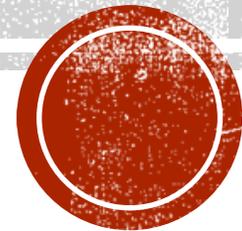


Telehealth in Underserved Communities

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Background

TELEMEDICINE

TELECOMMUNICATIONS TECHNOLOGY
DOCTOR MEDICINE
REALTIME
PROVISION
EVALUATION
SPECIALIST
COMPUTER
EDUCATION
HOME

What is Telehealth?

- “...the use of electronic information and telecommunications technologies to support and promote long-distance clinical health care, patient and professional health-related education, public health and health administration” (HealthIT.gov)

- Using technology to provide health-related education and services

4 Types of Telehealth



Live Video

real-time, two-way video conference between a patient and service provider.



Remote Monitoring

monitor a patient remotely using various technological devices; primarily for managing chronic diseases or specific conditions, such as heart disease, diabetes mellitus, or asthma.

Store and Forward

acquire medical data (medical images, biosignals etc.) and transmit this data to a doctor or medical specialist at a convenient time for assessment offline.



Mobile Health (mHealth)

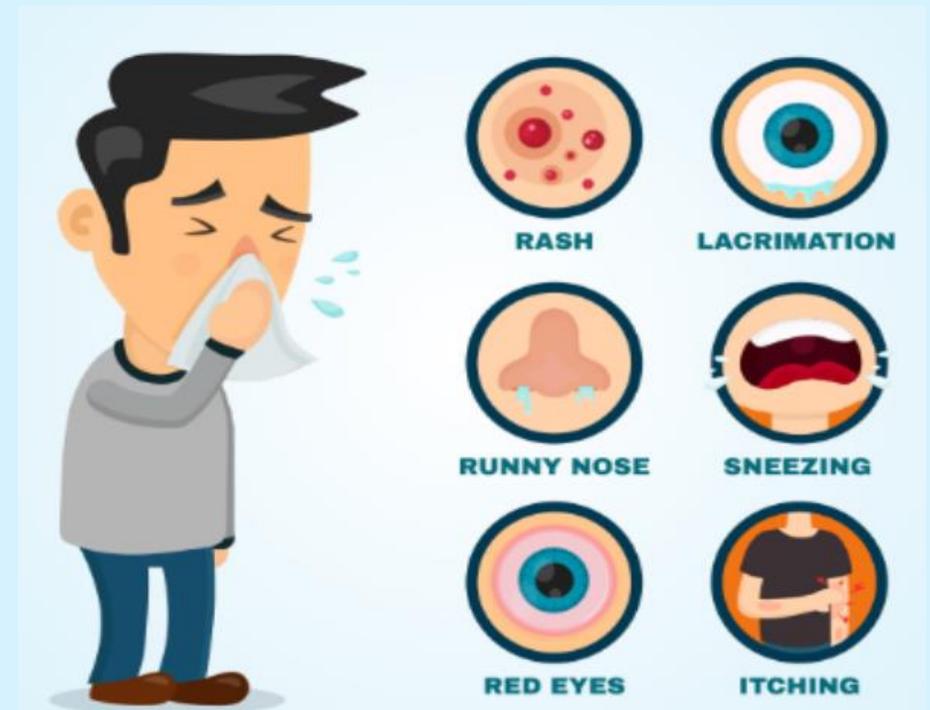
consumer technologies like smartphone and tablet apps that enable consumers to capture their own health data, without a clinician's assistance or interpretation.



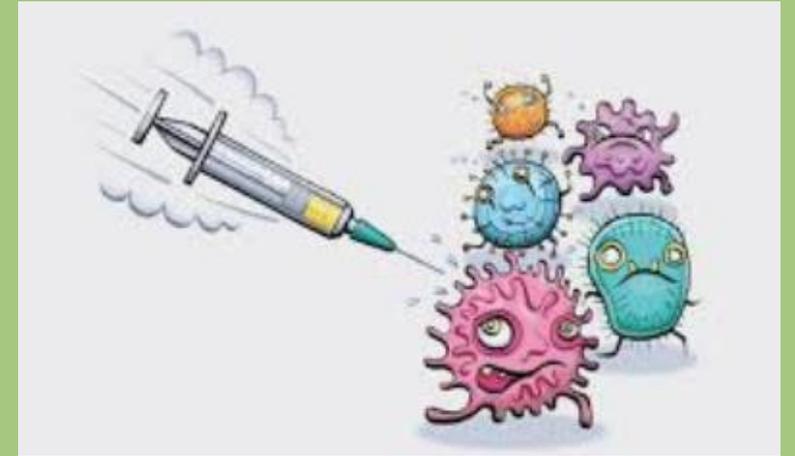
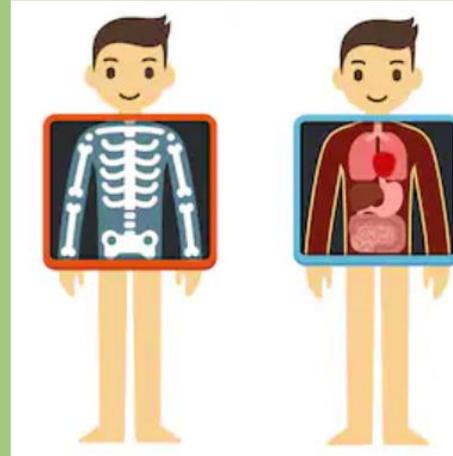
When is Telemedicine Most Effective?

- Conditions amenable to a “clinical diagnosis”
- Education
- Medication management
- Follow-up appointments
- Behavioral health care
- Health screening
- Specialty care

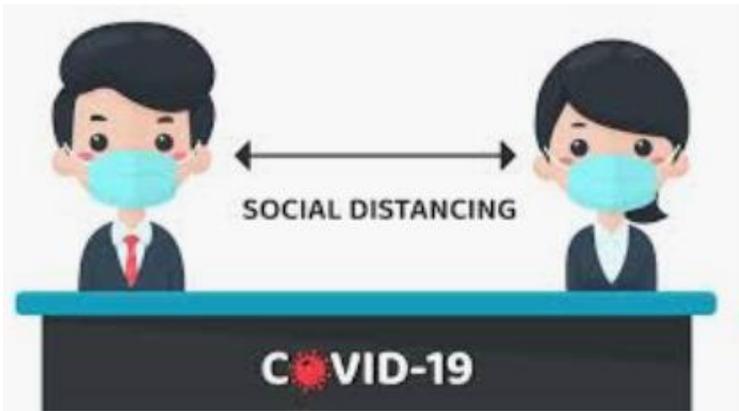
Allergic Rhinitis



What Can't be Treated with Telehealth



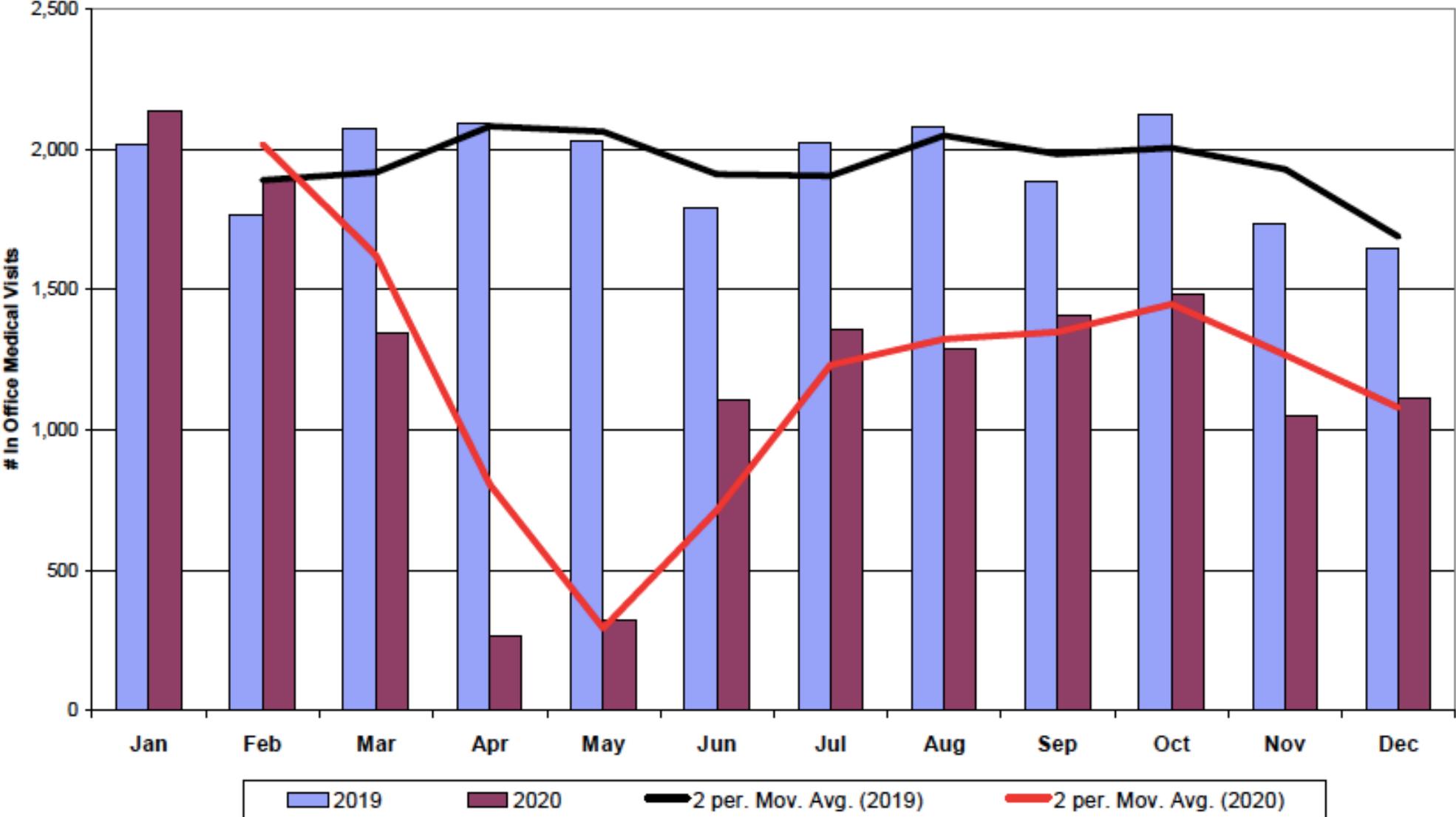
Which Patients Benefit Most from Telehealth?



Telehealth and COVID-19



Figure 3: Comparison of “In Office” Medical Visits in 2019 and 2020 by RWHAP Clients by Month of Visit



Policy Changes in the COVID Era

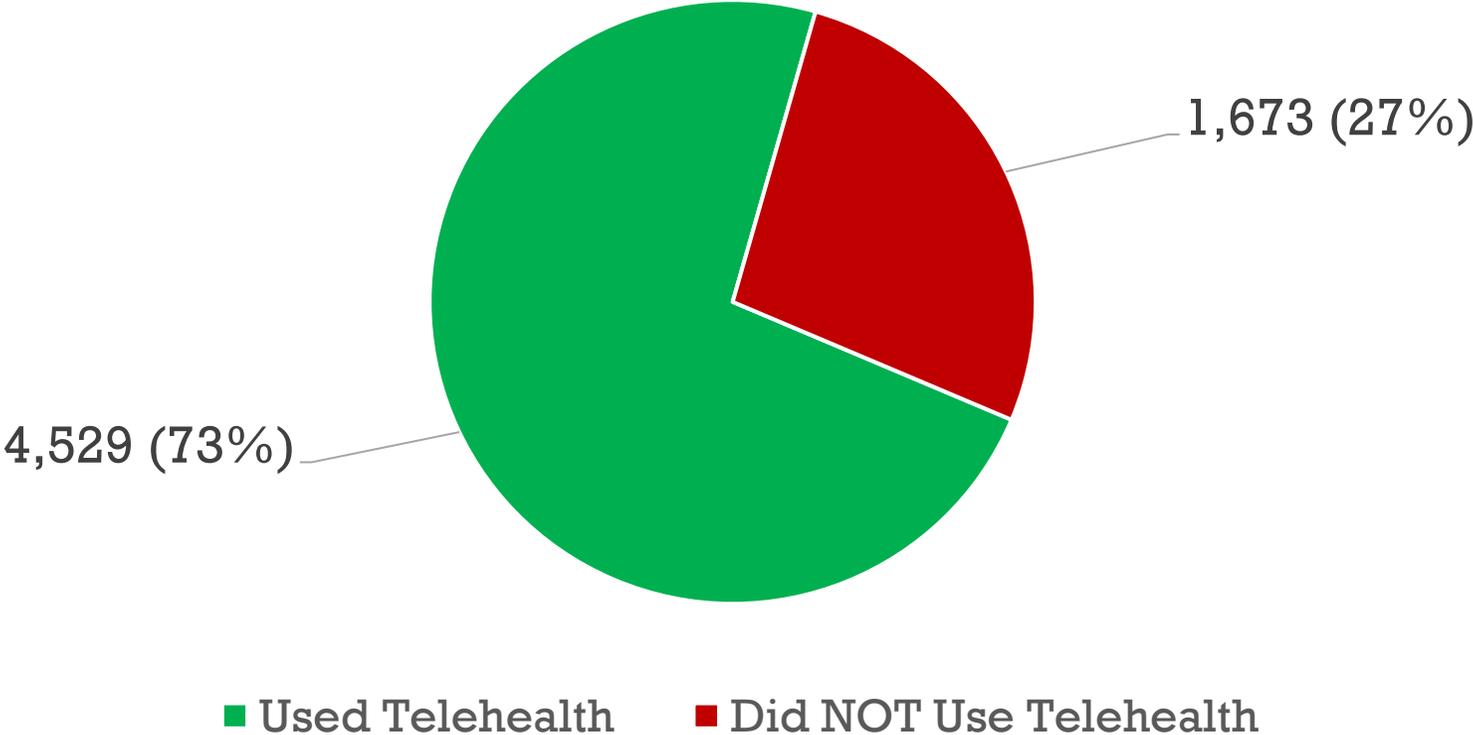
- HIPAA-compliant platform preferred
 - Examples: Zoom, Doxy.me, EHR integrated
 - Non-public facing platforms allowed (e.g., Apple FaceTime, WhatsApp)
- Telephone consultations covered
- Some insurers do not require cost sharing
- Reimburse at the same rate as in-person
- Visits can be initiated in the patient's home
- Expansion of eligible service types
- Elimination of initial in-person visit
- Expanded scope of practice for providers

Telehealth Services through Ryan White

- Outpatient/ambulatory health services
- Mental health services
- Substance abuse outpatient services
- Medical nutritional therapy
- Medical case management
- Non-medical case management

Use of Telehealth among NEMA Clients

N = 6,202



Telehealth as % of Services Provided

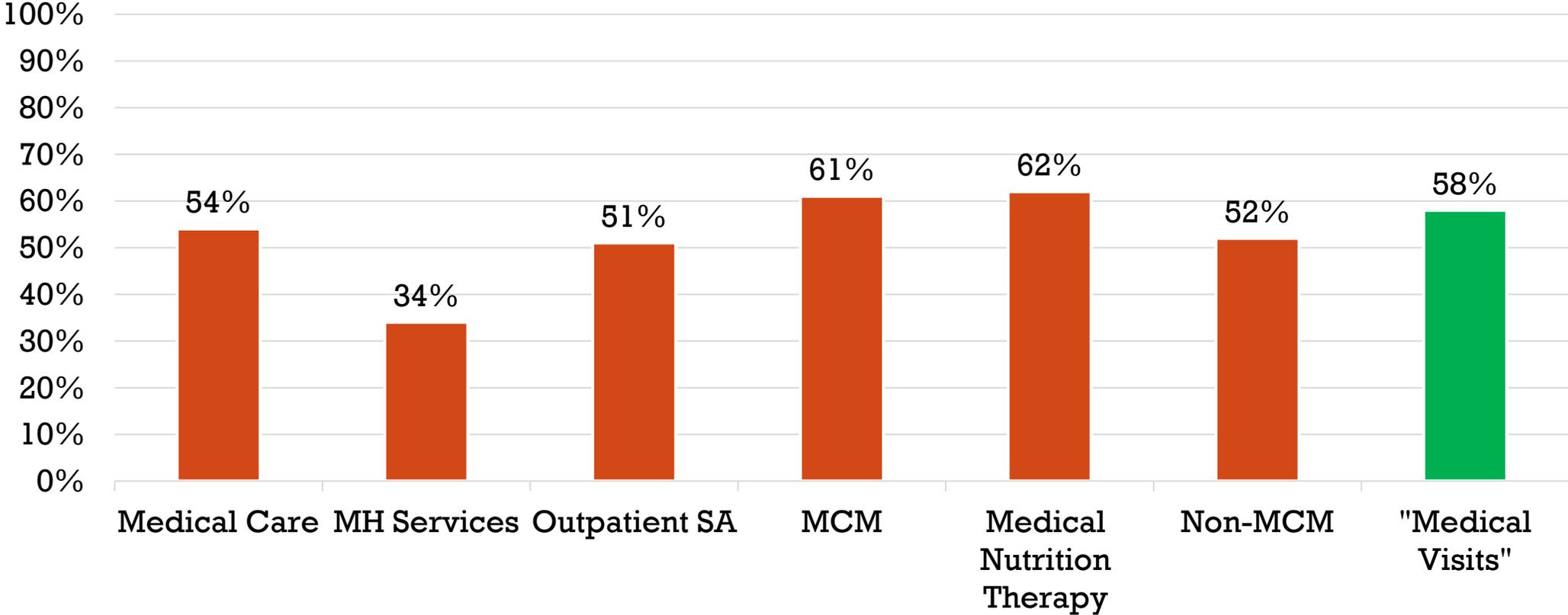
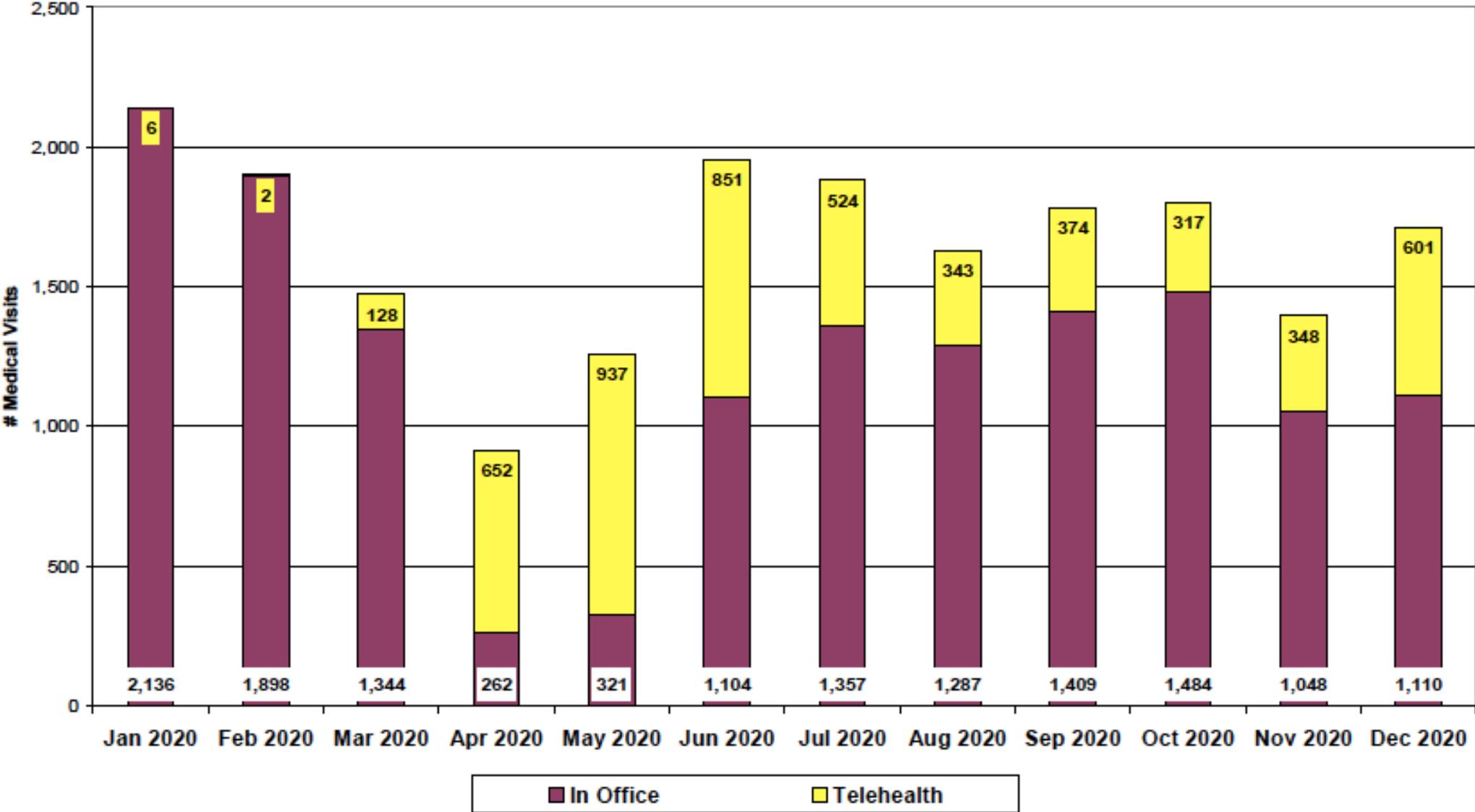
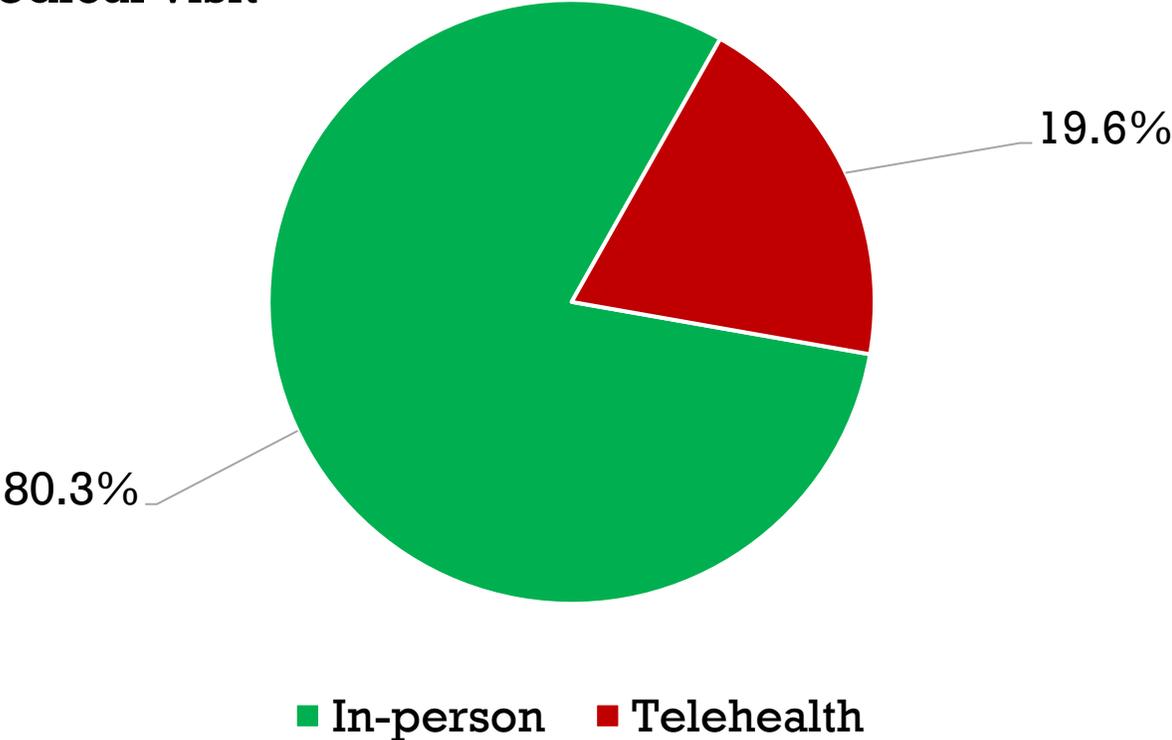


Figure 4: Number of HIV Medical Visits in 2020 by Type – In Office and Telehealth



Consumer Survey: Format of Medical Visits

N = 128 survey respondents
n = 117 with any medical visit



Rutgers' Telehealth Needs Assessment



Rutgers' Telehealth Needs Assessment

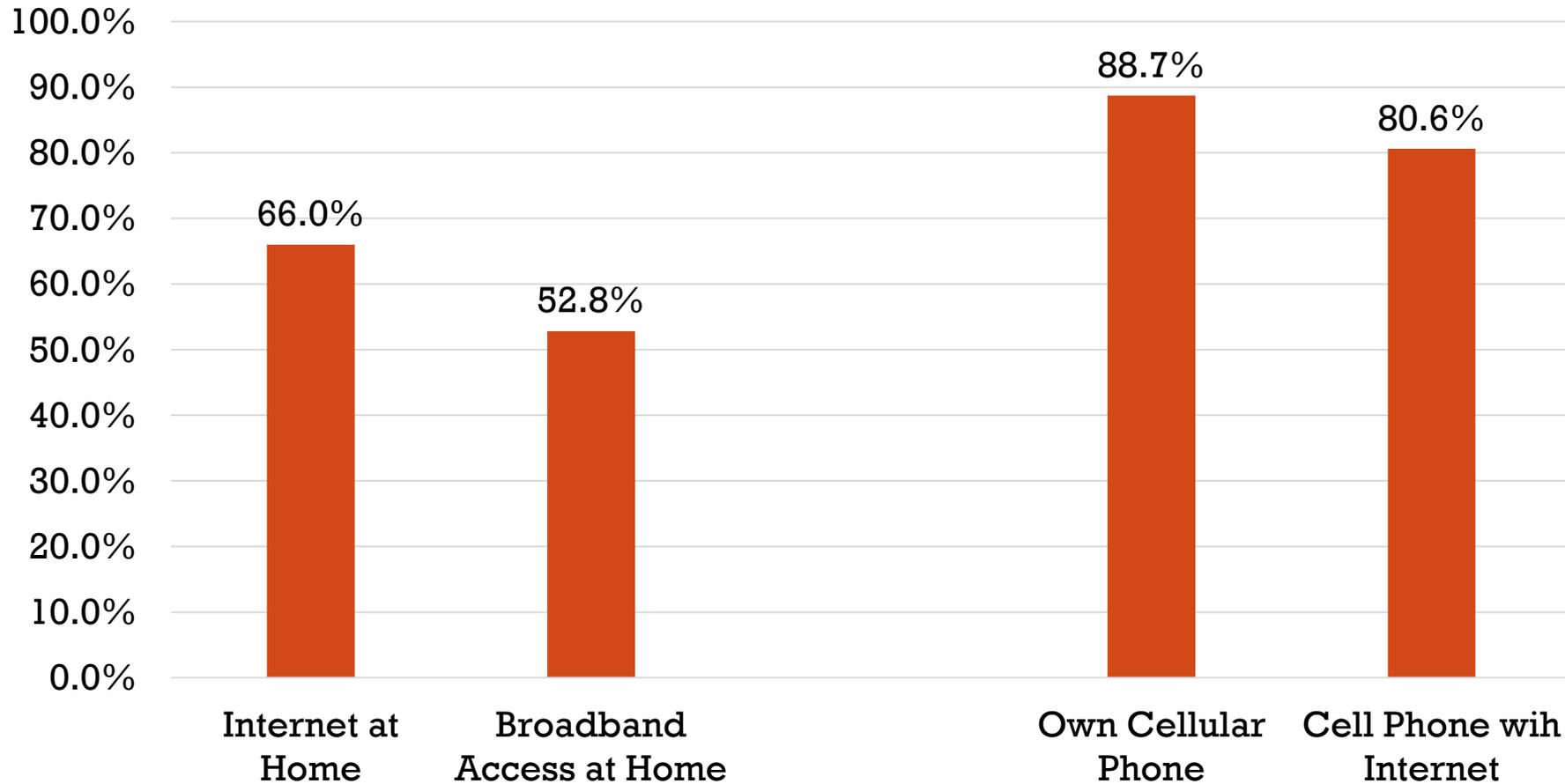
- Focused on agencies providing HIV-related prevention and care services
- Quantitative Surveys
 - Clients (n = 144; 63 Pre-COVID, 81 Post-COVID)
- Qualitative Data Collection
 - Clients – focus groups
 - ❖ 2 Spanish-speaking
 - ❖ 1 young men



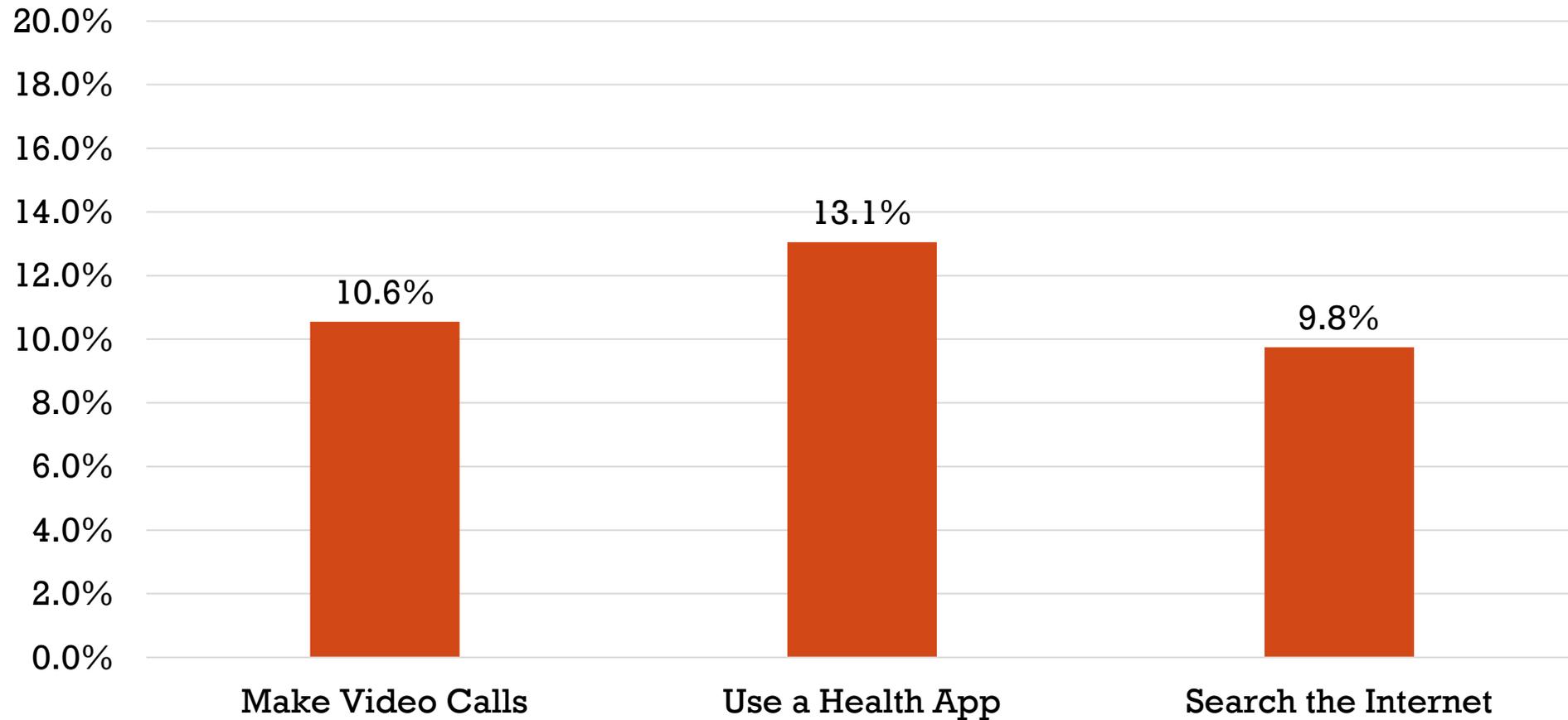
Study Sample

Total Sample Size = 144	n	%
Age Groups		
25 years or younger	14	9.7
26 to 44 years	54	37.5
45 to 64 years	67	46.5
65 years or older	7	4.9
Language of Survey		
English	132	91.7
Spanish	12	8.3
Gender		
Male	74	51.4
Female	65	45.1
Transgender	5	3.5
Ethnicity†		
African American	89	61.8
Latino	41	28.5
White	13	9.0
Other	9	6.3
Highest Education Completed		
Less than High School Degree	42	29.2
High School Degree/GED	45	31.3
Some College or College Degree	57	39.6
Employment Status		
Employed	54	37.5
Unemployed/Looking for Work	32	22.2
Disabled	45	31.3
Out of the Labor Force	10	6.9
Monthly Income Before Taxes		
\$0	25	17.4
\$1 to \$499	19	13.2
\$500 to \$999	31	21.5
\$1,000 or More	68	47.2
Low Health Literacy		
	58	40.3
Housing Status		
Unstably Housed (Past 2 Months)	32	22.2
Political Engagement		
Registered to Vote	104	72.2
Voted in 2016 Presidential Election	74	51.4

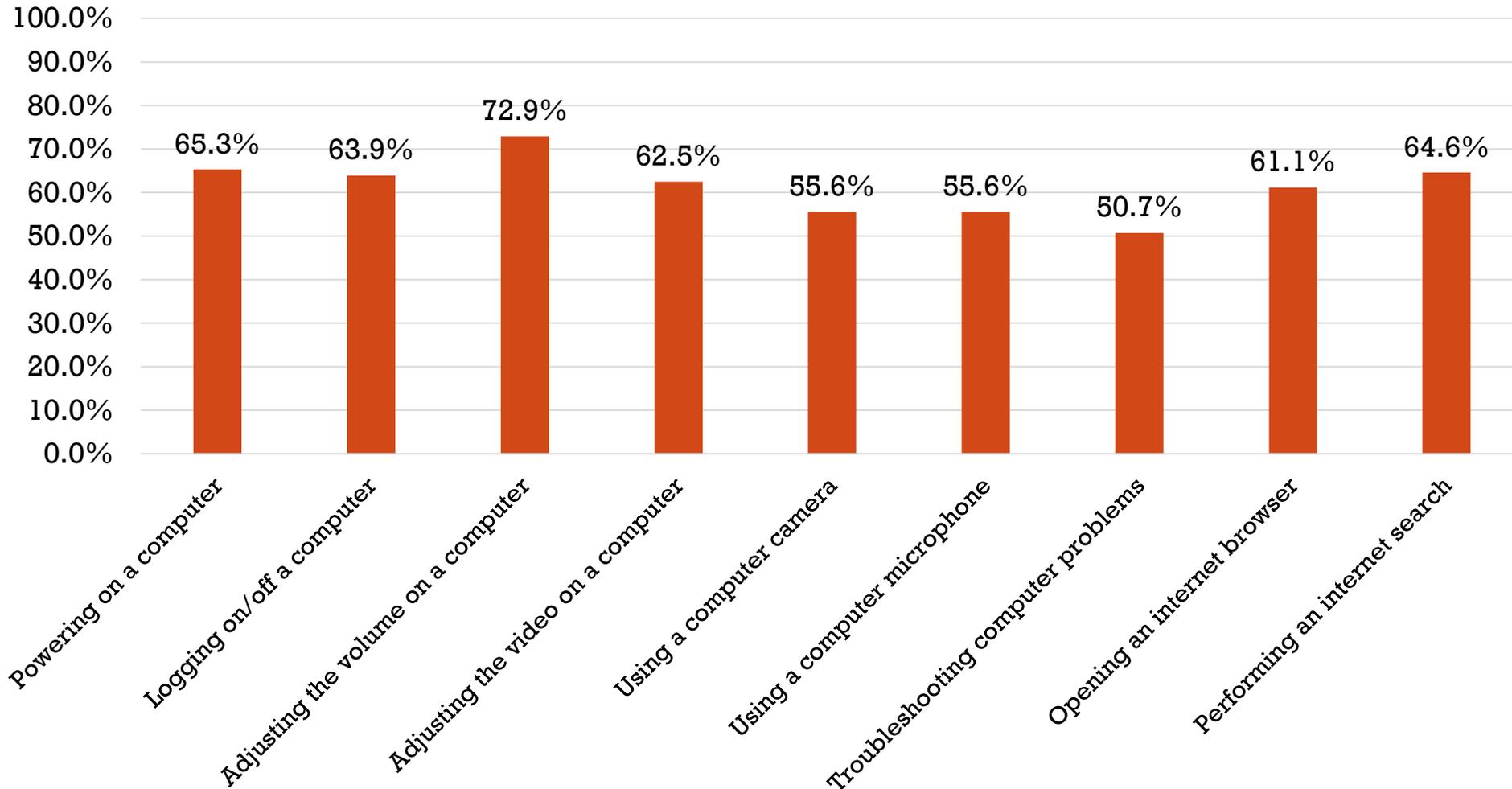
Access to Technology for Telehealth



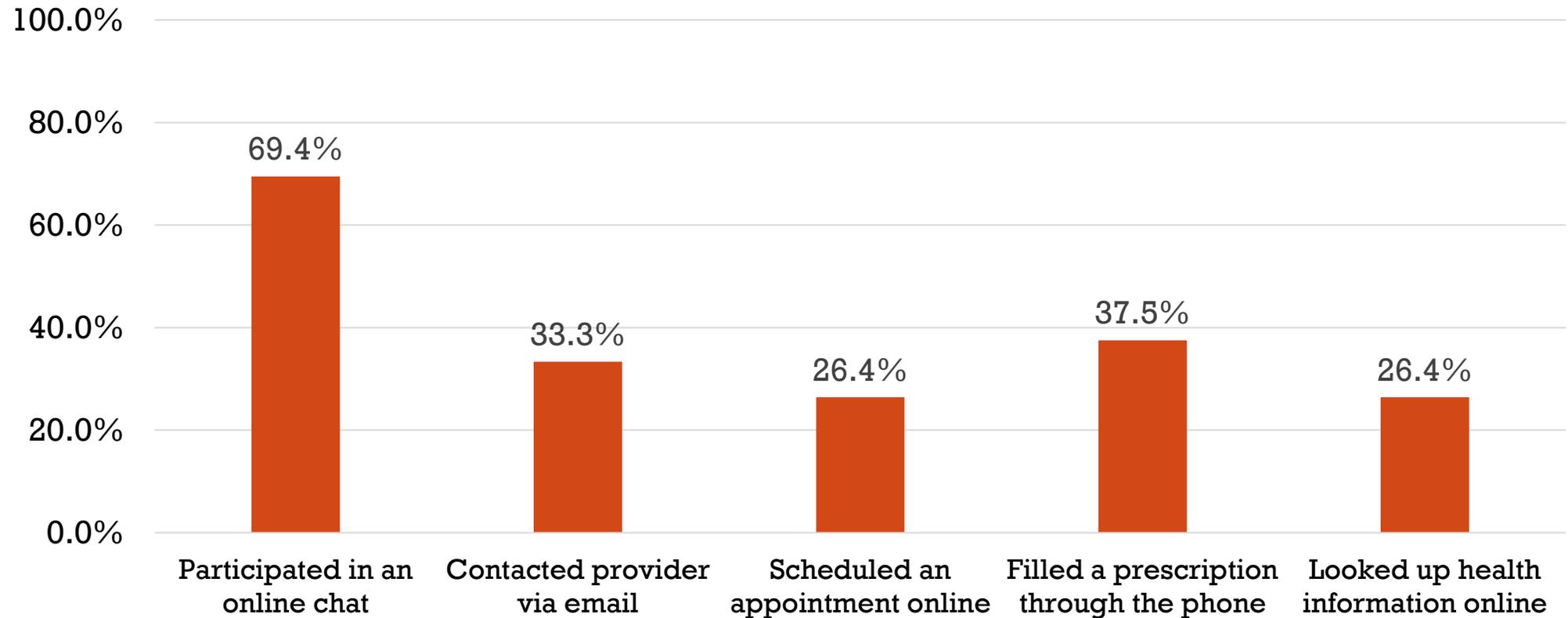
Functions Not Available on Device



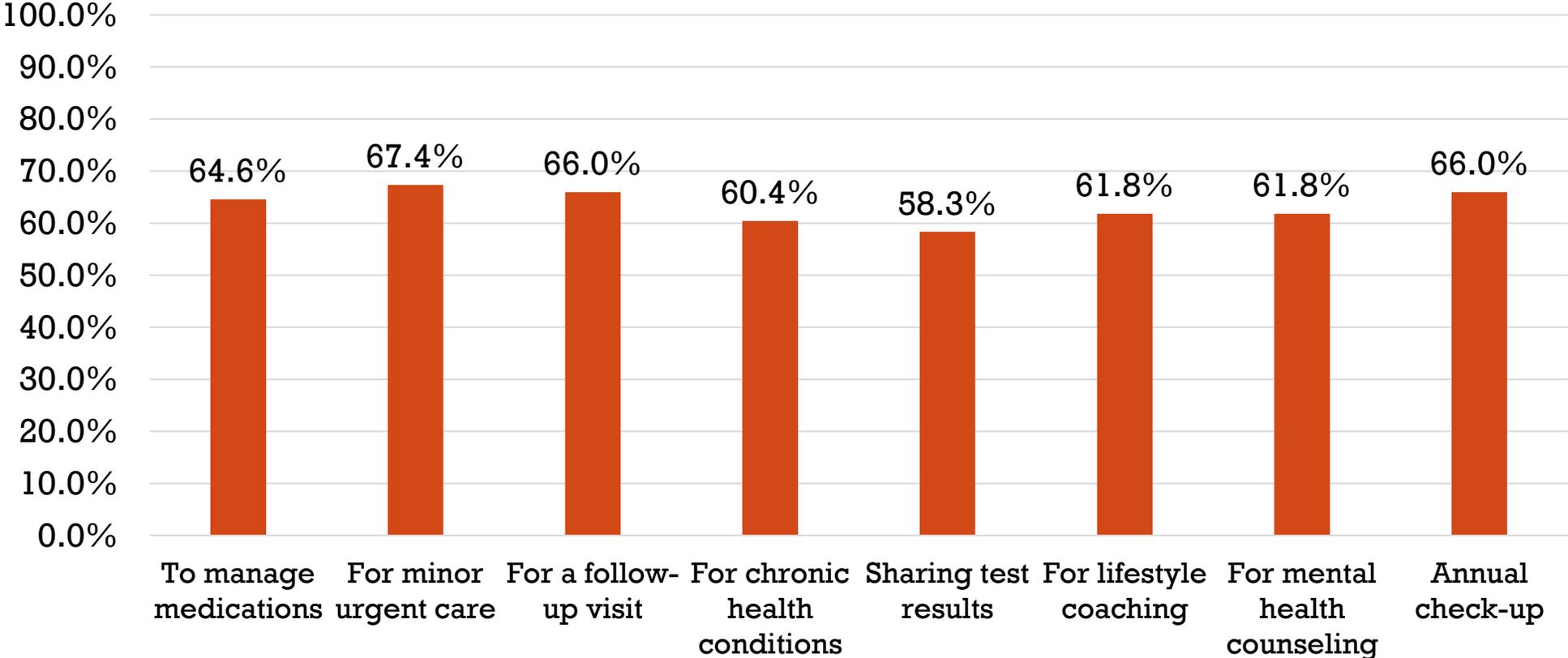
% Who Feel Comfortable...



% Who Have Ever (in the past month)...



% Who Feel Comfortable Using Telehealth



Benefits of Telehealth



Patient Challenges with Telehealth

- Privacy and security
 - Lack of privacy at home
 - Taking visits in cars
- Patient problems with technology
 - Too complicated to use apps
 - Lack of videoconferencing
 - Broadband issues

Provider problems with technology

- Staff not sufficiently computer savvy
- Unstable Wi-Fi
- Delays starting visits on time

Lack of provider “warmth” in visits

- Feels “robotic”
- Less time taken

Possible omission of key information
 (“You do ... have HIV”)

Administrators' Perspectives

- Use of telehealth was limited in the pre-COVID era
- Uses of telehealth services
 - Specialty care
 - Substance use counseling
 - “Non-medical” counseling
- Needs for ongoing telehealth use/expansion
 - Funding to purchase necessary equipment for providers and clients
 - Training for staff and clients
- Ongoing challenges
 - Meeting the needs of people who are homeless (60% of clients in one agency)
 - Resistance to use of technology in those over age 45
 - Clients' access to technology – basic phone with limited data plans



CONCLUSIONS

- Telehealth is a broad concept that includes many types of technology
- COVID-19 crisis brought telehealth rapidly into the mainstream
- Many patients (and providers) many not be fully equipped for telehealth
- Telehealth can be integrated into regular care
 - Telehealth is a viable approach for many health-related needs
 - With practice and a professional approach, integration can become seamless
 - A systematic approach to delivery and assessment is necessary
 - Taking into account clients' needs can improve comfort and engagement

Questions /

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