.91	7.41	8.96	8.77	8.51
15	10	VITAL TECH	8.83	9.08	7.88	7.99	8.45

13 QUALITY OF CUSTOMER SUPPORT & STRATEGIC PARTNERSHIP

Assess responsiveness, executive engagement, product accountability, and the vendor's willingness to address evolving operational needs after implementation. How to assess: review client reports on adoption, operational consistency, measurable workflow changes, and the vendor's ability to sustain the use case under real production load.

Overall Rank	Q Criteria Rank	Virtual Care Platform Vendor	Hospitals	Health Systems	Ambulatory & Specialty	Post-Acute, Behavioral & Home-Based	Mean
1	1	ANDOR HEALTH	9.98	10.00	9.86	9.79	9.90
2	2	CAREGILITY	9.51	9.25	9.66	9.18	9.40
14	3	VALIDIC	9.23	9.36	9.53	9.38	9.38
3	4	HELLOCARE	9.17	8.98	9.27	9.20	9.16
4	5	EVISIT	8.82	9.05	9.67	9.06	9.15
11	6	GLOBALMED	9.12	8.92	9.06	9.32	9.11
8	7	ARTISIGHT	9.16	9.00	8.76	9.46	9.10
10	8	TELADOC	8.85	8.65	9.55	8.85	8.98
7	9	VSEE	8.94	8.23	8.60	8.92	8.67
12	10	LOOK DEEP HEALTH	8.88	8.77	7.93	8.88	8.62

14 CYBERSECURITY, PRIVACY & GOVERNANCE

Determine whether the vendor demonstrates strong controls for privacy, secure communications, access management, data protection, and governance for enterprise virtual care use. How to assess: review client reports on adoption, operational consistency, measurable workflow changes, and the vendor's ability to sustain the use case under real production load.

Overall Rank	Q Criteria Rank	Virtual Care Platform Vendor	Hospitals	Health Systems	Ambulatory & Specialty	Post-Acute, Behavioral & Home-Based	Mean
2	1	CAREGILITY	9.55	9.77	9.56	9.80	9.67
1	2	ANDOR HEALTH	9.61	8.96	9.69	9.98	9.56
3	3	HELLOCARE	9.40	9.17	9.41	9.34	9.33
15	4	VITAL TECH	8.89	9.50	9.19	9.27	9.21
6	5	AMWELL	8.84	9.14	9.29	9.25	9.13
19	6	AVASURE	8.96	9.11	9.08	8.84	9.00
11	7	GLOBALMED	8.92	8.87	8.82	9.02	8.91
13	8	CURRENT HEALTH	8.67	9.01	7.97	9.23	8.72
4	9	EVISIT	9.13	8.82	8.18	8.62	8.69
16	10	HEALTH RECOVER SOL	8.87	8.78	7.87	9.04	8.64

15 TRANSPARENCY & EXPLAINABILITY OF AI-ASSISTED WORKFLOWS

Review whether automated recommendations, prioritization, summarization, and AI-supported decisions are transparent enough for clinical and operational oversight. How to assess: review client reports on adoption, operational consistency, measurable workflow changes, and the vendor's ability to sustain the use case under real production load.

Overall Rank	Q Criteria Rank	Virtual Care Platform Vendor	Hospitals	Health Systems	Ambulatory & Specialty	Post-Acute, Behavioral & Home-Based	Mean
1	1	ANDOR HEALTH	9.87	9.77	9.84	9.85	9.83
2	2	CAREGILITY	9.62	9.33	9.68	9.52	9.54
8	3	ARTISIGHT	9.54	9.27	9.53	9.52	9.47
12	4	LOOK DEEP HEALTH	9.32	8.87	9.39	9.49	9.27
4	5	EVISIT	9.02	9.39	9.35	8.98	9.19
14	6	VALIDIC	9.17	9.37	9.03	7.90	8.87
6	7	AMWELL	9.22	8.97	8.18	8.76	8.78
10	8	TELADOC	8.96	8.76	8.08	8.72	8.63
5	9	FABRIC HEALTH	8.36	7.92	9.07	9.18	8.63
20	10	CARESIGNAL	8.68	8.82	8.22	8.71	8.61

16 INNOVATION ROADMAP & PACE OF PRODUCT IMPROVEMENT

Assess how consistently the vendor delivers meaningful enhancements tied to real customer use cases, especially around virtual nursing, ambient workflows, and care-team productivity. How to assess: review client reports on adoption, operational consistency, measurable workflow changes, and the vendor's ability to sustain the use case under real production load.

Overall Rank	Q Criteria Rank	Virtual Care Platform Vendor	Hospitals	Health Systems	Ambulatory & Specialty	Post-Acute, Behavioral & Home-Based	Mean
1	1	ANDOR HEALTH	9.93	9.84	9.62	9.57	9.74
14	2	VALIDIC	9.55	9.69	9.64	9.34	9.56
2	3	CAREGILITY	9.37	9.21	9.34	9.68	9.40
11	4	GLOBALMED	9.48	9.33	9.43	9.10	9.34
5	5	FABRIC HEALTH	9.32	9.28	9.19	8.91	9.18
6	6	AMWELL	8.84	9.19	8.96	9.35	9.09
10	7	TELADOC	9.22	8.73	9.01	9.29	9.06
8	8	ARTISIGHT	8.88	9.28	9.23	8.57	8.99
17	9	DATOS HEALTH	8.32	8.76	9.28	9.00	8.84
3	10	HELLOCARE	8.09	8.69	8.64	8.12	8.39

17 OVERALL STRATEGIC VALUE AS AN ENTERPRISE PLATFORM

Measure the client's view of whether the platform has become a durable enterprise capability rather than a temporary telehealth tool or fragmented point solution. How to assess: review client reports on adoption, operational consistency, measurable workflow changes, and the vendor's ability to sustain the use case under real production load.

Overall Rank	Q Criteria Rank	Virtual Care Platform Vendor	Hospitals	Health Systems	Ambulatory & Specialty	Post-Acute, Behavioral & Home-Based	Mean
1	1	ANDOR HEALTH	9.81	9.74	9.71	9.78	9.76
2	2	CAREGILITY	9.65	9.62	9.66	9.64	9.64
7	3	VSEE	8.93	9.26	9.59	9.25	9.26
5	4	FABRIC HEALTH	9.27	8.97	9.37	9.07	9.17
3	5	HELLOCARE	8.85	9.16	8.83	8.81	8.91
16	6	HEALTH RECOVER SOL	9.02	8.67	8.83	8.99	8.88
4	7	EVISIT	8.94	8.23	8.41	8.14	8.44
11	8	GLOBALMED	8.21	7.93	8.65	7.97	8.19
9	9	AMPLIFYMD	8.96	7.01	8.76	7.43	8.04
6	10	AMWELL	7.77	8.26	7.40	8.67	8.03

18 CONFIDENCE IN VENDOR'S LONG-TERM PERFORMANCE

Assess whether clients view the vendor as a trusted long-term partner with the scale, roadmap, and execution discipline to remain relevant as virtual care operating models mature. How to assess: review client reports on adoption, operational consistency, measurable workflow changes, and the vendor's ability to sustain the use case under real production load.

Overall Rank	Q Criteria Rank	Virtual Care Platform Vendor	Hospitals	Health Systems	Ambulatory & Specialty	Post-Acute, Behavioral & Home-Based	Mean
1	1	ANDOR HEALTH	9.70	9.94	9.68	9.71	9.76
3	2	HELLOCARE	9.00	9.30	9.05	9.34	9.17
5	3	FABRIC HEALTH	9.06	9.18	9.28	9.11	9.16
2	4	CAREGILITY	8.81	8.01	9.23	9.07	8.78
7	5	VSEE	8.59	8.84	8.76	8.88	8.77
10	6	TELADOC	8.74	7.91	9.18	7.90	8.43
9	7	AMPLIFYMD	8.43	7.58	8.55	8.79	8.34
12	8	LOOK DEEP HEALTH	8.50	8.00	8.60	8.05	8.29
11	9	GLOBALMED	8.67	8.20	7.46	8.24	8.14
4	10	EVISIT	7.71	7.40	8.74	8.60	8.11

09

APPENDIX

BLACK BOOK MARKET RESEARCH
SURVEYS & IT USER POLLING

We aim for the data and analysis in this report to support well-informed strategic decisions regarding enterprise virtual care platforms. If additional cross-tabs, segment cuts, or vendor-level detail are required for the final release package, the research team can provide supplementary research and category-specific comparisons.

DISCLAIMER

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