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Title

What Telehealth Taught Us about Being Grounded: Lessons from a series of clinician conducted Mar 2020-Mar 2022

Priority 1 (Research Category)

Survey research or cross-sectional study

Presenters

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Abstract

Context: We are experiencing a moment in time unlike any in living memory. COVID-19 has created an entirely new context for the delivery of primary care and for two years it has stood as the flood gate between population healthcare needs and the overwhelming of hospital systems. What did we learn from the rapid adoption of telehealth by primary care practices? Objective: To examine rapid primary care practice transformation, adoption of digital health, and the variation of experience and use by practice setting, geographic location, and population served. Study design and Analysis: A rapid cycle survey of national cross-sectional cohorts (with an embedded longitudinal cohort), fielded using a mixed methods exploratory sequential design, first weekly, then monthly, during the pandemic. Setting: US primary care clinicians practicing in primary care settings. Dataset: 36,000 surveys collected from 8100 unique individuals, March 2020 to March 2022. Population studied: clinicians practicing in US primary care settings. Instrument: First, a brief survey, taking 3-5 minutes to complete, completed anonymously using a web-based platform; second a brief series of 16 one minute surveys among a longitudinal cohort of 112 primary care clinicians. Results: In March 2020, 41% of respondents indicated zero video-based visits – in May 2020 that was reduced to 13%. In Oct 2020 and Jan 2021, 38% to 45% of respondents said they used video-based care for at least 1 in 5 patients; 35% said they used phone-based care for at least 1 in 5. Care priorities covered using telehealth visits shifted over time from all types of visits to a focus on visits that limited unnecessary exposure to COVID-19. Reduction in allowable telehealth billing reduced use of telehealth by practices. Respondents report telehealth easier to use in established relationships and while creating obstacles for some, increased access for many vulnerable populations. Technical literacy was a stronger issue than health literacy in telehealth delivery. Conclusions: Telehealth is a new tool that practices indicate they will keep post pandemic. Training of patient population will be required. Understanding of telehealth as a tool, not a new service line, was the most effective lesson informing its use.