Access vs Geography: Telemedicine as a Possible Intervention to Improve Patient Care

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Introduction
• Current Medicare Reimbursement for Telemedicine is only provided through evaluation of HPSAs (health professional shortage areas).

Objectives
Investigate the disparities that exist in accessing care between different geographic areas,
Assess possible policy improvements to increase access to care.

Methods
• Conducted literature review to understand characteristics of both HPSA and non-HPSA areas.
• Investigated various methods of quantifying and assessing efficacy of current programs, and potential implementation.
• Explored various urban-based telemedicine programs at Thomas Jefferson University.

Results:
Case Studies of Urban and Rural Area Access:

Primary Care
Urban Medicaid patients offered appointments 60% of time vs. 80% in Rural Areas.\(^1\) n=11,347.

Perceptions matter: MN Patients significantly believed they would receive delayed care (32% vs 21%)\(^2\) n=1,200.

Orthopedics
NC Rural Practices more likely to accept Medicaid in rural vs urban practices (65% vs 57%).\(^3\) n=203.

Dermatology
No correlation between rural areas and ability of patients to schedule urgent appointments.\(^4\) n=250.

OB/GYN
ANGELS program (AR) created hybrid program allowing specialty consults for rural areas at urban population centers, increasing access.

Discussion
• Any fundamental improvement in Telehealth policy must address urban and rural disparities.
• Scope for telemedicine to provide meaningful medical experiences that improves access remains high.

Further Questions
• How does the analysis of access by geography relate to other barriers of care?
• What are the potential implementation of telemedicine in specific delivery areas (e.g. emergency care) and geographic regions (e.g. Pennsylvania)?

Conclusion
• HPSA in its current form accounts purely physical distributions of medical resources.
• Telemedicine as a delivery of health access can potentially alter our understanding of effective health administration.
• Further study is needed to model significance of access challenges and understand patient perception.

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