

Welcome



Practice and Policy to Advance Health Literacy
and Health Equity

October 14-15, 2021

Telehealth: Friend or Foe to Health Access?



Practice and Policy to Advance Health Literacy and Health Equity

Arjoon – Patient Advocate

Telehealth

In Mental Health

Challenges and Barriers

- Communication
- Technology
- Lack of knowledge of programs and terms



Success in Telehealth

- Practice what was done in person
- Accessibility of resources and programs
- Consumer benefits



Suggestions to make telehealth accessible and usable

- What tech needs do consumers have?
- Invest on professionals' and consumers' development
- Provide easier access to services online



Contact Information

Patty Herrera

Family Support Advocate/Case Manager

La Habra Family Resource Center

(714)447-3460

pherrera@frclahabra.org



University of California
San Francisco

Can telehealth improve access?

Elaine Khoong, MD MS
UCSF Assistant Professor
[@elainekhoong](#)

Health Literacy in Action Conference
October 14 2021

Disclosures

- None

Real-time

“Synchronous”

Store and Forward

“Asynchronous”

Visits

(Provider to Patient)

Virtual Visits



*Real-time video interaction
between MD and patient*

Follow up visits to patient in a home or
outpatient office

eVisits



*Online exchange of medical information
between MD & patient*

A tool generally used for chronic care
management and medication adjustments

Consults

(Provider to Provider)

Virtual Consults



*Real-time interaction between
MD to patient's MD*

New or follow up consult for a patient located in a
facility (ED, ICU, post-acute care)

eConsults & Second Opinions



*eConsults: Online
exchange of medical
information
between MDs*

Lower complexity
medical opinion

*Second Opinions: Online
exchange of medical
information between
MDs*

High complexity medical
opinion with extensive
record review



Growing patient preference ensures ...
healio.com



Patient experience is evolving as ...
healthcareitnews.com



Patient Ed and Telehealth Opportunities ...
healthwise.org



Delivering more care remotely will be ...
aamc.org



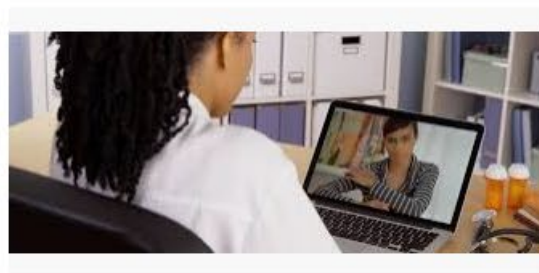
A Patient's Guide to Telemedicine: What ...
himss.org



20 takeaways from Health Affairs ...
mobihealthnews.com



How Telehealth Impacts Patient Care
arcare.net



Telehealth as home healthcare ...
athenahealth.com



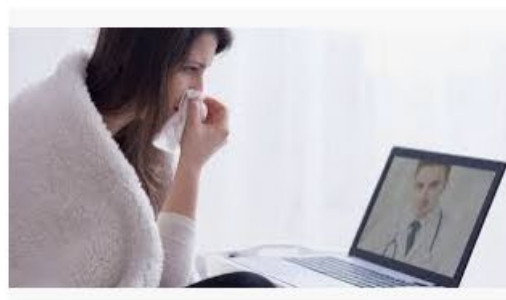
82% of consumers do not use telehealth ...
medcitynews.com



Coronavirus fuels explosive growth in ...
gcn.com



Industry Voices—When the COVID-...
fiercehealthcare.com



Telemedicine and Telehealth in 2019 ...
solvhealth.com



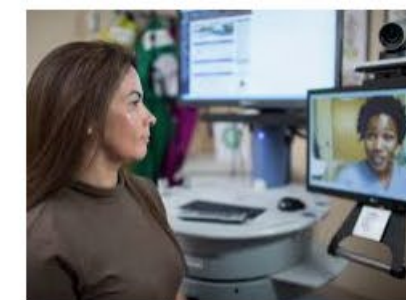
Patients overwhelm telehealth services ...
statnews.com



From telehealth visits to digital ...
fiercehealthcare.com



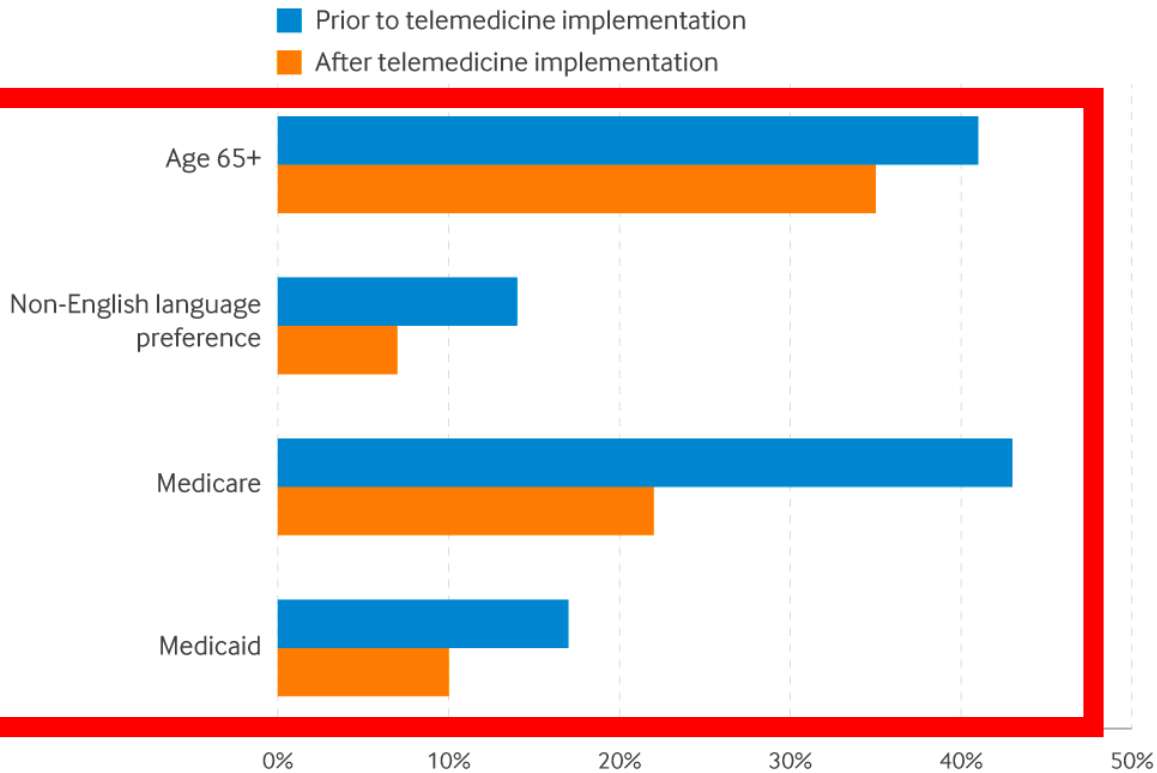
Telemedicine benefits, disadvantages ...
medicalnewstoday.com



What Is Telehealth? | Telehealth VA
telehealth.va.gov

Patient Visits by Age, Language, and Insurance Before and After Telemedicine Scale-Up

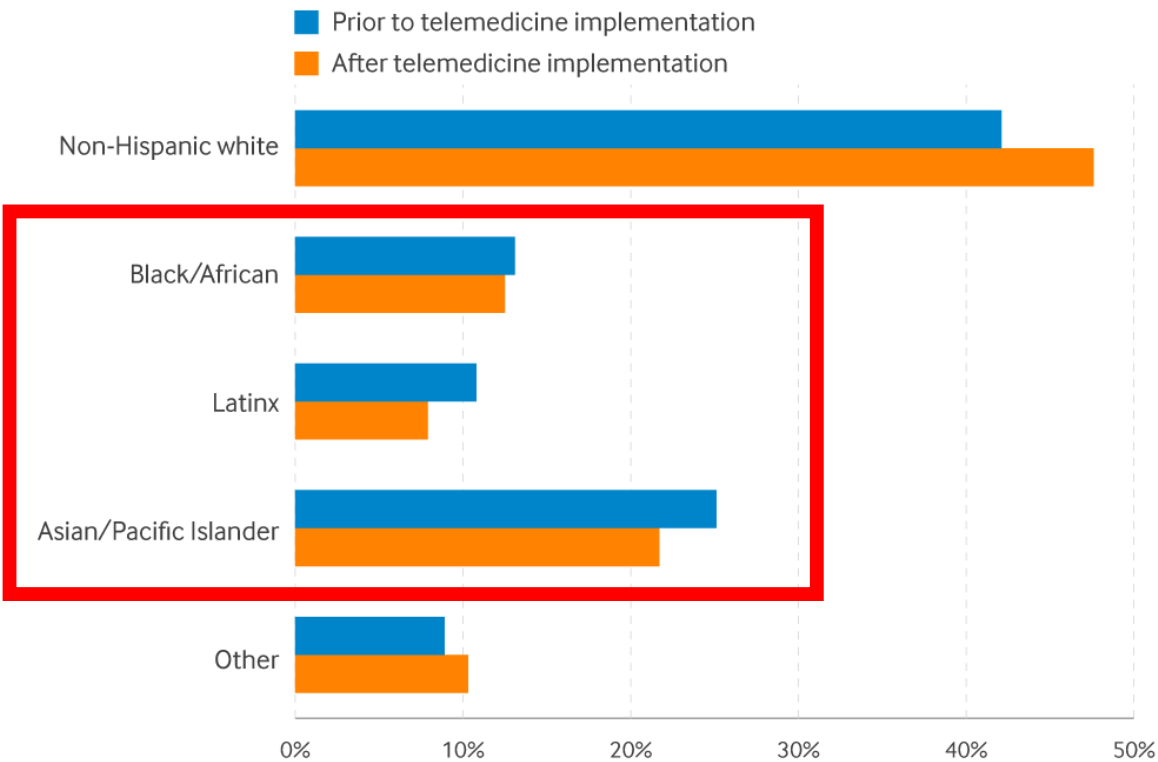
This chart shows the proportion of patient visits seen by age, language preference, and insurance type prior to (2/17–2/28/2020) and after (3/23–4/3/2020) scaled-up telemedicine implementation to address the Covid-19 pandemic at the UCSF General Internal Medicine Primary Care Practice (P=0.002 for age ≥65 and P<0.001 for other comparisons). A significantly smaller proportion of visits after scaled-up telemedicine implementation were with vulnerable patients.



Source: The authors
NEJM Catalyst (catalyst.nejm.org) © Massachusetts Medical Society

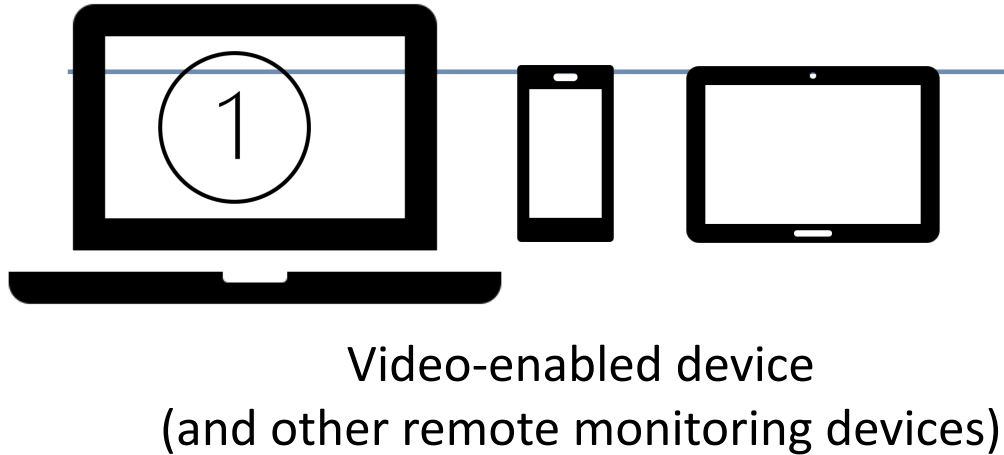
Patient Visits by Race/Ethnicity Before and After Telemedicine Scale-Up

This chart shows the proportion of patient visits seen by patient race/ethnicity prior to (2/17–2/28/2020) and after (3/23–4/3/2020) scaled-up telemedicine implementation to address the Covid-19 pandemic at the UCSF General Internal Medicine Primary Care Practice (P=0.006 using chi-squared test). A smaller proportion of visits with vulnerable populations occurred after implementation.



Source: The authors
NEJM Catalyst (catalyst.nejm.org) © Massachusetts Medical Society

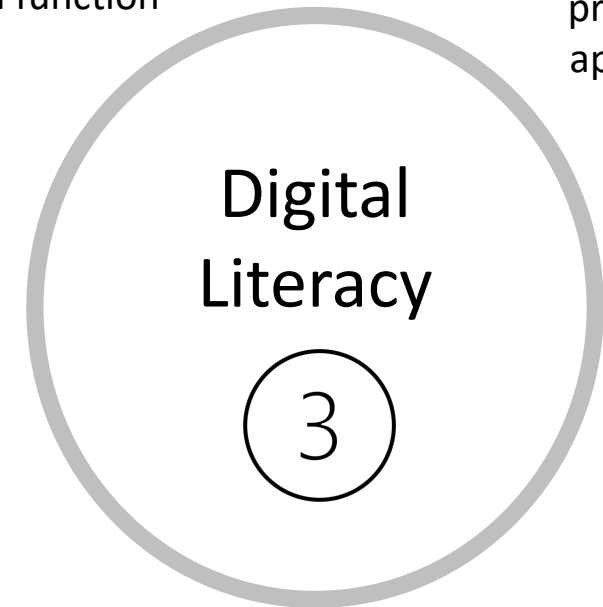
Patient-facing barriers to telehealth



Use on online
search function

Download a
program or
application

Send an
email

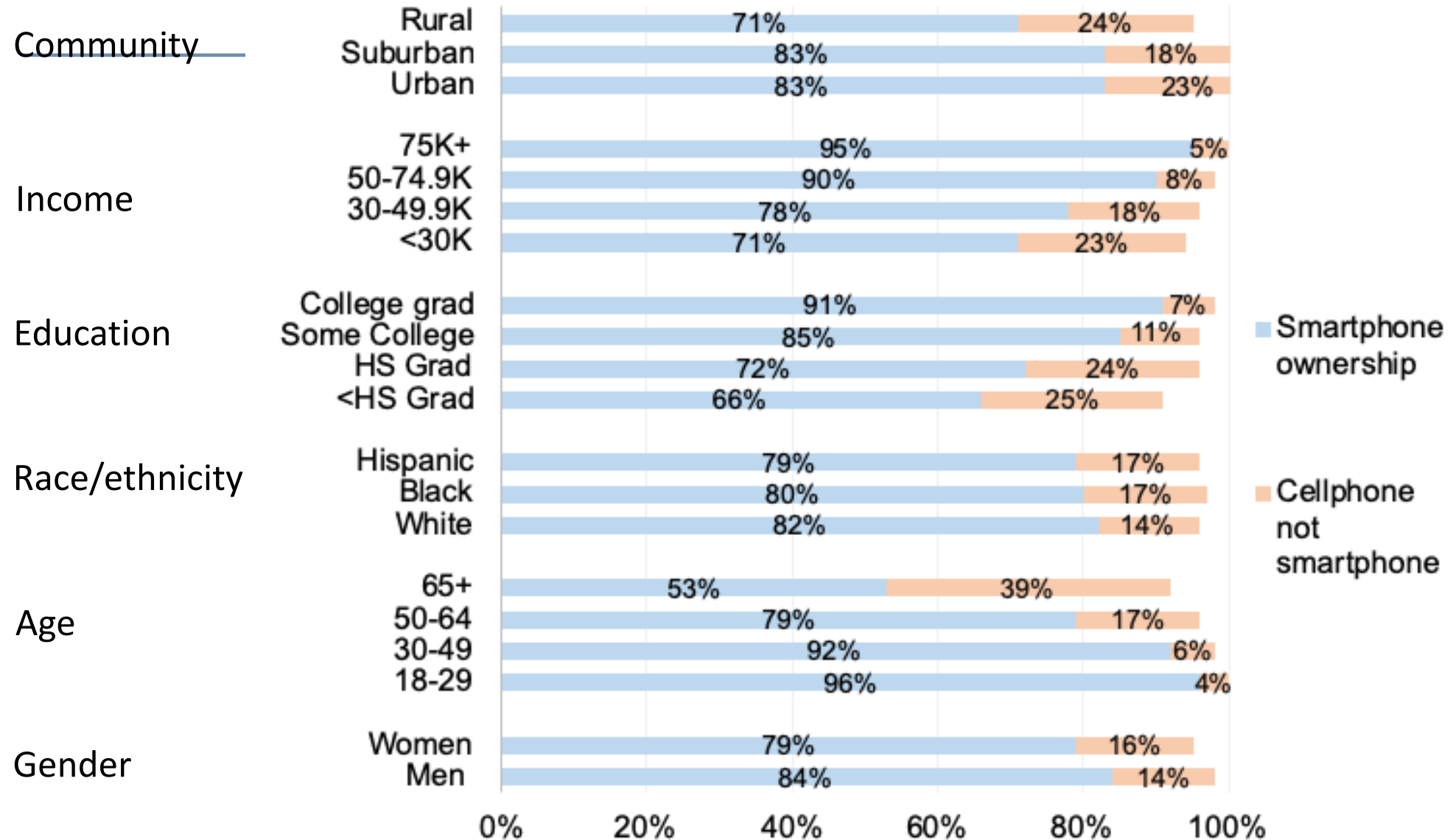


Complete an
online form

Create a
login and
password

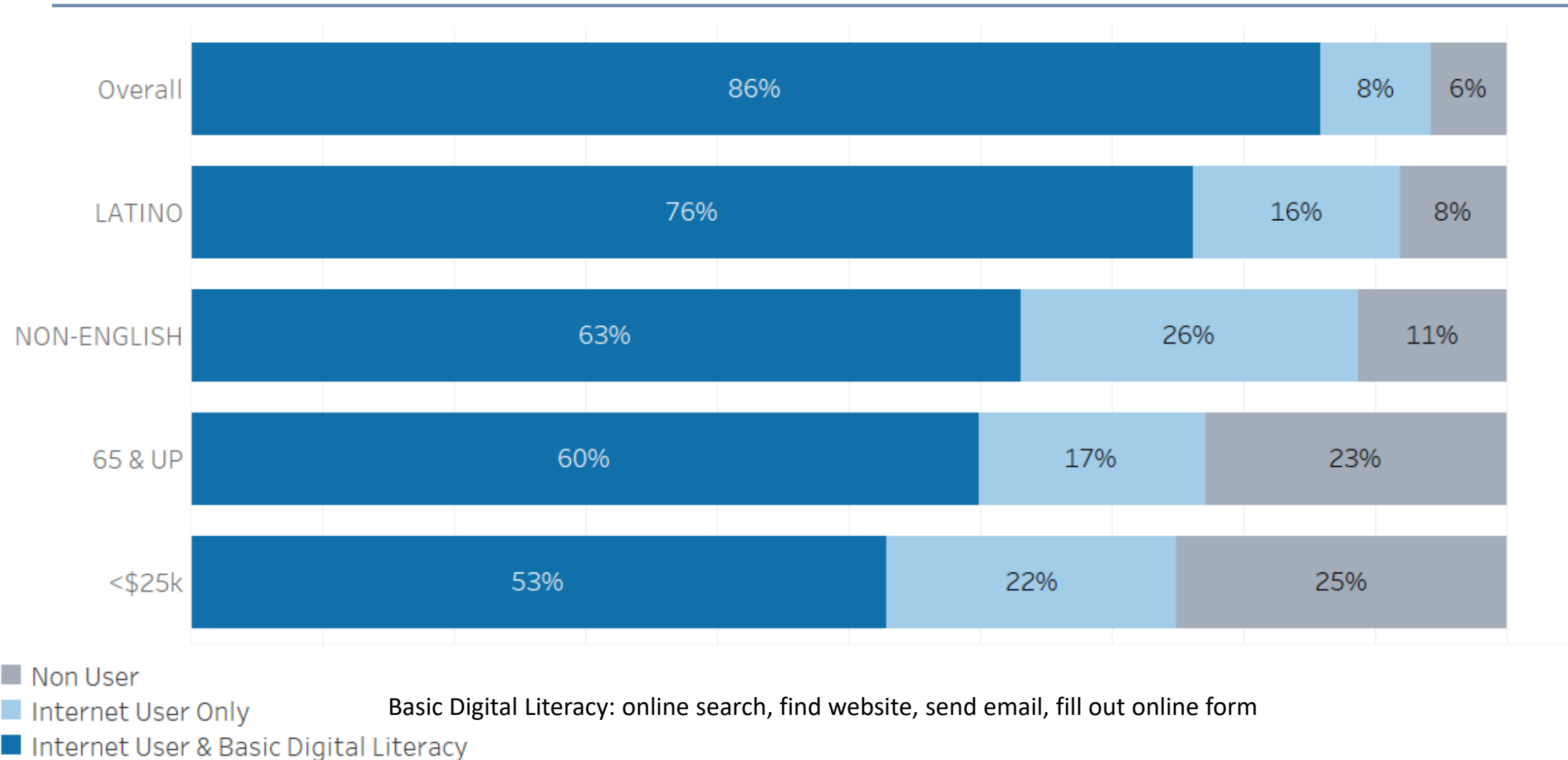
Mobile device disparities exist by age, income, education, community

% of US adults who own cell phones



Digital Divide in San Francisco

Internet Usage & Basic Digital Literacy in San Francisco



Patient Interest in and Barriers to Telemedicine Video Visits in a Multi-lingual Urban Safety-Net System

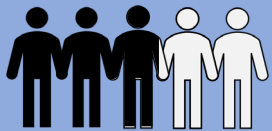
Khoong, Butler, Mesina, Su, DeFries, Nijagal, Lyles; JAMIA 2020

Conclusions: Safety-net patients are interested in video visits and able to successfully complete test visits. Internet/data access is a common barrier and may impact equitable telemedicine access

Cross-sectional phone survey of 202 patients scheduled for phone-only visits in safety-net system



87.6% racial minorities



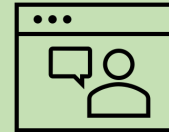
55.9% non-English speakers

Asked each patient about:

Interest in video ?	Device access
Wi-Fi access 	Barriers to video



65% (n=132) interested in video visit over phone-only



54% (n=109) were able to complete a test video visit



>50% (n=112) reported barriers to video visits

Most common:

- Inadequate data/Wi-Fi
- Hesitancy about technology
- No access to device

Factors associated with interest in video

Younger age (<55)

73% interested in video

Non-English language preference

76% interested in video

Prior smartphone app usage

84.8% interested in video



@elainekhoong
@blythe_butler
@CourtneyRLyles



General Internal Medicine
Department of Medicine



Obstetrics, Gynecology & Reproductive Sciences

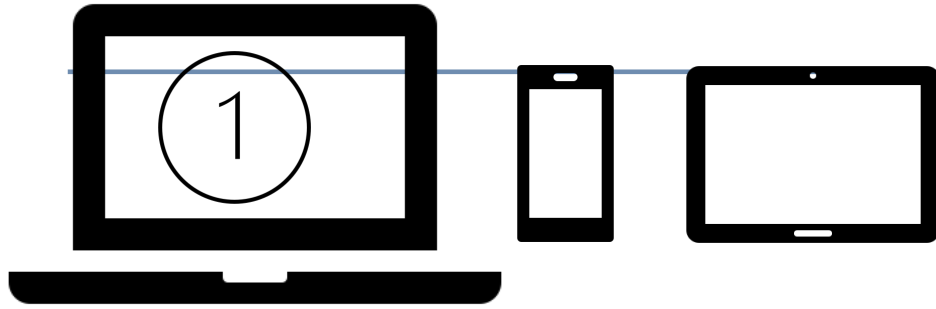


@ucsfcvp

Center for Vulnerable Populations
Department of Medicine

Resources for telehealth in safety-net settings
<https://cvp.ucsf.edu/telehealth>

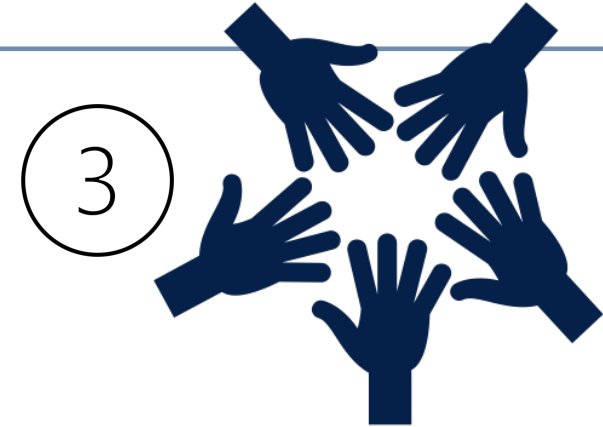
Clinician/System-facing barriers to telehealth



Video-enabled devices

2

HIPAA secure
video platform



New technology-focused roles
and skills for healthcare team

Telehealth
physical
exam

Pre-appointment
tech support

Appropriateness for
telehealth

Connection to
digital resources

Clinician concerns

Patient barriers

“...cannot reach... patients that don’t have phones...”

“...phone plans add cost when phone visits are used... costs not covered in billing”

Logistic challenges

- *“...family being distracted”*
- *“...difficulty with interpreter logistics ESPECIALLY when working remotely”*

Safety concerns

- *“...explaining changes in medication doses without showing... Can be tricky/feel a little unsafe”*
- *“...couldn’t do... neuro exam on a patient in whom it would have been helpful...”*

Satisfaction

- *“... significantly takes away from my satisfaction... I dread phone clinic days, sadly.”*

Clinicians' perceived benefits

Convenience / efficiency

- *"...valuable for patients who have limited transportation or ability to take time off work"*
- *"...linking in interested family members is easy"*
- *".. For managing some chronic conditions or doing social needs screening... very useful and more convenient for families..."*

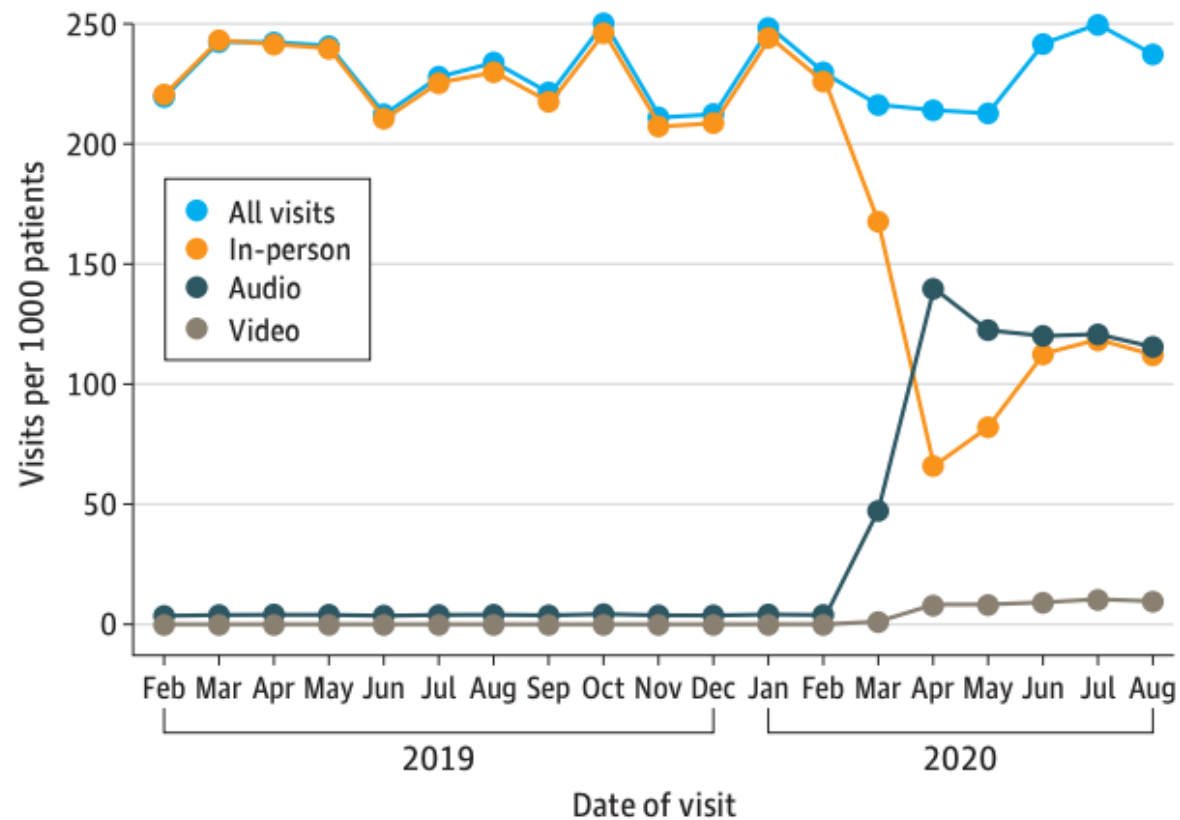
Patient comfort

- *"... patients asked more questions and were in some ways more engaged..."*

Telemedicine in California Safety-Net Organizations

Figure. Primary Care and Behavioral Health Visits per 1000 Patients by Visit Type From February 2019 Through August 2020

A Primary care



B Behavioral health

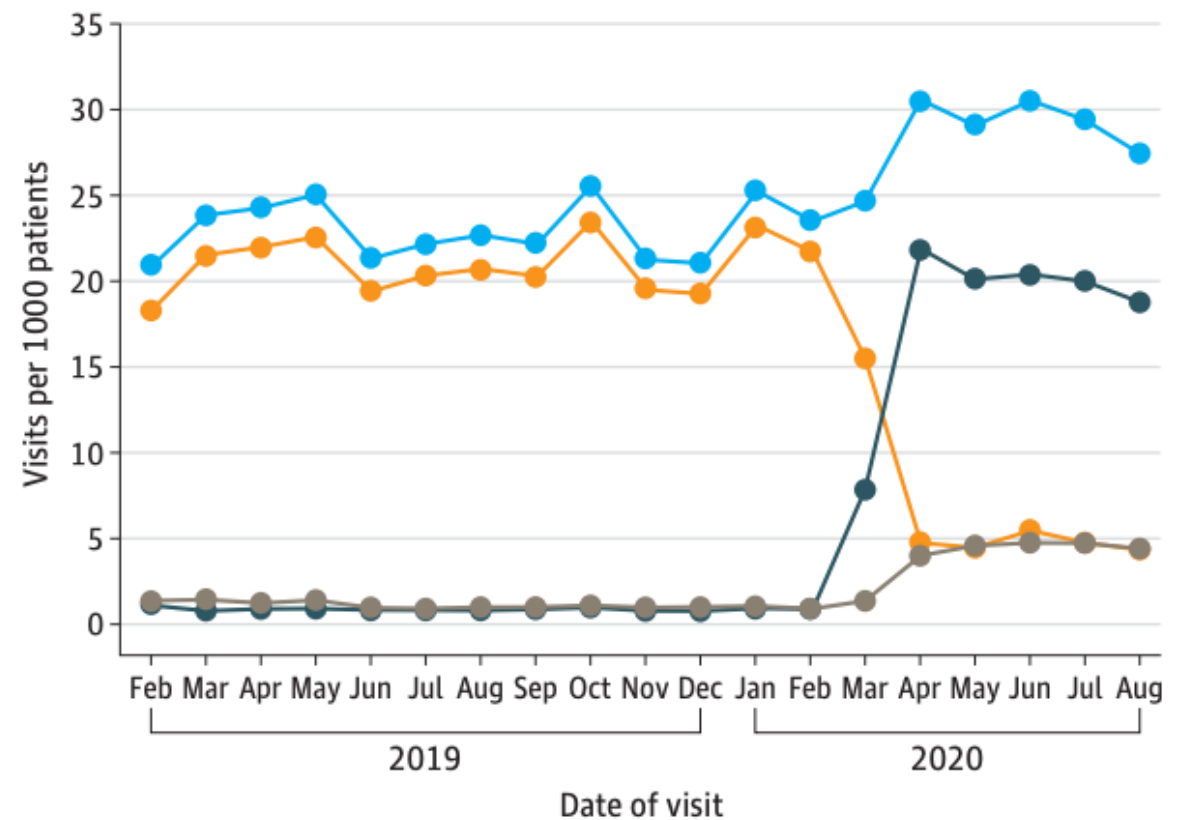
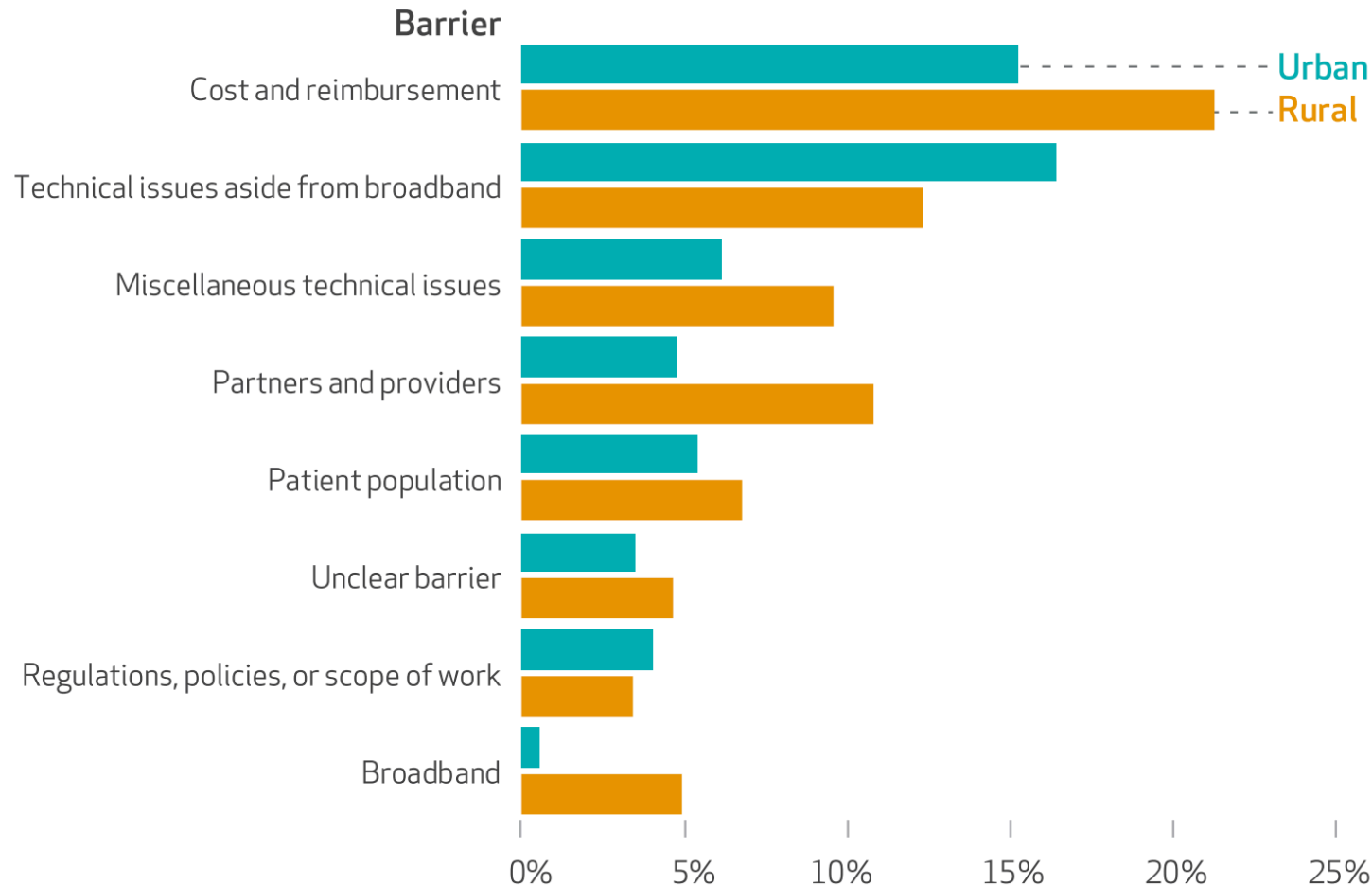


EXHIBIT 4

Percent of community-based health centers not using telehealth, by urban/rural status and barriers to use cited, 2016



SOURCE Authors' analysis of data for 2016 from the Uniform Data System. **NOTES** N = 844. Health centers are those funded by the Health Resources and Services Administration (see the text).

Pre-COVID Reasons for Low Adoption

Other Common Telehealth Restrictions



The specialty that telehealth services can be provided for



The types of services or CPT codes that can be reimbursed (inpatient office, consult, etc.)



The types of providers that can be reimbursed (e.g. physician, nurse, etc.)

Telephone/Audio-Only Service Delivery

5 states have added a permanent allowance for some type of telephone/audio-only delivered health care services since the COVID-19 emergency began. The addition of telephone was one of the most common COVID-19 temporary telehealth policy expansions, however not many states have taken the step to make this permanent.

Private Payer Reimbursement

43 States and the District of Columbia have laws that govern private payer reimbursement of telehealth. Some laws require reimbursement be equal to in-person coverage, however most only require parity in covered services, not reimbursement amount. Not all laws mandate reimbursement.



Consent

41 States and D.C. have a consent requirement in either Medicaid policy, law or regulation. This number has increased by two since Spring 2020.



Online Prescribing

Most states consider an online questionnaire only as insufficient to establish the patient-provider relationship and prescribe medication. Some states allow telehealth to be used to conduct a physical exam, while others do not or are silent. Some states have relaxed requirements for prescribing controlled substances used in medication assisted therapy (MAT) as a result of the opioid epidemic.

More and more states are passing legislation directing healthcare professional boards to adopt practice standards for its providers who utilize telehealth. Medical and Osteopathic Boards often address issues of prescribing in such regulatory standards.



Often, internet/online questionnaires are not adequate; states may require a physical exam prior to a prescription.

Licensure

Eight state boards issue licenses related to telehealth allowing an out-of-state licensed provider to render services via telehealth. Licensure Compacts have become increasingly common. For example:



28

States, D.C. & Guam: Interstate Medical Licensure Compact



34

States: Nurse Licensure Compact



28

States: Physical Therapy Compact



15

States: Psychology Interjurisdictional Compact (PSYPACT)



5

States: Audiology and Speech-Language Pathology Interstate Compact (ASLP-IC)



20

States: Emergency Medical Services Personnel Licensure Interstate Compact (REPLICA)

Payor policies



50 States and (D.C.)
Medicaid programs reimburse for live video



21
Medicaid programs
reimburse for RPM



27
States and (D.C.)
reimburse service
to the home

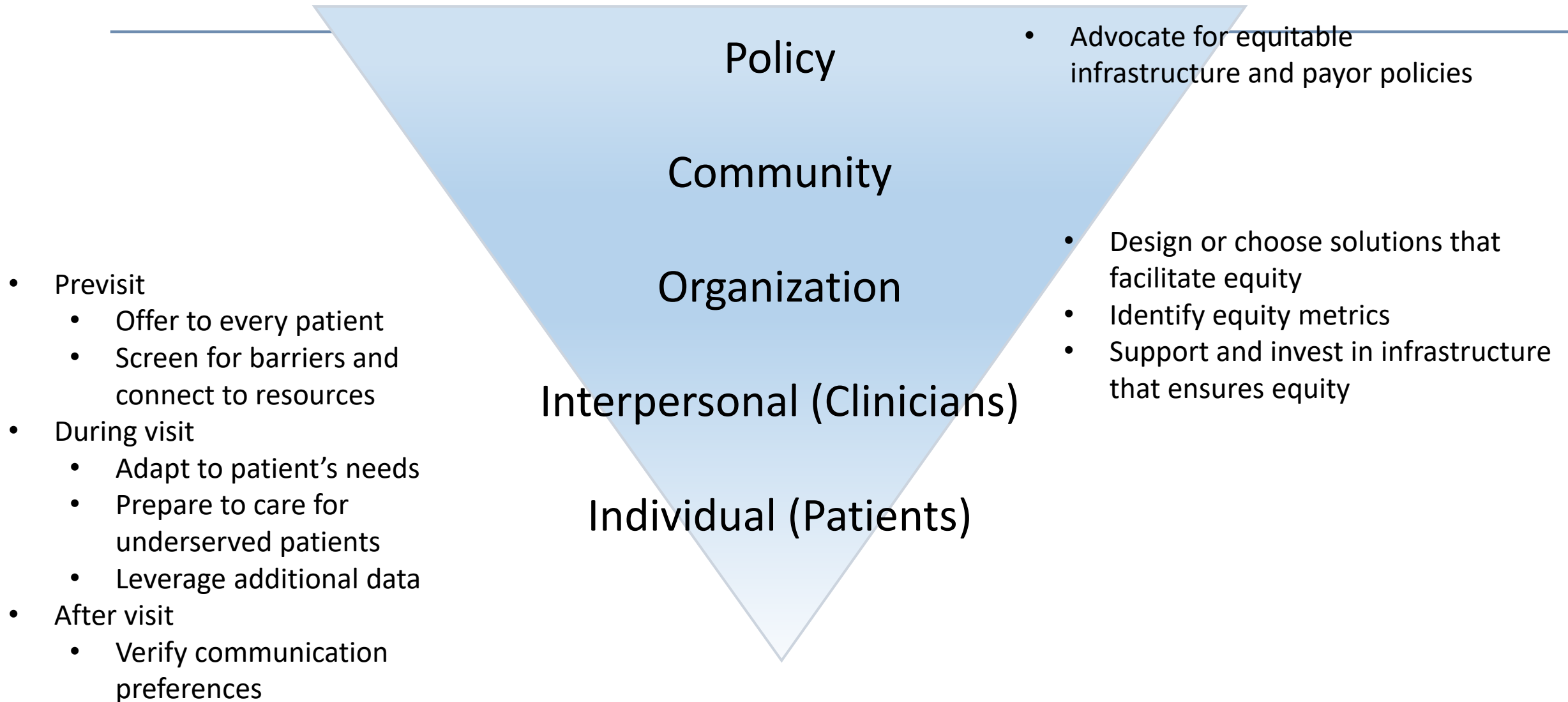


26
States and (D.C.)
reimburse services in
the school-based setting



18 Medicaid programs
reimburse for S&F

Solutions to Increase Telemedicine Equity



Resources

- California Lifeline: <https://www.californialifeline.com/>
- Center for Care Innovations Telehealth Toolkit for Equity: <https://www.careinnovations.org/resources/telemedicine-for-health-equity-toolkit/>
- Center for Connected Health Policy: <https://www.cchpca.org/policy-trends/>
- FCC Broadband Benefit: <https://www.fcc.gov/broadbandbenefit>
- LEAP SF: Telehealth Resources for Intimate Partner Violence: <https://www.leapsf.org/html/index.shtml>
- National Digital Inclusion Alliance: <https://www.digitalinclusion.org/>
- NEJM Catalyst: Telemedicine Equity for Chronic Disease Management: <https://catalyst.nejm.org/doi/full/10.1056/CAT.20.0123>
- "Telehealth Equity: Before and After COVID-19" in Primary Care in the COVID-19 Pandemic: <https://www.carequest.org/system/files/Primary-Care-in-the-COVID-19-Pandemic-Harvard-Report.pdf#page=251>
- Trauma-Informed Telehealth Care: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7473719/>
- UCSF Center for Vulnerable Populations: Telehealth in safety net settings: <https://cvp.ucsf.edu/telehealth>



Questions?

Email: elaine.khoong@ucsf.edu



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Questions & Answers



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Thank you