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Title

Telemedicine visits among Hispanic patients in US Community Health Centers

Priority 1 (Research Category)

Health Care Disparities

Presenters

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Abstract

Context: The COVID-19 pandemic led to a large increase in telemedicine visits. There is conflicting evidence as to whether patients of Hispanic ethnicity are more or less likely to have telemedicine visits. Objective: To assess whether Hispanic patients are less likely to have telemedicine visits than non-Hispanic white patients in community health centers. Study Design: Retrospective observational cohort study. Setting or Dataset: Electronic health record data: 110 community health centers from the OCHIN Network with at least 1 ambulatory visit and 1 telemedicine visits between April 1 and December 31, 2020 (the outcome window) during the COVID-19 pandemic. Population Studied: Adults (n=143,177) aged 19-64 patients with a visit in the year prior to the outcome window receiving care in clinics. We focus on group differences between Non-Hispanic white, English-preferring Hispanic (EPH), and Spanish-preferring Hispanic (SPH) patients. Outcome Measures: We compared rates of ambulatory and telemedicine visits using covariate-adjusted generalized linear mixed models using a logit link with clinic- and patient-level random effects. Results: Compared to Non-Hispanic white, EPH (Odds Ratio [OR]=1.07, 95%CI=1.03, 1.12) and SPH (OR=1.13, 95%CI=1.08, 1.17) patients had greater odds of having any visits (ambulatory or telemedicine) during the outcome window. Among the 77,553 patients with any visits, the unadjusted percent of visits via telemedicine was higher among EPH and SPH patients than Non-Hispanic white patients (68%, 66%, 63%, respectively) but the odds that the visit was via telemedicine were lower among EPH (OR=0.84, 95%CI=0.79, 0.88) and SPH (OR=0.65, 95%CI=0.62, 0.68) than Non-Hispanic white. Among clinics with <10% of Hispanic in their patient panel, the proportions of visits via telemedicine were 29% for SPH and 48% for EPH relative to 48% for Non-Hispanic white patients. Among clinics with >50% of Hispanic in their patient panel, the proportions of visits via telemedicine were 69% for SPH and 71% for EPH relative to 70% for Non-Hispanic white patients. Conclusions: Our findings suggest that the rate of telemedicine visits among Hispanic patients is highly dependent on the proportion of Hispanic patients on the clinic panel, which may explain differences in findings across studies.