Delta Region Community Health Systems Development (DRCHSD) Program

Telehealth Webinar Series: Telehealth for Older Adults



The Center's Purpose

The <u>National Rural Health Resource Center (The Center)</u> is a nonprofit organization dedicated to sustaining and improving health care in rural communities. As the nation's leading technical assistance and knowledge center in rural health, The Center focuses on five core areas:

- Transition to Value and Population Health
- Collaboration and Partnership
- Performance Improvement
- Health Information Technology
- Workforce



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U.S. Department of Health & Human Services

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Diversity, Equity, Inclusion, & Anti-racism

Building a culture where difference is valued

The Center is committed to DEI and anti-racism. We create an environment that reflects the communities we live in and serve; a place where everyone feels accepted and empowered to be their full, authentic selves; and where everyone belongs.

We understand the impact of and seek to defeat racism and discrimination in ourselves, our workplace, and the world. This guides how we cultivate leaders, build our programs and resources, and deliver our technical assistance.

We are an organization that honors, celebrates, and respects all dimensions of diversity. These principles are central to our mission and to our impact.

National Rural Health Resource Center

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Read more at ruralcenter.org/DEI

Upcoming DRCHSD Webinars

• March 30

National Health Services Corps Webinar

- April 5 <u>Federal Office of Rural Health Policy Webinar Part 1: Welcome to FORHP!</u>
- April 12

Federal Office of Rural Health Policy Webinar Part 2: Federal Grants 101



Telehealth Webinar Series: Telehealth for Older Adults



David Fletcher, MBA

Associate Vice President Center for Telehealth Geisinger



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Tailoring Telemedicine for Older Adults

David Fletcher, MBA Associate VP, Telehealth



Geisinger Health System

We believe the closer to the patient's home care is delivered, the less expensive and more convenient it is



Fully integrated regional healthcare provider



Network of local clinics and regional hospitals



Serves over 3 million patients

Telehealth: Patient Satisfaction – Geisinger Patients

- All patient populations surveyed appreciated the availability of telehealth.
- Patients aged 65–79 consistently rated telehealth higher relative to that same age range nationally than younger patients, with >80% also expressing overall satisfaction.
- Patient >80 years of age reported a >75% overall satisfaction score with telemedicine as well.
- Results debunk the assumption that telehealth is more easily adopted by younger generations.

Survey comments from our patients

"This is a wonderful service. I am disabled and don't drive that far. I feel safer doing the video visits as well."

Neurology Patient

"This appointment was super simple to set up and much easier to go to than if it were in person."

> Gynecology and Obstetric Patient

"I actually liked the video visit—was more relaxed." Gastroenterology Patient

Survey comments from our patients, continued

"I actually loved this option, since COVID started I now work from home, I didn't have to take extra time away from work traveling to and from the visit. It was an awesome alternative."

Neurology Patient

"I felt the doctor was more attentive and allowed more time for discussion and explanation than in in-office visits."

Family Medicine Patient

Survey findings – Central PA



Overall, how would you rate your experiences with the following types of telemedicine services?

Video visit (through a health system's video platform or other platforms such as Zoom, Skype, FaceTime, etc.)

	Total
Total	N=74
Very satisfactory	55%
Somewhat satisfactory	28%
Neither satisfactory nor unsatisfactory	12%
Somewhat unsatisfactory	3%
Very unsatisfactory	1%

How willing would you be to use the following types of telemedicine services in the future?

q7

Video visit (through a health system's video platform or other platforms such as Zoom, Skype, FaceTime, etc.)

	Total
Total	N=245
Very willing	33%
Somewhat willing	26%
Neither willing nor unwilling	15%
Somewhat unwilling	10%
Very unwilling	16%

Survey findings

q9

Which aspects of telemedicine services are most appealing to you?

	Total
Total	N=245
I don't have to travel to/from my appointment	46 %
I don't have to wait in a lobby or waiting room	44%
I don't have to be around people who may be sick	37%
No need to take time off of school or work	20%
The ability to receive a quick response	36%
The ability to access health care from a comfortable/convenient location	37%
In general, it's more convenient than in-person healthcare	36%
I find this type of visit to be less-stressful than an in-person visit	1 9 %
Other, please specify:	1%
N/A – I do not find any aspects of telemedicine services appealing	24%
Count	3.01

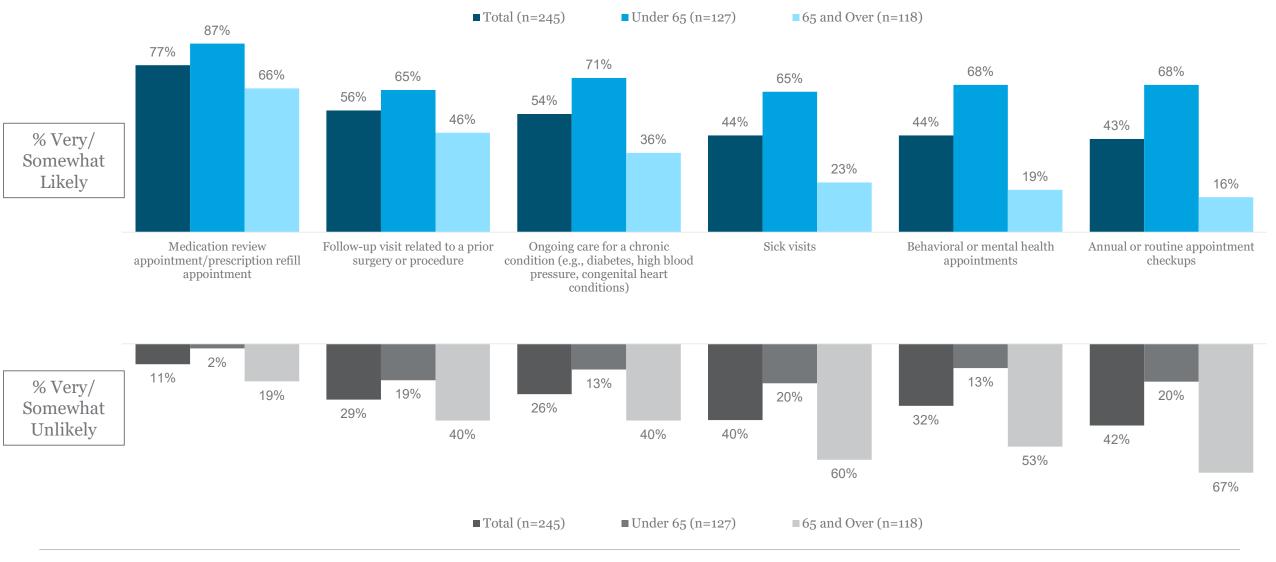


What concerns, if any, do you have about using telemedicine services?

	Total
Total	N=245
Examinations may not be as complete as in-person visits	63%
Concern with security/privacy of the connection	21%
Concern with poor connections or frequent video buffering	29 %
Concern with not always being able to speak with my usual doctor or medical professional	25%
I'm not as likely to create a rapport/relationship with the medical professional	
I would rather speak with someone face to face	45%
I likely will not be able to understand how to use the technology	
Other, please specify:	1%
N/A – I have no concerns about using telemedicine services	1 4 %

Data courtesy of Geisinger Health System

Likelihood of Care via Telemedicine (2 of 2, by Age)



Q8) How likely would you be to use telemedicine services for the following types of care, if needed?

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HEALTH

Geisinger at Home



Initial foray into last mile visits directly into patients' homes, sponsored by health plan to focus on members at high risk of ED utilization and readmission, providing extra support for a typically older population



Physician consults, assisted by nurses or community health assistants (CHA) who receive training from the telehealth team. The physician functions as the primary care provider and generates any necessary referrals.



Technology/equipment – tablet, MiFi, peripherals brought to home by the nurse or CHA.

Telemedicine in the Home–Assisted



Home-based Care Impact Pre-Pandemic



- \$2 million in first year of Geisinger at Home implementation
- Despite being resourceintensive approach

- 34% reduction in hospital visits
- 19% reduction in ED visits

- No need to travel to clinic
- Assistance from nurses and CHA available

Challenge: Create scalable solution for patients, regardless of infrastructure or technical expertise



How do provide local sources for patients throughout our catchment area?

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How will patients be able to start scheduled visits or initiate urgent care from their homes?

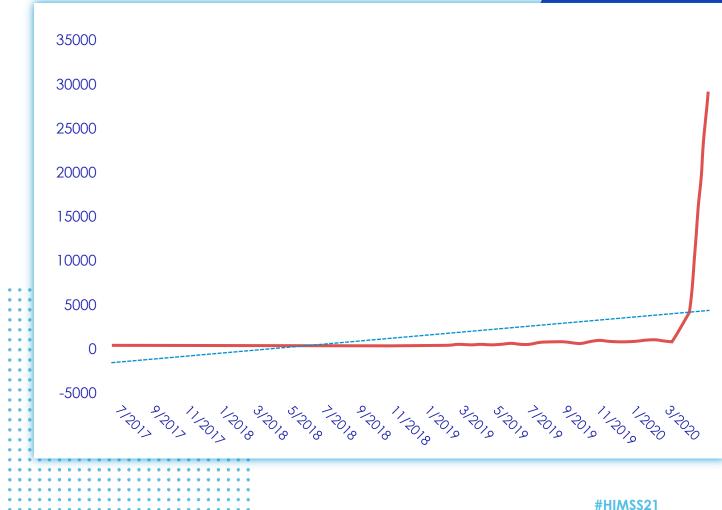
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How can we provide patient support when they are in their homes?

Rapid Expansion of Scheduled Unassisted Visits in Home

- Pandemic drastically increased telemedicine usage
- Scheduled telemedicine visits account for about 12% of outpatient visits with over 90% of those directly to the patient's home

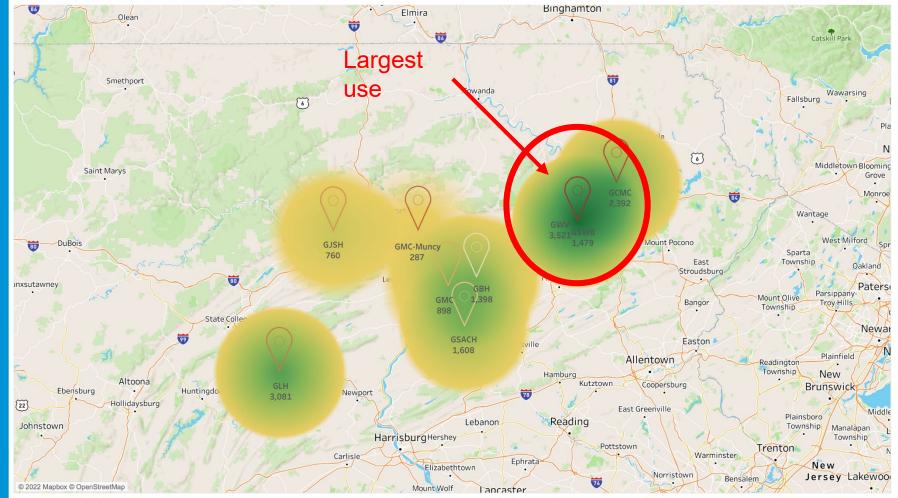
Synchronous visits



- To bring care closer to our patient population, Geisinger built out telemedicine capabilities at hospitals throughout the region
- Regionalization of care improves ease of use and efficient distribution of subspecialty care

Regionalization of Care at Hospitals Throughout Catchment Area

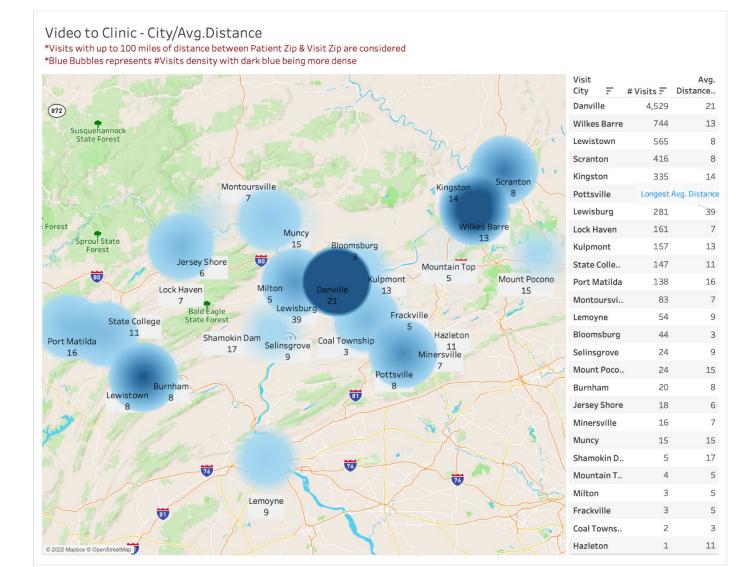
Cart Utilization
*Yellow & Green Bubbles represents #Visits density with green being more dense



Map based on Longitude (generated) and Latitude (generated). For marks layer City: Color shows sum of Grand Total. The marks are labeled by Hospital Location and sum of Grand Total. Details are shown for City and Hospital Location. For mark layer City (2): Color shows details about City.

- The next progression in delivering care closer to patients' homes was establishing telemedicine in their community clinics
- Used for primary care or specialty patients without access to broadband or when peripheral devices are needed
- Local clinic staff room the patients and facilitate the exam until the provider excuses them from room

In Clinic Telemedicine Visit distance from patient home to visit with volumes



Virtual Urgent Care



Al assisted chatbot driven solution for patients to Initiate care from their homes



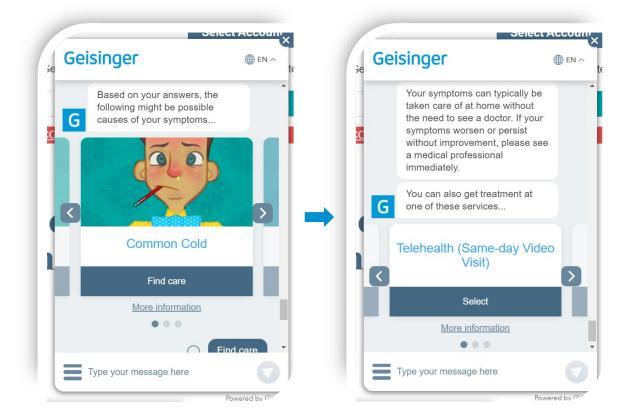
Piloted with existing urgent care and primary care providers



Facilitated by virtual care assistant staff who register the patient, ensure patient is good candidate for virtual urgent care, and schedule with PCP or specialist as necessary

Patient-Initiated Care

- Geisinger Virtual Assistant (chatbot) routes patient to Virtual Urgent Care online waiting room.
- Patient connects with Virtual Care Assistant (VCA) and is offered a video visit with an urgent care provider, or they can be scheduled for a same-day visit with a Community Medicine provider later in the day.
- VCA uses existing capacity at our urgent care sites and open slots on Community Medicine provider schedules.
- Hours of operation are:
 - Monday Friday 9 AM 7 PM
 - Saturday Sunday 8 AM 5 PM



Conclusions

- Survey data indicates that health systems should not make assumptions about who will want to participate in telemedicine visits based on demographic groupings
- Workflows should be kept simple and minimize unnecessary log-ins and downloads
- When working with clinicians to determine visits that are appropriate for telemedicine, it is important to keep patient needs in mind and share rationale with patients as well
- Telemedicine can be used as a tool to decrease health disparities but can create additional barriers to health equity if not thoughtfully implemented



Geisinger

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Questions or Comments



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