

TELEHEALTH IN THE NORTHEAST

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

NORTHEAST TELEHEALTH RESOURCE CENTER (GRANT GA5RH37459)

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ADAPTATION OF MATERNAL FETAL MEDICINE CARE VIA TELEHEALTH: PRE-TO-POST COVID-19

Vermont has long been an innovator in telehealth, as the state's policy, demographics, broadband, and rurality combined to allow for favorable opportunities for telehealth since the 1990's. The Northeast Telehealth Resource Center (NETRC) team is proud to partner with both the [University of Vermont Health Network \(UVMHN\)](#) and the [University of Vermont Medical Center \(UVMHC\)](#) on our NETRC work, and one benefit of our partnership is the opportunity to witness their impressive efforts regarding telehealth services. Despite having a very successful range of telehealth programs for many years, UVMHN was like many health systems when COVID-19 first started to spread, in a place of needing to pivot towards connecting to patients in their home and other non-healthcare facility settings.

For over 30 years Dr. Marjorie Meyer, a Burlington, Vermont based Maternal Fetal Medicine specialist has provided quality care to high risk, expectant mothers. With a team of five doctors and an observant, open minded staff, Dr. Meyer noticed key obstacles to care for some of her patients. The time and costs associated with traveling great distances were major barriers for patients. The University of Vermont Health Network is a vast health system that has partner hospitals in both upstate New York and throughout the state of Vermont. Often times, patients who are in need of specialty care are required to travel great distances for that care. Simply put, the travel time dwarfed the actual length of appointment time.

In partnership with Dr. Daniel Laury of Alice Hyde Medical Center (AHMC) located in Malone, New York, Dr. Meyer developed a Maternal Fetal Medicine Telehealth program that provided a convenient alternative to in person visits at the University of Vermont Medical Center. Video visits have saved on travel costs, work and family time lost, and the headaches that often come with planning of attending medical appointments. Dr. Meyer has seen a dramatic increase in patient access.

“Telehealth has helped tremendously for our high risk OB patients, we can connect more frequently and monitor their pregnancies much more closely than when they had to travel”

Dr. Marjorie Meyer- UVMHN

On average, a Franklin county (NY) patient traveled close to five hours and 186 miles round trip to attend an appointment that lasted just over 30 minutes. 36% of patients either cancelled or “no showed” to an appointment due to the difficulties that travel posed which affected the patient’s care and blocked provider schedules to see other patients in need. Socioeconomic factors play a large part in patients being unable to attend their regularly scheduled appointments. Long traveling distances, lack of child support, limited transportation and work commitments are all difficulties that a patient must navigate when planning their medical care. Some patients even needed to book hotels due to distances traveled and often inclement weather that the winter months in the northeast brings.

By offering video visits as an option for patients it has increased patient appointment attendance rates and both patient and provider satisfaction, while improving patient continuity of care. In March as the COVID-19 pandemic began the program became a vital piece in ensuring the health and safety of expectant mothers and kept a vulnerable population out of busy waiting rooms.

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