Patients and physicians like telehealth and want it to continue after the pandemic comes to an end, according to one of the largest studies to examine the mode of practice during COVID-19. But there’s work to be done to make the most of the technology going forward.

The AMA collaborated with the COVID-19 Healthcare Coalition—comprised of more than 1,000 health care organizations, including the AMA, technology firms and nonprofits—and others to perform the “COVID-19 Telehealth Impact Study.”

Researchers analyzed deidentified claims data that represented more than 50% of private insurance claims from 2019 and 2020, surveyed nearly 1,600 physicians and queried more than 2,000 patients. The AMA, though not a formal part of the COVID-19 Healthcare Coalition, took part in its telehealth workgroup.

The AMA recently hosted a webinar to highlight what the data showed and explore what needs to happen to make telehealth a permanent, equitable part of the health care landscape.

“Patients really are not only pleased with their telehealth, but they are anticipating—pretty much expecting —to be able to use it in the future. So, for policy makers and for health care providers … we need to figure out how do we do this for the benefit of our patients,” Francis X. Campion, MD, the principal lead for digital health at the nonprofit Mitre Corp., told webinar viewers.

Congress should act to ensure that telehealth services are covered and remain available permanently at the end of the COVID-19 public health emergency. Learn how the AMA is advancing telemedicine during the COVID-19 pandemic.
The AMA Physicians Grassroots Network is calling on physicians and others to contact their congressional representatives to support recently introduced legislation in both the House and Senate that, if passed, would make the expanded access to telehealth services permanent.

What patients said

The data showed that patients overall had positive experiences with telehealth and don’t want to see it go away. Among those surveyed:

- 79% were very satisfied with the care received during their last telehealth visit.
- 81% said the provider was thorough.
- 84% were confident their personal information was secure and private during the visit.
- 83% believed the quality of the patient-physician communication was good.
- 73% will continue to use telehealth services in the future.
- 41% would have chosen telehealth over an in-person appointment for their last visit, even if both required a copay.

What physicians said

On the other side of the video chat, 68% of physicians told researchers they were personally motivated to increase the use of telehealth in their practice and 71% said their organization’s leadership was motivated.

Here are the top five services physicians surveyed say they want to offer after the COVID-19 pandemic has ended, along with the percentage who said they wanted to continue each service:

- Chronic disease management—73%.
- Medical management—64%.
- Care coordination—60%.
- Preventative care—53%.
- Hospital or emergency department follow-up—48%.

Physicians also identified what they anticipate to be the barriers to maintaining telehealth after the public health emergency. No. 1 on that list? About 73% of physicians worry there will be low—or no—payment.
Among the other areas physicians have concerns about:

- 64%—technology challenges for patients.
- 33%—medical liability exposure.
- 30%—integration with the EHR.
- 23%—clinician dissatisfaction.
- 18%—licensure.

The AMA’s Telehealth Implementation Playbook walks physicians through a 12-step process to implement real-time audio and visual visits between a clinician and a patient. It is a powerful resource for practices now and as they continue to implement telehealth beyond the pandemic.

What needs improvement

While there have been many positives with telehealth, there’s work to be done to optimize visits in the future—“especially to ensure equitable access and outcomes for all,” said Meg Barron, the AMA’s vice president of digital health.

She outlined four key areas that need attention: device access, connectivity, digital literacy and design relevance. Expanding broadband access and creating ways for those with audio, visual and motor impairment to better access telehealth are among the specific needs that must be addressed.

Dr. Campion and the AMA’s Barron also said there is a great opportunity to increase remote patient monitoring. Not all physicians taking advantage of telehealth are using remote patient monitoring. Workflow issues for physicians and patients will need to be addressed to improve use, they said.


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