TELEHEALTH IN THE NORTHEAST



FIELD REPORT: SAMPLE STAKEHOLDER CHALLENGES, SOLUTIONS, & LESSONS LEARNED

NORTHEAST TELEHEALTH RESOURCE CENTER (GRANT GA5RH37459)

MONTHLY REPORT: JANUARY, 2021

QUESTIONS? PLEASE CONTACT DANIELLE LOUDER, PROGRAM DIRECTOR (DLOUDER@MCD.ORG)

CARE TRANSFORMATION COLLABORARTIVE RHODE ISLAND AND NETRC REACH PHASE 3 ON A STATE-WIDE TELEHEALTH PROJECT

Care Transformation Collaborative of Rhode Island (CTC-RI) is a non-profit primary care improvement organization originally convened by the Rhode Island Office of the Health Insurance Commissioner and the Executive Office of Health and Human Services. The CTC-RI network includes 128 primary care practice sites and over 800 providers, including all FQHC's in RI, and reaches over 690,000 Rhode Island residents. CTC-RI's projects include collaborations with health plans to provide direct support for practices, such as supporting the adoption of the Patient-Centered Medical Home.

In July 2020, CTC-RI launched a three-phase project funded through UnitedHealthcare and Cares Act Funding. This included a statewide telehealth needs assessment with responses from practices and patients, a telehealth webinar series, and funding for 21 practices (including adult, pediatric, and family practices) to participate in an 12-month learning collaborative (launched) in December 2020 and will provide infastructure payments (\$15,000) and incentive payment (\$5,000 - \$7,000) for each participating practices.

CTC-RI Telehealth Project Goals

- Provide primary care practices with best practice sharing opportunities to support effective, safe and efficient telehealth services looking at practice/staff/patient experiences, clinical outcomes, access to care and utilization;
- 2. Help inform RI health care policy on primary care practice/patient telehealth needs

Having worked with NETRC since their initial interaction in 2019 when CTC-RI reached out through our website's contact form, CTC-RI contacted NETRC and asked that the team join the project as core members of the Project Steering Committee (full list of committee members can be accessed HERE) to support all phases of the project. The

NETRC team participates in weekly planning meetings and provides direct and indirect technical assistance to all participating primary care sites. We have supported CTC-RI in the developing, disseminating, and analyzing the statewide needs assessment, guided and hosted statewide webinars, and are active subject matter experts in the ongoing learning collaborative. Of note, the NETRC team facilitated and moderated CTC-RI's first webinar on "Telehealth Sustainability Strategies — Billing and Coding," co-developed a follow-up FAQ document, and recently presented "Telehealth Technology Options". NETRC has also drafted a RI Primary Care

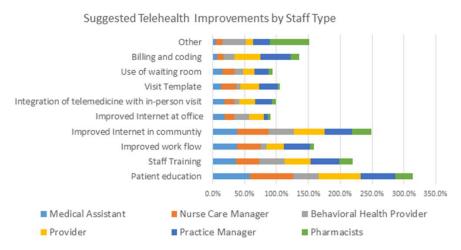
"Reid and Andrew from the NETRC have been tremendous resources in helping primary care practices in Rhode Island effectively use telehealth to improve access to care. They have helped us with planning webinars and a learning collaborative aimed to help primary care practices use technology to improve care for patients with chronic conditions."

Debra Hurwitz, Executive Director, CTC-RI

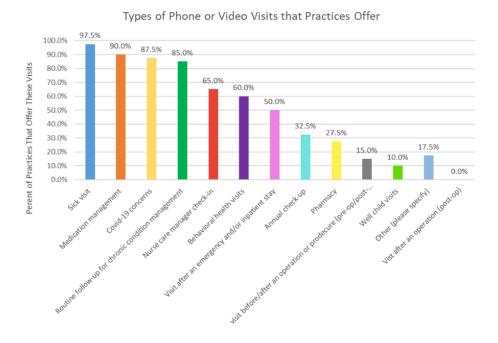
<u>Telehealth Toolkit</u> to serve the specific needs of this project and CTC-RI is promoting NETRC as a key resource.

The first phase of CTC-RI's project was a statewise Practice Assessment Survey designed to be completed using a team approach across each practice. **47 practices completed the assessment in 2020, including 35 adult medicine and 12 pediatric practices**. The survey data also included responses from **over 900 patients at the participating health sites**, of which roughly 500 patients had a telehealth visit and roughly 400 had not.

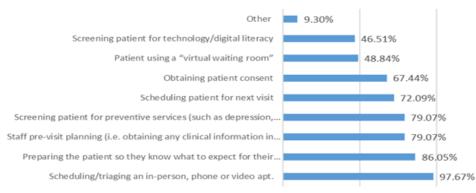
Select Phase I Needs Assessment Highlights:



The graph above overlays ranking method responses to "Suggsted Telehealth improvement types" from multiple provider perspectives, using Phase 1 survey data.







Quote from Patient Survey:
"Actually, I thought this was the best
way to speak to my provider as I did
not know what was wrong with me
and I was worried I would infect
others...I could not have driven to
(my doctor's office) so I would have
ended up in the ER or an Urgent Care
Center."

Examples of Practice Insights:

Over 90% began using telehealth in March 2020; some top perceived benefits of telehealth included: improved work experience, increased patient access, reduction in no-shows, staff ability to work from home, and the ability to bill for on-call services.

Examples of Patient Insights:

Top perceived barriers included lack of technical understanding or access to devices. Some patients didn't know how to use video or phone for a medical visit; they may have lacked a computer/tablet for video visits, or lacked reliable internet or phone service. However, of those patients who had telehealth visits, the majority reported that the phone or video visit was able to address the health issue that was bothering them.

For more: Brown University Alpert Medical School Center for Digital Health highlighted results of Phase 1 efforts in a Call to Action webinar available here.

