



ADAPTIVE STRATEGIES FOR RURAL GRANTEES AMID COVID-19: USING TELEHEALTH IN NEW AND IMPROVED WAYS TO MEET EMERGING NEEDS

The GHPC COVID Collection

As part of ongoing efforts to support Federal Office of Rural Health Policy (FORHP) grantees, Georgia Health Policy Center technical assistance providers put together a five-part series of virtual peer learning opportunities. The series provided the space for small group discussions around challenges, early learnings, and potential opportunities around program implementation strategies during the COVID-19 pandemic.

This brief summarizes lessons around successes, challenges, innovations, and resources related to the use of telehealth services during the pandemic.

Challenges

Many grantees described the rapid responses required to fast-forward their telehealth initiatives during this time. As an example, one grantee described that they quickly had to develop a training on the telehealth platform for 800 people. Lack of knowledge and experience with telehealth platforms, as well as availability of equipment by patients and providers, were common challenges. Limited access to internet connectivity on the part of the patient, provider, or both was another commonly cited challenge. Interruption due to recent changes with their electronic health records (EHRs) and other reporting systems.

Innovations and Different Ways of Working

With the changes required to respond to the pandemic, providers who had been lukewarm to telehealth began to put aside their fears about lack of quality, equipment considerations, etc., and participated in telehealth programs. One grantee described a program of easing providers into this by first rolling out a mobile app called eCare as a pilot with a small group of providers. These providers liked it and talked about how it helped them connect with more patients. Then, they worked with provider committees to share that this might be a long-term scenario. The providers did not want their patients to go without care. The grantee's providers initiated video connections with patients selected by each provider. The providers stated that it is working well; however, they observed that it would not be ideal for first-time visits with new patients. The grantee noted that their providers have begun to have more discussions on the creative ways they might use telehealth in the future, including exploring ideas such as post-surgery follow-up appointments.

Given the lack of patient internet access, grantees described strategies for adjusting their approach. They are implementing visits by phone and encouraging patients to go to McDonald's (or other retail) parking lots to use Wi-Fi. In Ohio, the government provided a map of cellphone towers with free access. Others described

school districts working with internet providers to give free access to school students for academics and sharing it for health visits.

To connect with students and families to promote telecounseling and other telehealth services, therapists and community health workers described riding on school buses delivering meals to make the connections with clients, check in, and promote the use of telehealth services. Grantees also mentioned promoting telehealth services when patients are signing up for Medicare and other health insurance. One grantee reported that they were able to secure funding from a local philanthropy to buy phones and phone service for patients in order to facilitate telehealth access.

Patient education continued for children in a teaching group for childhood diabetes, using a closed Facebook Live group. Once a child joins the group, they have access to videos to support exercise, nutrition, and other goals.

Opportunities for Leveraging Telehealth at This Time

- Utilization of Community CareLink data-sharing platform system for e-referrals across partnerships
- Scheduling and delivering patient education
- Increasing provider willingness to adopt telehealth more rapidly than prior to COVID-19
- Applying early lessons learned rolling out a Statewide Telehealth Technical Assistance Workgroup
- Considering telehealth for oral health screenings



Learnings for Future Application

The Community CareLink data-sharing platform is available to other entities besides health care providers, so foodbanks, jails, and other partners can add information about clients and patients. In addition, sharing across partners improves patient care. Prior to selection of this platform, grantees surveyed partners to ask what platforms they were using and they created notes on all.

Grantees expressed interest in learning more about the opportunity to utilize telehealth in dentistry. A list of teledentistry resources compiled by grantees is included in the resource section below.

One clinic system described curbside visits for behavioral health patients and well-child visits that allowed patients to utilize clinic Wi-Fi in the parking lot. Some clinics provide tablets for patients to use in their vehicles to complete visits.

With home as the office for providers using telehealth, grantees shared that it allows for flexibility in schedules, opening up more evening appointments when this works best for provider and patient. Work flows for primary care clinics remain similar. Even if providers have more flexible hours, the front-line office staff are doing initial contact (using Zipnosis for administrative tasks).

Opportunities for Telemedicine and Informing Policies

All participating grantees appreciated the relaxation of some Health Insurance Portability and Accountability Act requirements to allow platforms like Facetime, etc., to be used. This allows for inexperienced users, both patients and providers, to “jump into the baby pool” without worrying about expensive equipment. In addition, they noted that all of the policy changes around telehealth have allowed them to open up and learn without penalty. They expressed concerns about this “window closing” and having to return to a more restrictive telehealth landscape. Thus, they described the need to document this experience and tell the story of this experience not only to influence policies but also to help them improve going forward.

RESOURCES SHARED

- [Visuwell](#) — Telehealth platform that provides for switching to low-bandwidth
- [Zipnoses](#) — Platform to support the administrative tasks
- eCare — Mobile app for interactions
- Facebook Live: Closed groups for patient education
- [Google Duo](#) — Platform for connections
- [Doxy.me](#) — HIPAA-compliant platform for telehealth visits
- [Zoom](#) (HIPAA-compliant version): Platform for telehealth visits
- [Community CareLink](#) — provides a data-sharing platform for health and community partners to share patient information, including an option to upload to the patient's electronic medical record
- [HIPAA-compliant remote patient monitoring](#)
- Health Resources and Services Administration (HRSA)-funded [telehealth information](#)
- [HIPAA guidelines](#) in COVID-19 telehealth response
- Agency for Healthcare Research and Quality's Easy-to-Understand [Telehealth Consent Form](#)
- Centers for Medicare and Medicaid Services' new [Telehealth Toolkit](#):
- HRSA's COVID-19 information [website](#)
- U.S. Department of Agriculture [E-Connectivity Toolkit](#) — See pages 10-13 for funding programs related to internet access
- COVID-19 Telehealth Program Funding from the Federal Communications Commission — Immediate support to eligible health care providers responding to the pandemic by fully funding their telecommunications services, information services, and devices necessary to provide critical connected care services. To submit an application, visit fcc.gov/covid19telehealth.

Teledentistry Resources and Platforms

- [Doxy Me*](#) — widely used by grantees currently exploring and offering telehealth
- [Mouth Watch](#) camera — This platform only provides a partial patient record, but is widely used for teledentistry.
- [Teledentix](#) — Some grantees feel this platform is relatively comprehensive (more expensive but more comprehensive).
- [Asynchronous teledentistry](#)
- [Eaglesoft platform](#) — With this platform, charting cannot be reported in the system, but it is a platform some grantees use for teledentistry.
- [Dentrix Enterprise](#) — This platform has an integrated system with some of the teledentistry program. It can be cloud-based or downloaded on to a server. Cloud-based is good for rural communities with limited internet connectivity.
- [Other Teledentistry resources](#)

For more information:

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