

NAPCRG 52nd Annual Meeting — Abstracts of Completed Research 2024.

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**Title**

*Primary Care Provider Perspectives at an Academic Medical Center: Are Telemedicine Visits as Effective as In-person Care?*

**Priority 1 (Research Category)**

Survey research or cross-sectional study

**Presenters**

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**Abstract**

Context: As academic medical centers purposefully integrate telemedicine visits into primary care, efficacy studies are needed to appropriately guide resource allocation and triage processes.

Objective: To assess provider perceptions of the clinical effectiveness of telemedicine video visits, immediately post-encounter, compared to in-person visits.

Study Design and Analysis: Survey research and retrospective chart review.

Setting: Providers across six Northern California clinic sites surveyed over an 8-week period (March 21-May 16, 2023). Practice settings included general primary care, senior care, concierge care, urgent care, and employer-based care.

Population Studied: 87 primary care providers, including family physicians, internists, nurse practitioners, and physician assistants.

Instrument: Providers randomly received an electronic medical record (EMR)-embedded survey in approximately 10% of telemedicine visits. Providers responded on a 3-point scale: "Compared to an in-person visit, how successfully were you able to accomplish the clinical goals of the visit?" In retrospective chart review, visits were categorized by CPT code (preventative or problem-focused); for problem-focused visits, encounter diagnoses were grouped by organ system, with organizational guidance from the Medical Dictionary for Regulatory Activities (MedDRA). Descriptive statistics were used to assess provider rating of visit efficacy.

Outcome Measures: Self-reported Likert-scale responses.

Results: For most visits, providers responded that they were able to achieve clinical goals about (255/418, 61%) or more successfully (102/418, 24%) as an in-person visit. For approximately 15% (61/418) of visits, clinical goals were achieved less successfully. Cited reasons for less successful visits were limitation of physical exam (48/72, 66.7%), need for point-of-care testing (9/72, 12.5%), patient-related technology literacy/access (6/72, 8.3%), other (4/72, 5.5%), high medical complexity (3/72, 4.2%), and procedural visit (2/72). On retrospective chart review, while most clinical conditions were similar in rates of telemedicine success, some conditions (respiratory, gastrointestinal, musculoskeletal) were associated with a higher proportion of less successful visits.

Conclusions: Primary care providers felt telemedicine visits successfully achieved clinical goals of care in most visits, indicating that telemedicine is suited for most primary care concerns.

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