PARTICIPANT TELEHEALTH ASSESSMENT RESULTS

TELEHEALTH ASSESSMENT AT A GLANCE

- 58 respondents
- Predominantly BH/SUD, FHQCs and non-FQHC community health centers.

Practice Type	N	%
Behavioral health/SUD practice	32	55%
FQHC	8	14%
Community health center (other than FQHC, RHC)	8	14%
Primary care	6	10%
Government/BH Authority	6	10%
Residential treatment	6	10%
School based health center	4	7%
Multi-specialty practice including primary care	2	3%
Specialty practice	2	3%
Public health clinic	2	3%
Mental Health Clubhouse	2	3%
Private practice	1	2%
Home Health	1	2%
Hospital Association	1	2%

EXPERIENCE PROVIDING/RECEIVING TELEHEALTH

- Majority have experience with virtual visits and texting/direct messaging to patients
- Patient portal is also common (at least one-third), but not used by the majority

	Yes		Partial		No	
	N	%	N	%	N	%
Virtual video visits (live, interactive)	46	79%	0	0%	12	21%
Texting or direct messaging to patients	32	55%	8	14%	18	31%
Patient Portal	17	29%	6	10%	35	60%
eConsult referral platform for specialty consultations	11	19%	6	10%	41	71%
Remote patient monitoring such as scales, continuous glucose monitoring or BP monitoring	8	14%	5	9%	45	78%
Project ECHO or other specialty telehealth consultation service	8	14%	7	12%	43	74%
Store and forward to specialists such as teledermatology	1	2%	6	10%	51	88%

BENEFITS/SUCCESSES OF TELEHEALTH PROGRAM

HMA ICTA INTEGRATED CARE TECHNICAL ASSISTANCE
MSDC MEDICAL SOCIETY OF THE DISTRICT OF COLUMBIA

- Single biggest benefit: improved BH access
- All other options were viewed as benefits of their telehealth program by at least two-thirds of assessment participants, except for improved access to primary care and improved access to different providers across sites

	Biggest benefit		Benefit (but not biggest)		Not a benefit	
	N	%	N	%	N	%
Improved access to behavioral health	34	59%	18	31%	6	10%
Reduced no show rate for appointments	17	29%	24	41%	17	29%
Improved patient follow up	15	26%	29	50%	14	24%
Improved appointment scheduling process	13	22%	26	45%	19	33%
Improved provider satisfaction	13	22%	32	55%	13	22%
Improved patient satisfaction	11	19%	32	55%	15	26%
Improved access to primary care	10	17%	23	40%	25	43%
Improved access to different providers across sites	8	14%	30	52%	20	34%

BARRIERS TO TELEHEALTH IMPLEMENTATION/EXPANSION

HMA ICTA INTEGRATED CARE TECHNICAL ASSISTANCE
MSDC MEDICAL SOCIETY OF THE DISTRICT OF COLUMBIA

- Single biggest barrier: patient access to need capabilities
- Digital literacy/comfort level of patients was also a reported barrier of their telehealth program by at least two-thirds of assessment participants
- Less than half of assessment participants thought that lack of payment/coverage policies, scheduling, digital literacy of providers, or cost of equipment/software were barriers

	Biggest barrier		Barrier (but not biggest)		Not a barrier	
	N	%	N	%	N	%
Patient access to needed capabilities (smartphone, internet access, etc)	29	50%	21	36%	8	14%
Digital literacy/telehealth comfort level of patients	16	28%	30	52%	12	21%
Documentation barriers	7	12%	22	38%	29	50%
Concerns about privacy	7	12%	24	41%	27	47%
Digital literacy/telehealth comfort level of providers	5	9%	23	40%	30	52%
Lack of payment or coverage policies	5	9%	15	26%	38	66%
Cost of equipment and software	4	7%	24	41%	30	52%
Scheduling barriers	3	5%	17	29%	38	66%