

Bridging the health equity divide.

Telehealth Navigator Program

Increasing Access to Telehealth and Expanding Job Opportunities in the Under-resourced Communities Throughout the Commonwealth

The Need

Telehealth has been embraced throughout the COVID pandemic by patients and providers for its convenience and ease of access. Federally Qualified Health Centers (FQHCs) have seen reduced numbers of “no shows” and cancellations, especially in Behavioral Health (both mental health and substance use disorder). Sustaining telehealth beyond the pandemic is critical to ensuring its continued use, and integration into patient care.

For many patients, however, especially those served by FQHCs, who are disproportionately low-income, non-English speaking, and Black, Indigenous and People of Color (BIPOC), there are many barriers to effectively accessing telehealth and, in particular, tele-video visits and remote patient monitoring (RPM). These include:

- Reliable access to broadband internet
- Reliable access to smartphones and/or computers
- Reliable access to private spaces to carry out telehealth visits
- The need, in many instances, to add interpreters to appointments
- Understanding of and engagement with telehealth as a safe and effective modality of care
- Digital literacy in general and knowledge of the telehealth interface, specifically

At the same time, providers report that they spend a great deal of time educating patients on the usefulness and pragmatics of telehealth, education that could easily and perhaps even more effectively, be carried out by others on the care team. Providers also report that they typically conduct these telehealth appointments on their own, rather than with the care team supports they have in place for in-person visits.

Increasing the number of telehealth visits, especially those that are provided through video, can improve quality of care. Remote patient monitoring – through connected devices such as blood pressure monitors that report results directly to the primary care team -- provides an opportunity for better diagnosis and treatment via telehealth, but requires time to set up and educate patients on its use. Helping patients to understand the benefits of these services and how to “navigate” the technology, is essential to enabling our diverse patient population to take advantage of the full opportunities in primary care today.

The Telehealth Navigators Program

The FQHC Telehealth Consortium, composed of 35 FQHCs that serve more than 700,000 of the Commonwealth's most under-resourced population, proposes to address these barriers and opportunities through a new Telehealth Navigators Program. This program will design, pilot, and spread a program of highly trained and specialized Telehealth Navigators, who will be recruited from existing health center staff, such as Community Health Workers, and/or from the communities served.

They will be based at the FQHC and trained through a curriculum developed by the Consortium. The Curriculum will be focused on educating patients on how to initiate and participate in a telehealth visit and, if needed, how to use RPM equipment. This will move the education function from a primary care provider to a culturally competent community navigator who can work with patients individually.

Telehealth Navigators will engage with patients in a variety of ways, depending on the needs of the patient and/or the FQHC, including:

- Calling patients in advance of scheduled telehealth visits to ensure they are trained and confident in their ability to participate, and to confirm availability for the visit
- Ensuring that their equipment is working and that they can access the technology
- Arranging to add interpreters to telehealth visits, if needed
- Reaching out to patients who are overdue for a visit
- Scheduling telehealth visits and providing associated training
- Providing training on remote patient monitoring equipment
- Providing education for patients on-request by providers
- Providing community-based education through outreach and engagement with local community-based organizations.

Some advantages of the program include:

- Telehealth Navigators, recruited from the communities served, will bring an understanding of the culture and barriers that patients face in engaging with the health care system and with telehealth.
- At the same time, this program will provide skills, including technical skills on telehealth platforms, to these members of the workforce, promoting diverse hiring and offering career pathways to future jobs.
- Telehealth Navigators will free up provider time that is currently spent making patients comfortable with telehealth and explaining how to use it. In many cases, in fact, they will be better able to provide this education than the provider.
- Patients who currently engage with telephone visits can be helped to become comfortable with video visits.
- It will enable FQHCs to increase the successful use of video visits and RPM for their patients, including patients with low digital literacy or who have received telehealth technology – such as smart phones and blood pressure monitors -- from the Consortium programs.

- It will empower patients in their care and ensure patients are not left behind in the shift towards hybrid (telehealth and in-person) models of care.

The success of the program will be measured by the number of patients engaging in telehealth for the first time, the percent of telehealth visits that occur via video visits, kept appointment rates for telehealth visits, effectiveness of diagnosis and treatment via RPM, and provider and patient satisfaction.

The Funding Request

Initially, the Consortium is looking for funding to develop a pilot for this program at four Consortium FQHCs. As part of the pilot, the Consortium will design and provide training for Telehealth Navigators. The pilot FQHCs will recruit and hire Telehealth Navigators to receive this training. A program manager at the Consortium will work with these health centers to develop workflows and integrate the Telehealth Navigator into the health center. Then, working with individual health centers and participating in joint meetings of the three pilot health centers, the program manager will identify best practices and address gaps in the training and other challenges to Telehealth Navigator success.

Based on this pilot experience, the program will be spread to other interested FQHCs, utilizing the training and workflows from the pilot, and expanding the learning community. After one year of funding, it is anticipated that the Telehealth Navigator will be absorbed into the budget of the health center based on the value it provides. It is estimated that it will require \$550,000 to launch the initial pilot at three health centers, and \$110,000/each for additional health centers to join the program and participate in it for one year.

For more information on this initiative and ways in which you can bridge the telehealth divide for our most under-resourced populations, please contact Abby Akoury (857) 302-4261, or aakoury@C3aco.org.