

Connecting to Community

Digital Health Innovations and Opportunities for Washington's Community Health Centers



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Introduction

COVID-19 has dramatically altered the trajectory of telehealth adoption and digital innovation for providers. Telehealth includes the use of telecommunication technologies that allow remote health services, education, consults, and communication between providers and patients. The use of such technologies aims to facilitate access to health care for individuals that otherwise might not have the chance to see a doctor due to public health risks, geographic limitations, linguistic barriers, economic hardship, or limited access to transportation.¹

For community health centers (CHC), the pandemic necessitated the rapid adoption of new processes and technologies to meet the pressing demand for physical, behavioral health, dental, and other telehealth services that couldn't be provided in person. By June 2020, Washington CHCs saw an estimated 57% of in-person medical visits and 67% of in-person behavioral health visits being replaced by telehealth visits. Those figures mirror broader trends in the health care sector, as providers and patients increasingly come to rely on digital health solutions to furnish and receive care.

There are a myriad of telehealth use cases being developed by providers, supporting different models of care and offering different features for patients and providers. Moreover, there are significant barriers that patients and providers face in accessing and furnishing telehealth services. These challenges are not going away any time soon, but CHCs can embrace the challenge of improving their digital care models to pursue the Quadruple Aim and position themselves to be competitive against new entrants that leverage sophisticated digital platforms.

Health centers face an array of competing demands as they seek to adopt new technologies to improve patient care, lower costs, and respond to a rapidly changing market. This report was developed to highlight key trends in health care digital innovation, and foster new insights into opportunities and barriers in digital innovation.



Market Trends

Digital health includes a wide variety of tools that offer both patients and providers the opportunity to engage remotely in data collection and access, telehealth visits, monitoring and management, clinical decision support, and more.ⁱⁱⁱ These modalities include:^{iv}



- Remote monitoring for efficiency
- Remote monitoring and management for improved care
- Clinical decision support
- · Patient engagement
- Telehealth visits
- Point of care/workflow enhancement
- · Consumer access to clinical data

These tools can be deployed to monitor symptoms continuously, keep teams updated, and empower and engage patients in self-managing their health. Rural populations, and those who lack mobility, work flexibility, or transportation can increase their access to care through features such as online pharmacies, same-day video visits, and 24/7 service. And these tools can hypothetically help address barriers to care faced by older patients, or those facing unique barriers to care related to income, race, ethnicity, or socioeconomic status.

Leveraging these opportunities in digital health holds the potential to improve patient satisfaction, provide workforce flexibility, improve health outcomes, and lower healthcare costs. Yet the long-term goal of reducing health disparities and improving population health are still far from certain, as early results are mixed on how telehealth impacts existing health disparities.

Market Share

The telehealth market is growing at rapidly in the United States, and globally. The global telehealth market is expected to grow from \$50B in 2019 to \$194B in 2023, an annual growth rate of 40%. In the United States in 2019, 11% of patients used telehealth, compared to 56% in April 2020. In Study found that 83% of patients anticipated using telehealth in the future.

During the COVID-19 pandemic, telehealth has grown significantly as a share of overall health services. An analysis of commercial and Medicare

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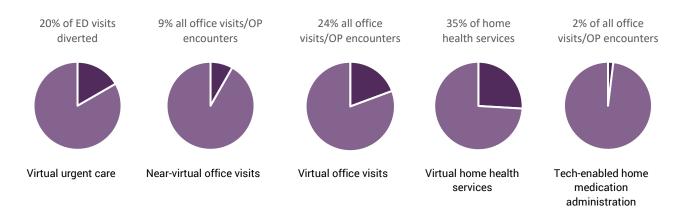
Advantage patients found that 30.1% of all visits were being provided via telehealth modalities in the post-COVID-19 period, amounting to a 23-fold increase. Nearly 75% of patients accessed their first telehealth visit during COVID-19, and three-quarters of those patients reported positive experiences: 41% had wellness visits, 30% had a visit for chronic disease management, and fewer used telehealth for acute care (20%) or to check on COVID-19 symptoms (14%).



Providers are also changing their views on telehealth. A 2020 physician survey found that 57% of providers view telehealth more favorably than they did before the pandemic, and 64% are more comfortable using it.xi All of these trends point to growing importance and acceptance of telehealth as health service delivery modality.

The trend lines are clear, pointing to growing acceptance and comfort of telehealth and associated features, with major market shifts on the horizon.

Out of the patients that have not used telehealth yet, 58% of those said that it was because they hadn't yet experienced a health care issue that warranted a telehealth visit, while another 32% were concerned about the cost of telehealth services and 18% were worried about their ability to use the technology.xii The same analysis found that 76% of patients are now interested in using telehealth in the future. Finally, one analysis estimates that approximately \$250B of Medicare, Medicaid, and commercial outpatient and home health care spend could be "virtualized," or 20% of those market segments.xiii The trend lines are clear, pointing to growing acceptance and comfort of telehealth and associated features, with major market shifts on the horizon.



These changes hold the potential to unlock several benefits across the health care system, including improved access to care and increased health equity, improved patient outcomes and superior patient experience, and a more efficient health care system. Telehealth in particular contains the building blocks for a more equitable and accessible health care for people across the socioeconomic spectrum, and particularly for patients in low-income and underserved communities, xiv if the cost efficiencies and geographic flexibility of the telehealth model are able to overcome longstanding health disparities.

Yet current patterns show that greater health equity is not a foregone conclusion with telehealth telehealth use was positively associated with higher incomes and percent white residents in a county.xv These early outcomes show that, much like the rest of the health care system, telehealth access and use is still patterned along socioeconomic and racial lines.



Patient Outcomes & Satisfaction

Health centers can increase access to a broad set of patients by investing in digital health innovations. Rural communities can see an hour-long trip turn into a 20-minute visit, elderly patients and those with limited mobility can access care without leaving their home, and workers with inflexible schedules and no paid time off can avoid taking a pay cut to see the doctor.

For chronic disease management, digital technologies allow patients to review their data and actively participate in their own healthcare. Patients can be empowered to collaborate in shared decision making through mobile apps featuring educational resources, decision aids, symptom trackers, and patient feedback tools. *vi A retrospective study of patient satisfaction in video vs. inperson visits found that satisfaction with video visits is high, comparing favorably with traditional in-person visits. *vii

Patient satisfaction with video visits compares favorably with traditional in-person visits.

Remote monitoring of chronic conditions is an ideal field for improving outcomes through digital health. In one health system study, hypertension medication compliance rose by 99%, dropping systolic blood pressure 20 points on average. Participating diabetes

patients improved A1C control by a full point. The health system also reported 12% higher patient satisfaction rates. *viii A systematic review showed that digital health approaches were associated with improvement in two medication adherence measures (medication possession ratio [MPR] and portion of days covered [PDC]) for diabetes, hypertension, and dyslipidemia.*xix

Providers also find benefit in virtual care. 85% of physicians see digital health solutions as giving an advantage to their ability to care for patients. When asked what attracts them to digital health tools, physicians reported that they look to those which improve efficiency, patient safety, and diagnostic ability. Additionally, they look to digital health solutions to reduce stress and burn-out and improve the patient-provider relationship.*x

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In addition to growing patient comfort with telehealth, there are also opportunities to improve the quality of care by utilizing telehealth platforms. Research indicates that telehealth solutions deployed for populations with chronic disease can improve total cost of care by 2-3%.xxi The evidence specifically points to improved patient outcomes for the following activities: remote home monitoring for patients with chronic conditions, communicating and counseling patients with chronic conditions, and for providing psychotherapy as part of behavioral health treatment.xxii The most consistent benefit has been found when telehealth is used for communication and counseling or remote monitoring of patients with chronic conditions such as cardiovascular and respiratory disease, with improvements in mortality, quality of life, and hospital admission rates. And perhaps most importantly, patients are equally if not more satisfied with telehealth than in-person care.xxiii



Yet there still are opportunities to improve their virtual post-discharge and follow-up plans through telehealth. Fewer than half of survey respondents felt they understood the next steps in their care after a telehealth visit, specifically saying they don't know how they could access virtual or telehealth care again in the future. *xxiv*

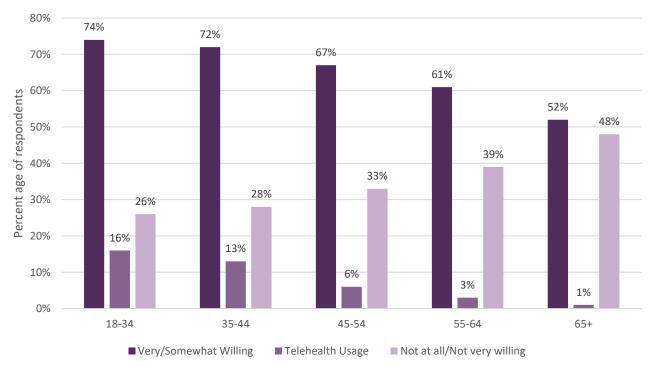
Consumer Demand

As telehealth service options expand, there is growing evidence that patients are increasingly comfortable with key features of telehealth. Patients believe that telehealth services can meet their health care needs as effectively as

1 in 5 patients would change doctors to move from one who did not offer telehealth services to one who did.

in-person visits. And younger patients are more open to key features of a comprehensive telehealth platform: 54% of patients in a 2020 survey indicated they prefer online appointment scheduling. This was true for 72% of GenXers, 64% of Millennials, but only 38% of Baby Boomers.** A 2017 study found that in one in five patients would change doctors to move from one who didn't offer telehealth services to one who did.**xvi According to a report by Statista, between 61-74% of adults are very or somewhat willing to use telehealth. Rates by age group are shown below.**xvii

Willingness to use telehealth amoung U.S. adults



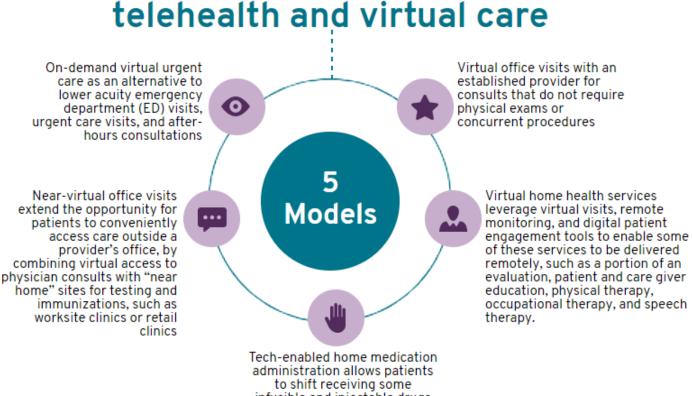


Services & Features

Patients believe that telehealth services can usually meet their health care needs as effectively as in-person visits. In an American Well survey, patients said that telehealth visits resolved their concerns 85% of the time, compared to 64% in person. xxviii

There are countless new digital-base care models, technologies and vendors coming out on the market every day promising the next big digital revolution in patient care and offering new telehealth features. Empirically, we know that many of them will fail to live up to the hype. But there are some common themes emerging in digital care models, showing common approaches to leveraging digital platforms to complement, and even in some cases replace, the provision of services that previously occurred in person. Below we highlight some common models for telehealth services and virtual care.

5 Models for telehealth and virtual care



infusible and injectable drugs from the clinic to the home.



These care models often combine a convenience factor for the patient with the potential to improve patient outcomes and lower costs. And while these models certainly won't work for every specialty or every provider organization, the more prevalent they become, the more likely that patients may come to expect an easier, more convenient and digitally enabled care experience. This trend will only grow as the broader population becomes more proficient and comfortable with using digital services.

Services and features currently offered by digital health solutions include:



- Online appointment booking
- Online visits and consulting
- Pharmaceutical retail, medication reviews, and counseling
- Health insurance
- Online-to-offline service
- In-house doctors & external provider network
- 24/7 access to providers
- Same-day appointments
- Physician texting
- Consumer-owned and accessible health records
- Cost transparency and digital payment

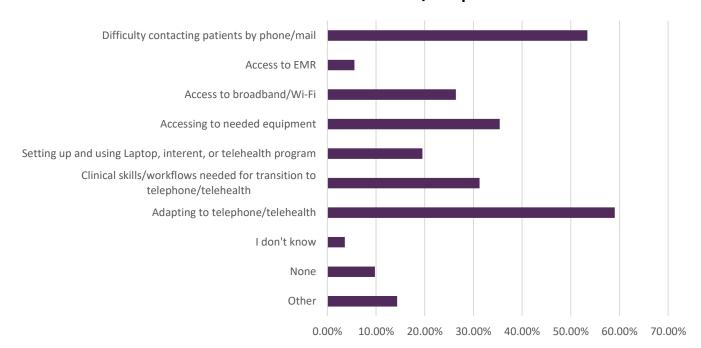
Barriers to Digital Innovation

Barriers to digital innovation are present both for providers seeking to invest in new people, processes, and technologies, as well as for patients seeking to access digital services. Of course, barriers within either group can prevent the provision of telehealth services and must be navigated. Some of the issues experienced by both groups are found within the basic blocking and tackling of telehealth, and require investments in information technology and staff—and above all else, time—to overcome common barriers such as difficulty contacting the patient or provider to initiate a telehealth service. Other issues related to broadband infrastructure and equipment are patterned along broader socioeconomic disparities and are not easily fixed. Ongoing pilot programs, some of them at health centers, are studying the effect of covering provider and patient telecommunication infrastructure and device expenses on telehealth access and outcomes.*

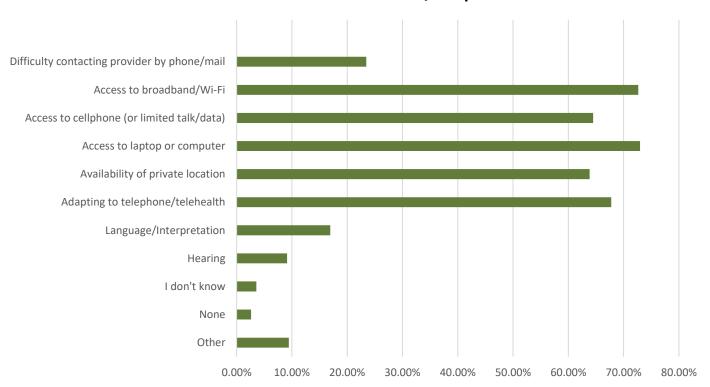
Even with strong organizational commitment to and investment in digital innovations, providers, staff, and patients must be prepared to utilize these services effectively. A 2020 report from the University of Washington's Behavioral Health Institute noted that a leading barrier to successful provision of telehealth services was clinicians' ability to adapt to new modes of care. But there are many reasons why both patients and providers sometimes struggle with using telehealth, as shown below.



Clinician Barriers to Telehealth/Telephone



Patient Barriers to Telehealth/Telephone



UW Behavioral Health Institute, 2020.xxx



Connectivity remains a central challenge to the expansion of digital services. A 2019 Broadband Deployment Report found that only 69% of rural areas had access to high-speed broadband internet that met the minimum benchmark set by the Federal Communications Commission (FCC). That study found that only 71% had access to smartphones, compared to 83% of suburban and urban residents.xxxi A survey conducted by the Behavioral Health Institute in 2020 across all Accountable Communities of Health in Washington state shows that 71% of the patients surveyed reported broadband access as a barrier for telehealth.xxxii Even with nascent policy efforts underway to build out telecommunications infrastructure, many patients will continue to lack reliable internet access or lack access to smartphones.

Other barriers that CHCs face in implementing digital solutions are the sometimes steep investments required to implement new telehealth services. Along with the upfront investment in infrastructure and technology, CHCs committing to digital health innovations must also take into account needed investment in education and training to prepare patients and providers to excel in new realms of healthcare. Inadequate attention to human readiness, including aspects from patient experience to staff workflows, can stifle the potential of digital services to increase both patient and staff satisfaction.

While there are countless avenues to improve outcomes and patient satisfaction, reduce the cost of care, and drive gains in health equity, there are inherent limitations to telehealth that must be acknowledged. There are new and unique risks of compromising patient information, and the evolution of the health care delivery system into one heavily reliant on telehealth modalities poses the very real risk of exacerbating health disparities along economic and racial lines that already exist.xxxiii

Opportunities for CHCs

Innovations

Telehealth modalities that focus on provider-to-provider connection, such as remote consultations, can address barriers faced by CHCs. Workforce shortages can be mitigated through increased specialist access and capacity, and care transitions can be strengthened between referring providers. As digital health reduces utilization costs and enables population health initiatives, these tools and services will be critical in supporting value-based care models.xxxiv

There are specific types of clinical services that have seen dramatic increases in the percent of overall physicians using telehealth to provide services. During COVID-19, 49% of physicians are conducting follow-up visits using telehealth, 27% are doing post-op consults using telehealth, and 26% are seeing new patients without a physical exam. XXXV While those figures are predicted to drop slightly as the pandemic eases, there are clear indications that a wider breadth of clinical services will be furnished via digital modalities.

Efficiencies in utilizing care teams can be maximized with telehealth through opportunities such as remote supervision and training. For example, parents and caregivers of children with Autism



Spectrum Disorder can receive coaching to implement behavior analytic teaching strategies and functional assessments via remote training from clinicians using two-way audio and video feed. Literature suggests that remote supervision of behavioral health trainees is a valued experience, with reported quality of tele-supervision matching in-person supervision. Meanwhile, trainees appreciated exposure to new populations and platforms, and were able to experience the patient's perspective on the receiving end of video telehealth services. XXXXVIII

CHC Excellence

Analysis from the Institute for Healthcare Improvement suggests that digital health developers have failed to strive toward all components of the Triple (now Quadruple) Aim: improve patient experience; improve population health; and decrease per capita cost of care, and health equity.**xxviii As patient-centered organizations, CHCs are well-informed of the Quadruple Aim's importance and are uniquely situated to advance these components in digital health.

Strong relationships with communities may give CHCs an advantage over their competitors without longstanding community ties. Building an initial patient-provider relationship remains challenging in telehealth, and CHCs can offer a strong foundation of trust to their community members that spans from traditional care into the digital world. As community-based organizations, CHCs can offer continual care from virtual to physical locations as well as comprehensive care with connections to local services.

CHCs have a decades-long mission in achieving health equity. Demographics of telehealth users skew toward younger, more urban, more white,

CHCs can be pathfinders toward health equity in the digital world.

and more wealthy patients. As health centers continue their mission in the drive toward digital health, they may be able to access an underserved market in the virtual space. With a focus on decreasing health disparities, CHCs could champion an overlooked potential of digital health. CHCs have been visionary from their beginnings in brink-and-mortar clinics, and they could also be pathfinders toward health equity in the digital world.

Rising to the Competitive Challenge

Tales of "Big Tech" coming to steal market share are not new, and yet despite the resources and technical acumen of tech companies, provider systems have largely maintained market segment share across commercial and publicly financed markets. But the growth of telehealth, accelerated by the pandemic, is changing consumer preferences and expectations, and a future health care system that's heavily reliant on digital interactions does set the stage for new entrants to threaten traditional business models, especially when those models feature low fixed cost structures that give them pricing power.

CHCs serve a much higher percentage of Medicaid and uninsured/self-pay patients, and serve a significantly lower percentage of privately insured patients. Historically, publicly financed health care services may have been slower to adopt new technologies or change business models, but the advantages of digital innovation are even more pronounced for low-income patients.



The advantages of easily accessible digital health services to low-income and low-SES patients are clear, as they can access services without having to confront many of the typical barriers to care they face, such as the cost of services, and lack of child care or adequate transportation.^{xl} And given the projected growth in Medicaid markets nationally—Medicaid is projected to become a \$1 trillion program covering 82 million beneficiaries by 2026^{xli}—new competition from digitally based provider care models will only grow.

It's clear there will be additional competition among providers in publicly financed health care markets. But what can providers do to prepare for that competition?**



- Accelerate development of an overall consumer-integrated "front door"
- Segment the patient populations (for example, with specific chronic disease) and specialties
- Build the capabilities and incentives of the provider workforce to support virtual care (e.g., workflow design, centralized scheduling, and continuing education)
- Measure the value of virtual care by quantifying clinical outcomes
- Consider strategies and rationale to go beyond "telehealth"/clinic visit replacement

Conclusion

The trend lines are clear: telehealth will represent a growing segment of the health care services market, as both patients and providers become more accustomed to its benefits. The American Telemedicine Association predicts that in the long-term, 20-30% of all patient visits will be virtual. *liii Telehealth use cases support a variety of care models, services, and features, and the momentum behind telehealth adoption and innovation will continue as providers and patients increasingly come to rely on digital solutions. Opportunities in workforce and patient engagement expand as patients are empowered to collaborate in their own care, and providers find value in virtual care's ability to improve efficiency and reduce burn-out.

Health centers have an opportunity to leverage their strong patient relationships, deep community ties, and commitment to health equity to provide a unique digital health experience — one that increases access and quality for underserved populations, maintains connection to community, and mirrors the patient-centeredness of their brick-and-mortar clinics. If CHCs can embrace the challenge of improving digital care models in pursuit of the Quadruple Aim, they can position themselves as competitors and leaders in this emerging sector.



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