Telehealth has the potential to become an important tool to address longstanding health inequities in the historically marginalized racial and ethnic groups that have been disproportionately affected by the COVID-19 pandemic.

To help telehealth live up to its potential, the AMA has outlined nine key steps that should be taken to help ensure an equitable telehealth landscape emerges, a task that will take forethought and intentional actions.

“Those developing and implementing telehealth solutions” must make it a priority to partner with historically marginalized racial and ethnic groups “to ensure that solutions are designed to be accessible and work well for all,” says the AMA brief, “Equity in Telehealth: Taking Key Steps Forward” (PDF).

“Patient access to telehealth and continuity of care are directly linked to whether, and at what level, telehealth services provided by their physicians—the physicians with whom they have a relationship—are covered by their health plan,” the brief says.

Below, find nine specific steps that should be taken toward equity in telehealth among patients from historically marginalized racial and ethnic groups, as well those who have been economically or socially marginalized.

**Fund and implement programs to provide internet-connected devices and broadband access.**
In 2021, 20% of adults in the United States didn’t have a home broadband subscription and 15% didn’t own a smartphone, critical tools to participate in telehealth.

**Encourage telehealth solution and service providers to implement design functionality, content, user interface, and service-access best practices with, and for, patients from historically marginalized racial and ethnic groups.**
Telehealth design must meet the need for varying levels of patient digital literacy. Also, a lack of transparency and equity in privacy and security policies may cause hesitancy among some patients who are concerned about the safety and security of telehealth visits.

**Design telehealth to help those who have difficulty accessing technology.** The needs of these patient groups should be considered, such as older adults, people with vision impairments or other disabilities, or people with limited-English proficiency.

**Measure and strengthen digital literacy, with an emphasis on creating programs designed with and for these patient groups.** Internet access and device ownership only benefits patients if they know how to use them.

**Encourage hospitals, health systems and health plans to invest in initiatives aimed at designing access to care via telehealth with, and for, patients from historically marginalized racial and ethnic groups.** These entities need to devote resources to improve the diversity of their physician and other health-professional workforces, offer training and technology support for equity-centered participatory design, and launch new and innovative outreach campaigns to inform and educate communities about telehealth.

**Expand physician practice eligibility for programs that help qualifying health care entities buy the services and equipment to provide telehealth services.** Such programs augment the broadband infrastructure and increase connected device use among the patient groups affected by telehealth inequity.

**Require health plans to cover telemedicine-provided services on the same basis as in-person services.** Payers should not limit coverage to services provided by select corporate telemedicine providers. Continuity of care is undermined if patients are directed to separately contracted telehealth providers even when their regular physicians can provide services via telehealth themselves.

**Oppose efforts by health plans to use cost-sharing as a means to encourage or require the use of telehealth or in-person care, or encourage care from a separate or preferred telehealth network over the patient’s current physicians.** Telehealth isn’t appropriate for all types of care or all types of patients, and offering lower cost-sharing for telehealth could discourage patients from seeking in-person care when needed.

**Pay physicians fairly and equitably, regardless of whether the service is performed via audio-only, two-way audio-video, or in-person.** Fair and equitable payments will help ensure patients can receive the right care via the most appropriate and accessible modality at the right time.

Health care in the U.S. is beset by wide disparities. Find out what the AMA is doing to promote health equity
for all Americans.

Also, learn more about how to implement telehealth in your practice with equity in mind.