Title

*Telehealth in the Pandemic: Experiences and Perspectives of Primary Care Clinicians*

Priority 1 (Research Category)
COVID-19

Presenters
Kathryn Kane, BA, Elisabeth Callen, PhD, Melissa Filippi, PhD, MPH, Gwendolyn Quintana, MD, MPH, Tarin Clay, BA

Abstract
Context: Use of telehealth services increased dramatically during the COVID-19 pandemic across a variety of medical specialties including primary care. While multiple surveys have tracked changes in the use of telehealth services across phases of the pandemic, few qualitative studies have explored primary care clinicians’ experiences with and perceptions of telehealth services during this time. Objective: This study examined the immediate and long-term effects of COVID-19 on primary care clinicians use of telehealth services including challenges and benefits. Study Design: Qualitative study. Setting: AAFP National Research Network staff virtually conducted semi-structured, open-ended interviews with primary care clinicians between August 7, 2020 and September 1, 2020. Outcome Measures: Primary care clinicians’ perceptions of and experiences with telehealth services during the COVID-19 pandemic. Results: 26 primary care clinicians from a variety of practice and geographic settings participated in the study. Clinicians reported a mix of positive and negative experiences with telehealth during the COVID-19 pandemic across four domains: 1) adoption of telehealth, 2) billing of telehealth services, 3) patient experiences with telehealth, 4) telehealth efficacy. Due to their institutional support, clinicians affiliated with healthcare systems tended to have more positive experiences with adoption and billing of telehealth services. Clinicians in rural communities discussed the nuanced impact of telehealth in reducing barriers to care (e.g., transportation), while introducing additional barriers (e.g., telehealth compatible devices and stable broadband access). Some clinicians spoke to the value of telehealth for primary care visits which involve chronic disease management, while others felt it compromised tenets of primary care such as in-person examination. Conclusions: Primary care clinicians’ perspectives of and experiences with telehealth during the COVID-19 pandemic provide critical insight needed to prepare for future crises affecting access to healthcare. As telehealth services advance, independent clinicians may require additional support to ensure they are capable of meeting patient needs through virtual care modalities. Furthermore, any effort to increase telehealth support for clinicians should be accompanied by initiatives to address barriers to telehealth for rural, underserved communities.