

TELEHEALTH

Impact Study: Physician Survey

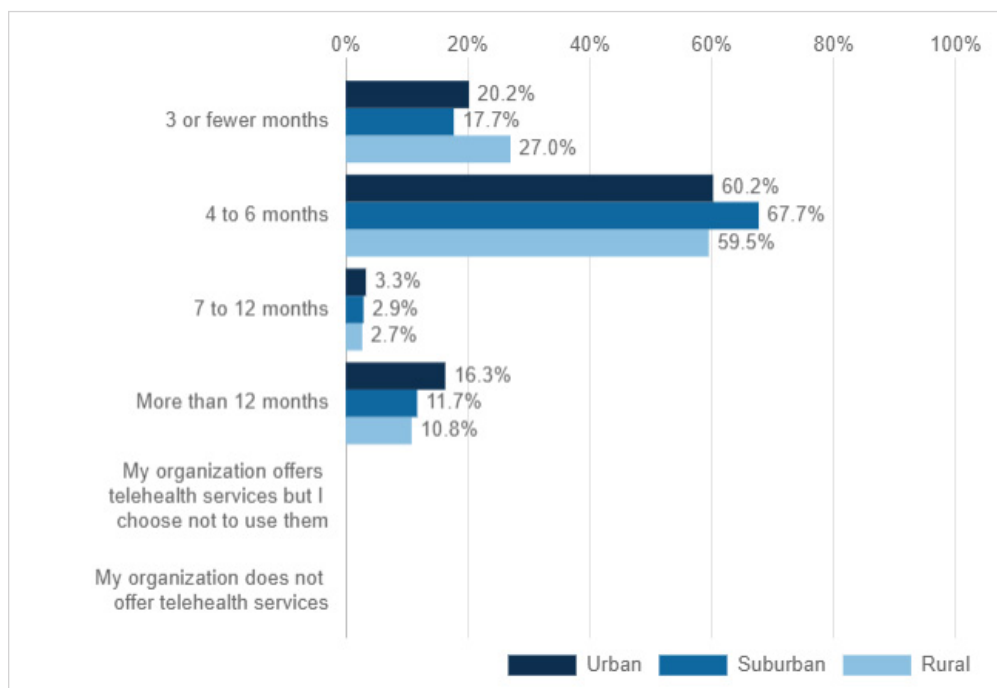


Telehealth use, which surged during the COVID-19 pandemic, has provided a way for physicians to provide care while keeping patients safe in their homes. These services also protected healthcare staff and safeguarded resources such as personal protective equipment (PPE).

To explore clinicians' experiences with telehealth, the COVID-19 Healthcare Coalition recently conducted a survey of 1,594 physicians and other qualified healthcare professionals across the country. The findings of the Telehealth Impact Study highlight the wide expansion of telehealth services in many specialty areas, high levels of satisfaction with the services, and a look at barriers that could affect the continued use and improvement of these services.

SURVEY FINDINGS

“How long have you been using telehealth?”



The survey responses show that telehealth is positively influencing four important dimensions of care:



CLINICAL OUTCOMES

More than **75%** of clinicians responding to the survey indicated that telehealth enabled them to provide quality care in the areas of COVID-19-related care, acute care, chronic disease management, hospital follow-up, care coordination, preventative care, and mental/behavioral health. Additionally, **60%** of clinicians reported that telehealth has improved the health of their patients.

- Of those using telehealth, **80%** are conducting live, interactive video visits with patients and **67.9%** are doing audio-only visits.
- **68%** of respondents are motivated (agree and strongly agree) to increase telehealth use in their practices. The majority would like to continue to offer telehealth for chronic disease management, medical management, care coordination, and preventative care following the pandemic.
- **11%** of respondents said they were using remote patient monitoring technologies with

patients in their homes; the commonly used tools include smartphones (camera), blood pressure cuffs, body weight scales, and pulse oximeters. Currently, data is usually shared verbally over the phone or via email.



PATIENT EXPERIENCE

More than **80%** of respondents indicated that telehealth improved the timeliness of care for their patients. A similar percentage said that their patients have reacted favorably to using telehealth for care.



COST

Respondents indicated that telehealth decreased the costs of care for their patients (**61%** either agreeing or strongly agreeing) and improved the financial health of their practices (**56%** either agreeing or strongly agreeing).



PROFESSIONAL SATISFACTION

A majority of respondents indicated that telehealth has improved the satisfaction of their work (**55%**).

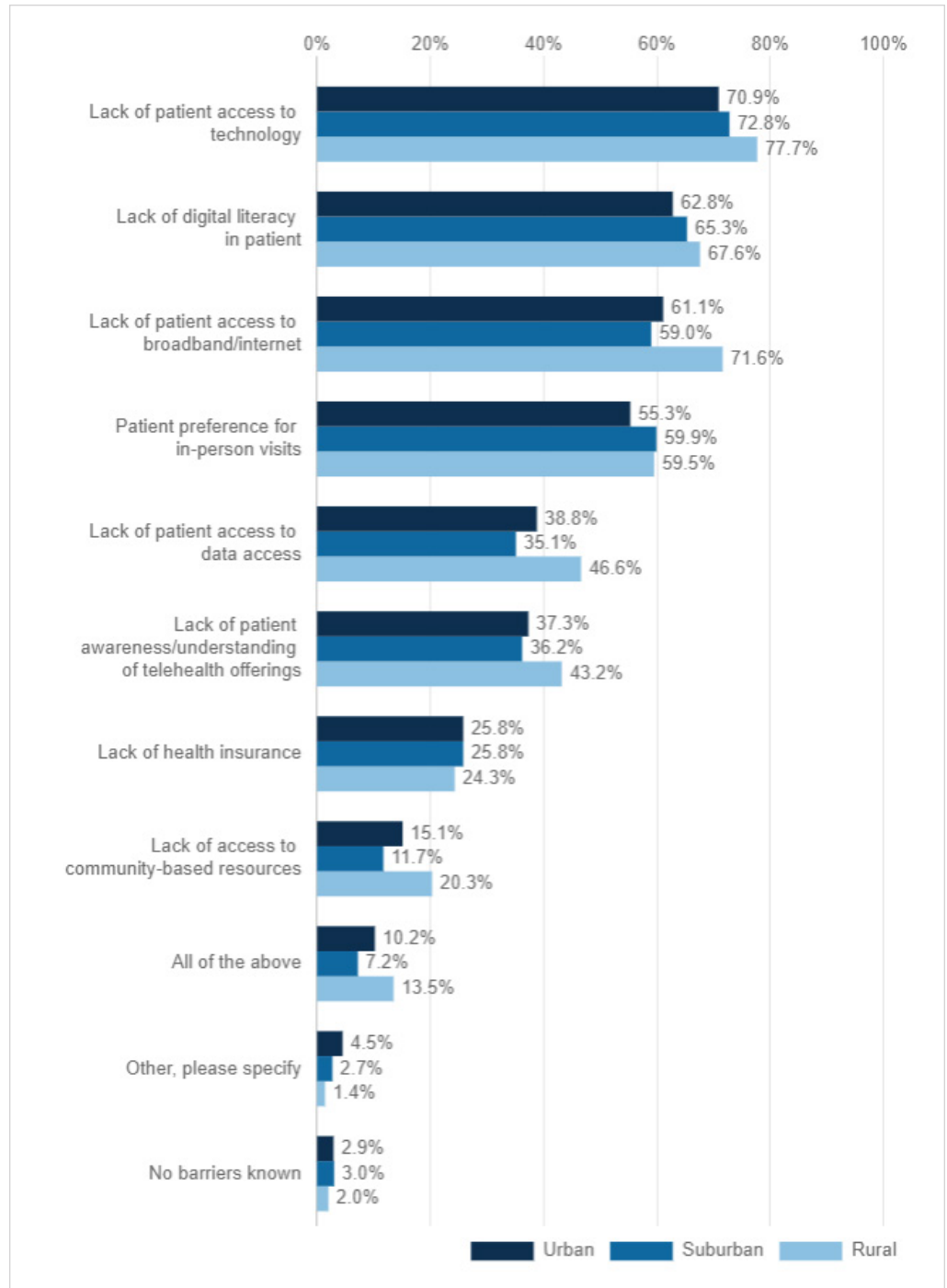
The survey also captured data on the barriers and challenges to telehealth that most concern the respondents. These include:

- **Payment Rates:** 73.3% of clinician respondents indicated that no or low reimbursement will be a major challenge post-COVID if the current expansions do not remain.

As a result of the pandemic, adoption of telehealth in physician practices has increased dramatically and patients are now more likely to be able to access telehealth services within their existing medical home. This is further indicated by 50% of respondents indicating that 75% of patients being seen via telehealth were patients with which there was an existing patient-physician relationship.

- **Technology:** More than 64% of respondents said technology challenges for patients was a barrier to the sustainable use of telehealth. These perceived barriers included lack of access to technology and/or internet/broadband, as well as low digital literacy. Clinicians in suburban, urban, and rural settings all had seen these barriers among their patients, although those in rural areas saw the highest percentages. These findings may help explain the high use rates of audio-only services and the importance of reimbursement changes enabling payments for telephone encounters, which started shortly after the pandemic began.
- **Workflow:** 58% of respondents are not able to currently access their telehealth technology directly from their electronic health records (EHRs). Workflow challenges also include lack of integration with EHRs (30.3%) and other healthcare technologies (27.9%), building telehealth-specific workflows (25.7%), and lack of technical support (25.3%).

“Which of the following, if any, do you perceive as barriers to your patients accessing telehealth? (choose all that apply)”



MOVING FORWARD

The survey results give readers a broad look at the telehealth services provided over the past nine months, what worked well, according to respondents, and what challenges still need to be addressed.

These anticipated barriers present an opportunity to focus on these areas for improvement to optimize telehealth with in-person care.

Note: We are also conducting a similar survey with patients to better understand their experiences with telehealth and perception of benefits and barriers. Results will be published on the website, <https://c19hcc.org/telehealth>.

SURVEY DETAILS

The Telehealth Impact Study survey was designed to evaluate the experiences and attitudes of physicians and other qualified healthcare professionals during the COVID-19 pandemic. Our goal is to create an information base to enable enlightened decision making by medical practices, payers, and government regulators in the months ahead as we create a new normal for clinical care.

The survey was developed by members of the COVID-19 Telehealth Impact Study Work Group of the COVID-19 Healthcare Coalition. The survey was informed by prior work in this area, including surveys developed by the American Medical Association (AMA) and the National Committee on Quality Assurance (NCQA).

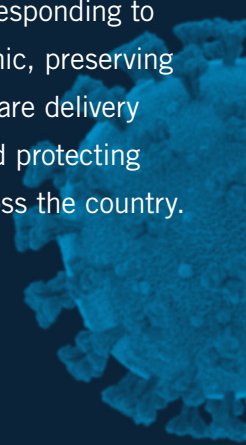
The survey was distributed through the Work Group organizations and other members of the Coalition. The survey was managed by the Mayo Clinic health services research team using Qualitrics Online Survey Platform. The survey was open from July 13 through August 15, 2020. Approximately 13% of respondents were non-physician providers. This analysis includes combined responses.

Clinical subspecialties were collected through structured and open text responses. Subspecialties were combined into relevant specialty groupings and then rolled up into larger specialty categories to facilitate data aggregation and display.

Researchers and data scientists from the Mayo Clinic and MITRE collaborated to interpret the data and create reports.

Please visit the Coalition website to see the full, interactive report at <https://c19hcc.org/telehealth>. If you have questions, please contact telehealthimpact@mitre.org.

The COVID-19 Healthcare Coalition includes more than 1,000 private organizations, including healthcare systems, universities, technology companies, medical suppliers, professional associations, and research organizations. All members are committed to quickly responding to the pandemic, preserving the healthcare delivery system, and protecting people across the country.



The COVID-19 Healthcare Coalition Telehealth Workgroup includes: American Medical Association (AMA), American Telemedicine Association (ATA), Digital Medical Society (DiMe), Massachusetts Health Quality Partners, MassChallenge Health Tech, Mayo Clinic, and MITRE Corporation. The AMA, while a part of the Coalition Telehealth Work Group, is not a formal member of the COVID-19 Healthcare Coalition.