

Leveraging Telehealth to Advance Health Equity for People with Disabilities in

GEORGIA

The National Center for Primary Care (NCPC) at Morehouse School of Medicine is examining the adoption and use of telehealth by people with disabilities in Georgia to understand whether and to what extent telehealth has improved access to and receipt of quality health care services. More than 100 individuals in Georgia completed the survey, highlighting the challenges and opportunities they have experienced using telehealth before and during the COVID-19 pandemic.

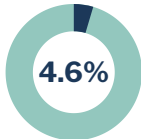


Survey Participant Demographics

4% Asian | 29% Black | 64% White



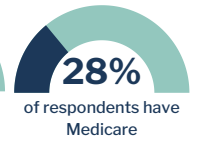
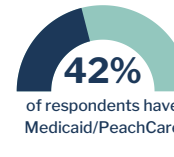
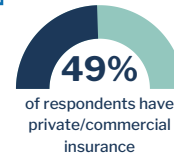
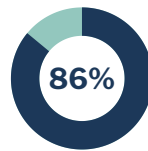
Hispanic Ethnicity



Currently Employed



Have Health Insurance



Sex Assigned at Birth

52.3% female | 47.7% male

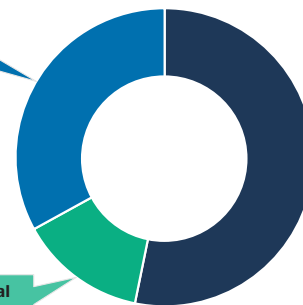


Respondent Location

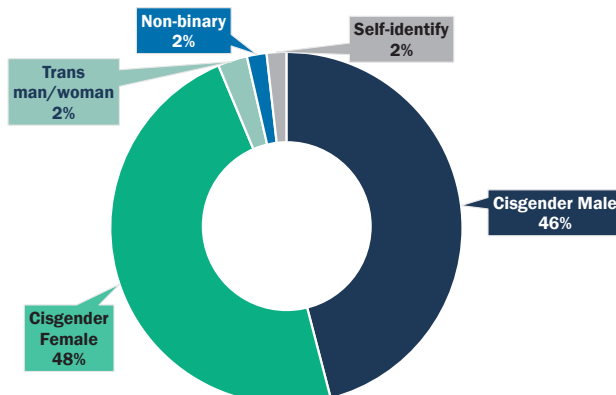
Suburban 33%

Urban (City) 53%

Rural (Country) 14%



Current Gender Identity

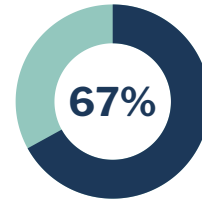
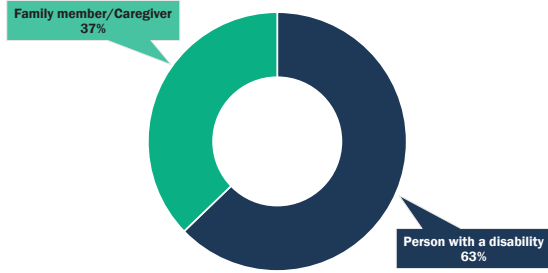


Medicaid Waiver Type



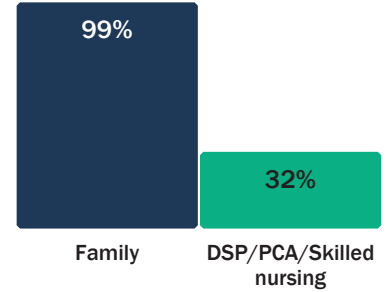
Survey Participants Demographics

Personal Identification

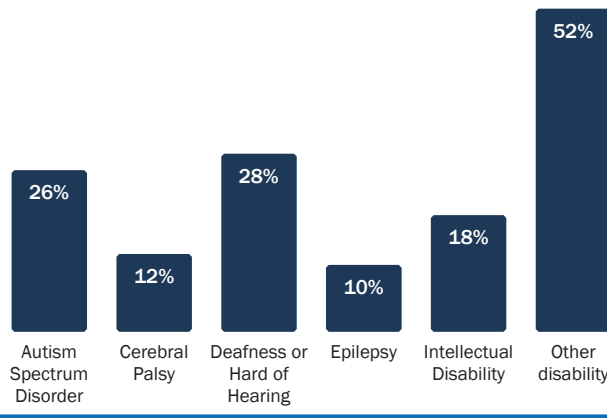


of respondents
have a caregiver/
support person

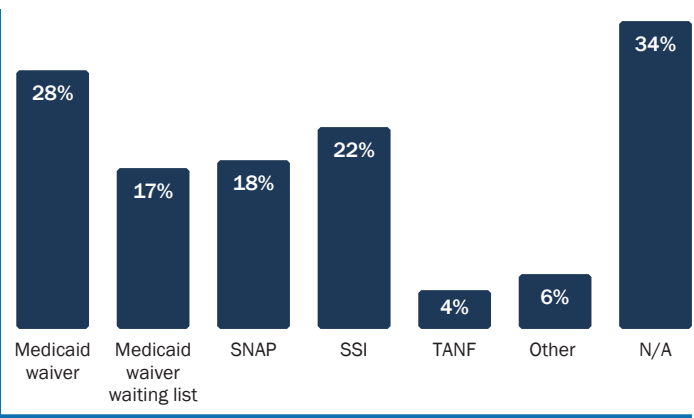
Caregiver Type



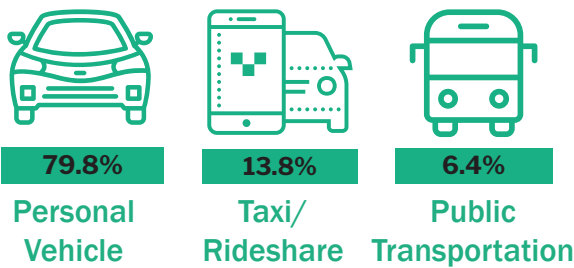
Type of Disability



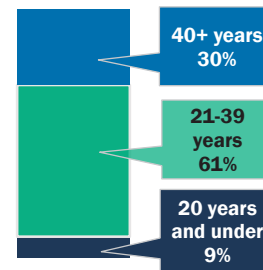
Public Benefits Received



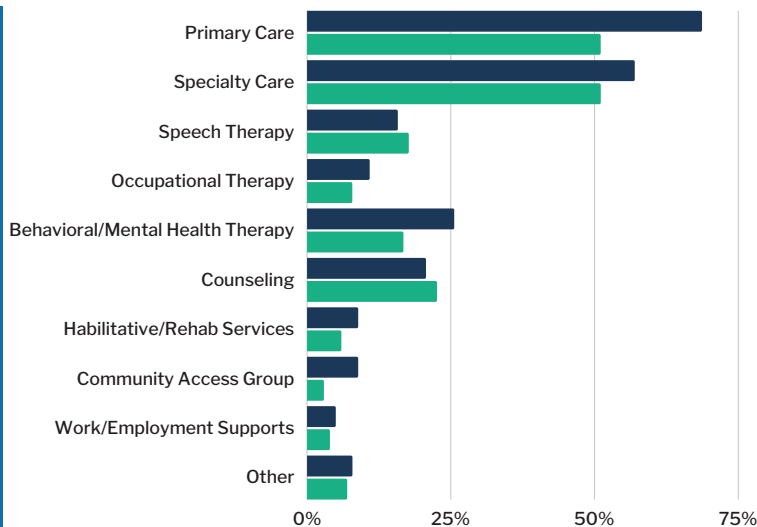
Primary Mode of Transportation



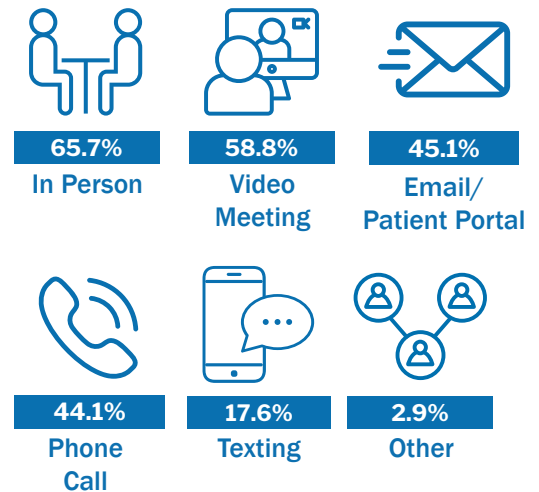
Age of Respondents



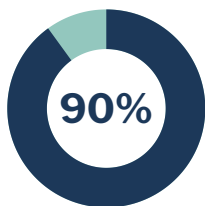
Types of Services Used



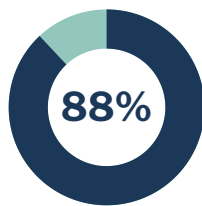
Preferred Communication Method



Telehealth Access and Use

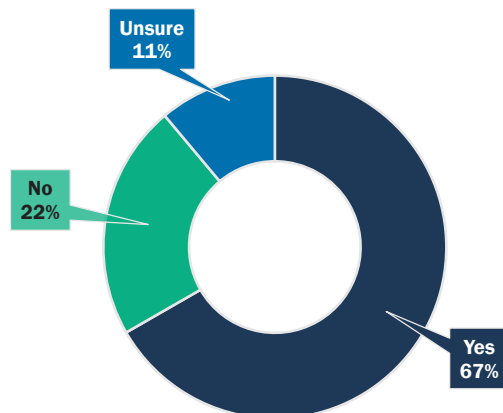


of respondents said their provider offers telehealth services



of respondents had a telehealth visit since the beginning of the COVID-19 pandemic

Respondent Visit Fully Paid by Insurance



of respondents require additional service or support due to difficulty hearing

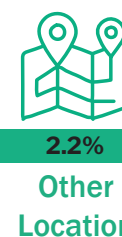
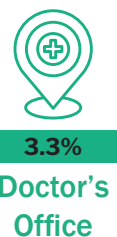
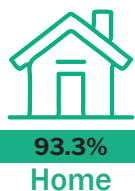
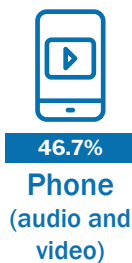
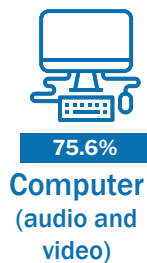


of respondents require additional service or support due to difficulty seeing



of respondents were able to obtain support services during their telehealth visit

Technology Type and Location During Visit

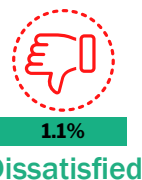


For the 12 participants who had not accessed telehealth services, their reasons were:

- Their insurance would not cover the service
- Lack of additional services/supports (interpreter, ASL, audio/hearing services, etc.)
- Telehealth was not offered by the provider
- Did not have the right technology to connect to service

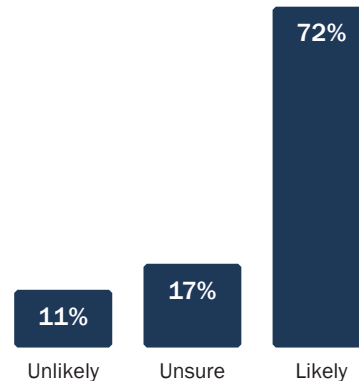
Respondent Satisfaction with Telehealth

People with disabilities were mostly satisfied with their telehealth experiences. They felt:



- More engaged
- More heard and supported by their provider
- It was quicker and easier access to appointments

Respondent Likelihood to Continue Using Telehealth



Telehealth Visit Experiences

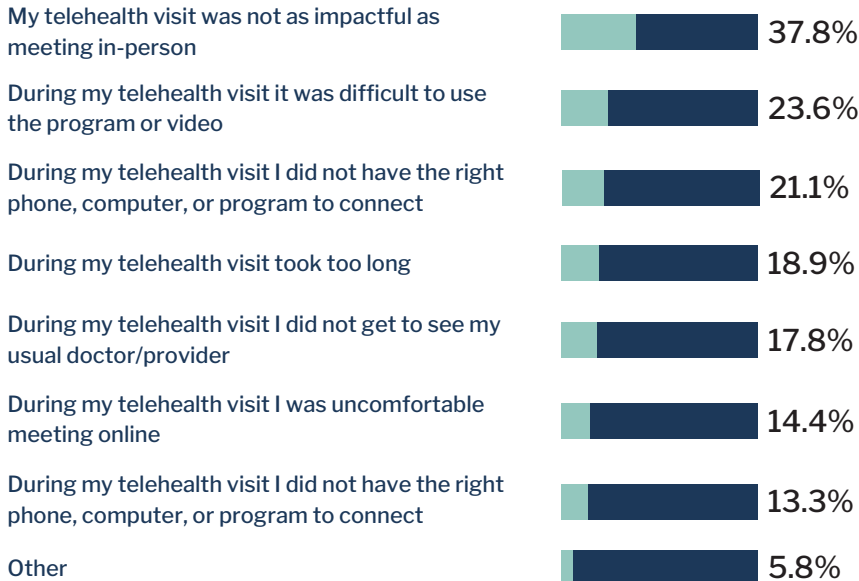
“It’s a lot to get someone to an appointment...telehealth helps to take a little off.”

-Focus Group Participant

“It’s frustrating to come all the way to Atlanta- I live 45 min south of Atlanta, and we came all this way for you to see my child and not touch them.”

-Focus Group Participant

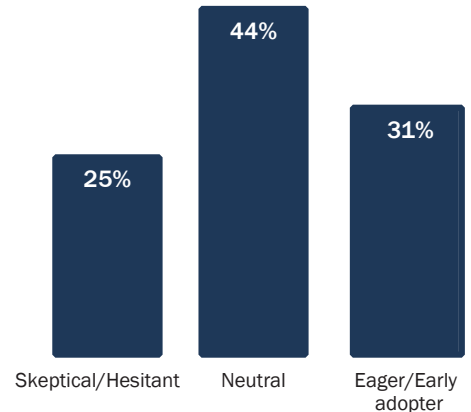
Telehealth Visit Experience Since the Beginning of the Pandemic (Percent of Respondents who Agreed)



“A mixed approach to care should be an option providing both telehealth and in-person services.”

-Focus Group Participant

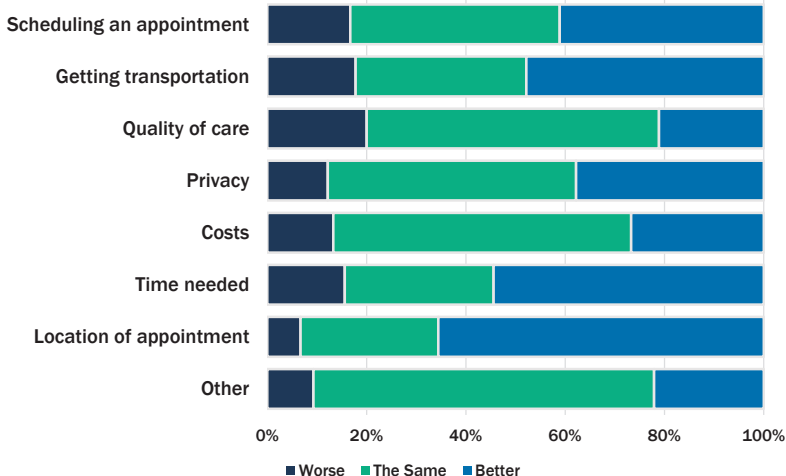
Technology Enthusiasm



“[Telehealth] makes life easier for a parent of a child with so many needs...it’s one less thing I have to worry about.”

-Focus Group Participant

Visit Quality: Telehealth Compared to In-Person



“Telehealth is a part of the healthcare experience but not to replace the healthcare experience - it works more as a supplement.”

-Focus Group Participant

“Relationships matter with your telehealth provider. The usage of patient portals to maintain health-related relationship is really important.”

-Focus Group Participant

Moving Forward with Telehealth

What do People with Disabilities Want?

Continued Access

to their PCP and not secondary personnel such as PAs, NPs, and other MDs/DOs

On-Demand

technical assistance in more accessible formats

Toolkit

for doctor's offices and patients in requesting accommodations before appointments

Increase

in advertisement for telehealth services through provider offices and insurance

Doctors

in the same health system to use the same telehealth software to connect to patients

COVID-19 Impact on Telehealth Policy

89.6%

of primary clinician survey participants in Georgia reported using digital health tools because of COVID-19

55%

of these respondents who used telehealth because of COVID-19 reported it was their first time

COVID-19 provided opportunities to make telemedicine access more equitable and supported rapid uptake by clinicians and new access for consumers:

Telehealth reimbursement for audio-only visits for Medicare beneficiaries

Availability for clinicians to use their home as the presenting site

Expanded geographic limitations

Policy and practice changes are needed to sustain and maximize equitable access to telemedicine:

Permanent expansion of telehealth

Reimbursement for audio-only visits for Medicaid

Expanded broadband access to residents living in rural areas: Access to telehealth video calls

Access to support staff (i.e., in assisted living environments such as nursing facilities, caregivers, and medical providers)

Increase in digital literacy and updates in technology: Ensure providers and practices (and telemedicine platform vendors) are complying with the Americans with Disabilities Act