Telehealth - Take It To the Pilot

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March 10, 2023 - Telehealth visits were estimated to account for fewer than 1 percent of all outpatient visits before 2020. Then COVID hit. And telehealth use was off the chain!

US Census Bureau Household Pulse Survey data revealed 22% of the U.S. population used telehealth services in 2022. “You’ve come a long way, baby!” – much of the general public is now familiar with the basic virtual doctor visit.

However, do many people realize the full range of medical, healthcare, and preventative health activities that telehealth can facilitate? What happens when communities combine telehealth and broadband to reach the potential that these symbiotic technologies promise?

Four stories of telehealth-broadband integration present exciting examples of tech pioneers getting out and making magic happen. Here are valuable lessons and caveats, benefits and early warnings. Small steps leading to long strides toward digital and health equity. These pilots get us ready for the next level.

Telehealth- and WiFi-equipped vans delivering healthcare to the homeless. Equip cops with devices that connect quickly via telehealth to mental health workers to reduce officer-involved shootings. Telehealth way stations on rural roads in case patients go “code blue” before arriving at far-away hospitals. Laptops in libraries and laundromats where people learn health literacy.
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1. **Pilot shows telehealth means more than just technology.**

Essential Families is a 501c3 nonprofit that conducted a telehealth pilot in one of the poorest communities in Kansas City, MO with stellar results. They delivered mental healthcare for families and also virtual parent education that instilled parenting skills so mom and dad can better leverage mental health services. The pilot included more resources than telehealth.

The nonprofit staff team broke down the pilot into eight steps, starting with developing a database of residents who could potentially use telehealth and broadband. The “target market” is 8,400 households in the area that have children under 18 years old. The pilot’s funders budgeted for 69 homes to participate in the pilot and there were 78 on the waiting list.

A key element of Essential Families’ needs analysis was participating in many community events and door-to-door canvassing. **Step 2.** Their Chief of Digital Marketing, Kenneth Yancy, said “We had to go directly to the people to educate them about FCC’s ACP [the source of broadband for the telehealth]. Our partners were part of the analysis process – the school district, the charter school, childcare providers, the neighborhood association.” **Step 3.**

To get people to provide the nonprofit data that is difficult for government agencies to collect, Essential Families leverage laptops. “When people registered for the pilot and completed our forms [Step 4], we gave them free laptops,” Yancy said. “They gave us data we needed, we distributed technology where it needs to be, and the laptops are a convenient platform to gather on-going analysis.”

Terri English-Yancy, Founder and CEO of Essential Families, explains **Step 5.** “Selected families met their digital navigator at our office, picked up their laptops, enrolled with ACP, and set up their NoW account, which a HIPPA-compliant video streaming platform.” Computer and Internet training, accessing the education and
mental health services, and signing up for resources that come with the service is all done on the NoW multi-lingual platform.

A family starts **Step 6** with a pre-assessment followed by a minimum of 15 virtual parental education sessions that families get with a trained and certified career educator. After each session, the parents complete an assessment. Then, before the six mental healthcare services begin, families complete an assessment so therapists and counselors know where to begin. Each therapy session concludes with an evaluation before they can log off the computer.

Essential families determined from the pilot that it wasn’t enough just to have the mental health services, but they also needed the education as well as resources. English-Yancy continues, “If a participant had a child in childcare, we assisted financially. If they needed transportation, we got them a zTrip (car service) voucher to get to work, grocery store, or other doctors’ appointments. Besides mental health, we’re trying to strengthen the families’ moving forward. If those incentives help families advance, then we will support them.”

**Step 7** is the extensive follow up by the additional navigator. **Step 8** is the pilot evaluation report that is helped significantly by the electronic and manual tools that execute various real-time assessments, impacts, and cost/benefits analysis.
2. **Telehealth and ISP partnership - where the rubber meets the road.**

Many people assume telehealth is one patient, one doctor (or other healthcare professional) interacting one-to-one. The reality is, when use telehealth at its full capabilities, there will be many-to-many communications/transactions.

“It's not up to the patient alone, but also loved ones and care providers in a collaboration that occurs in the care process,” said Equiva CEO and Co-Founder Nir Altman. “Our software platform gives all three groups the opportunity to use technology to overcome many of the barriers to health equity. It provides a tailored approach to helping patient population groups achieve the best possible outcomes.”

Equiva recently partnered with Internet Service Provider (ISP) Infiniti Mobile to offer the Equiva ACP Connect Program that facilitates collaboration efforts. Infiniti provides prepaid services to low-income Americans, specifically through the FCC’s Lifeline and Affordable Connectivity Programs (ACP). Infiniti is ACP provider in 50 states, Washington DC, and Puerto Rico.

The ACP gives qualified residents up to $30 a month for Internet access ($75/month for Native American homes), and an optional $100 subsidy for a computing device. At the end of 2022 15.4 million households were taking advantage of ACP, but a whopping 50 million are eligible for the subsidy. The FCC is having difficulty enrolling people.

Jason Welch, Infiniti Mobile President, says, “Equiva has a reach we don’t have - the healthcare communities, the cancer support community, those in elder care, the larger healthcare organizations. Infiniti saw a natural, practical fit. The Equiva ACP Connect Program is a practical combination of services that are easily explained. Our customers understand accessing healthcare and healthcare-related resources from their computers and that broadband is the data transport mechanism allowing them to do so.”

Equiva is the needed glue between broadband projects needing telehealth and the healthcare facilities that will service the intended projects. “We partner with hospitals, payers, long-term care, and support organizations to identify resources that they, in turn, use to create tools for patients to manage their health,” says Altman.

Following that train of thought, urban and rural activists and communities should also be given tools that enable them to do their own healthcare needs assessment as well. High-priced consultants touting pricey studies coming in telling communities “Here’s what’s in your best interest.” The suits will go home, but problems can remain.
Often communities know the answers to their problems. Medical technologists have a lot of gadgets, telehealth, and solutions. In the back-and-forth of all this Q&A, answers come out. Everybody then should let the communities manage the planning and the execution of those plans. Give them a little guidance, sure, but let communities manage their solutions to managing their health. That’s how communities maximize the value of pairing up telehealth with broadband.

“This partnership will increase penetration rates for the ACP, telehealth adoption, digital inclusion, and health equity,” says Welch. “By expanding the ecosystem beyond broadband and telehealth providers to also include healthcare organizations themselves, there’s a unique opportunity to educate the patient. ‘Here’s your device and software, and here’s how you maximize the value of their use.’”
3. **Country roads take telehealth home via Empowerment Centers**

Wireless ISP (WISP) Vistabeam launched their first Empowerment Center in Torrington, Wyoming in this month. The Center assists residents with ACP paperwork, digital equity issues, digital skills training and have a community meeting room available with video conferencing capabilities. Microsoft will have digital skill programs available at the Center.

“A fulltime digital navigator is on site and are working with a telehealth company to pilot a home testing suite that includes an oximeter, blood pressure monitor, blood testing, and other features,” says Matt Larson, Owner of Vistabeam. “The device will be part of the Center’s telehealth capabilities, along with the remote doctor visits.”

Broadband is currently underutilized for telehealth except for video streaming capabilities that bridge doctors and patients. “What broadband’s missing is a telehealth killer app or device, the one thing that everyone ‘has to have,’” says Larsen. “I believe preventive healthcare is the answer – technology that detects or prevents things from happening before they become big medical problems.”

Rural communities also need a strong human element for telehealth success. The Center draws in people by emphasizing familiarity, knowledge, no pressure, and exploration. “We train people to be digital navigators who make customers comfortable with technology, and our staff connects people with complementary social services and other resources,” says Larsen.

The staff is anxious to see how well the Empowerment Center does after it’s been operating for a few weeks and optimized. They expect the Center to be successful and generate regular traffic. At that point the staff will socialize the processes for other centers at other locations.

Overall, digital equity needs an ecosystem that includes telehealth. Larson believes digital equity is just one component of a giant ecosystem of social services to help
take care of people. However, often there is a serious lack of coordination between many of these resources. Coordinating these resources is how to get maximum collective impact from the ecosystem. The Center fulfills elements of that ecosystem.

The quality of broadband infrastructure is key to telehealth success – it cannot fail customers! “The soul of a broadband deployment is in that relationship between an ISP and the customer,” says Larson.

Telehealth potentially can keep someone alive after a stroke or heart attack until help medics arrives. Four out of 10 people have two or more chronic illnesses. Remote patient monitoring keeps patients returning to hospitals. WISPs have a national track record for reliability and quality of customer service, so consider them in telehealth/broadband strategies.
4. **Pilot addresses the urban social determinants of health.**

Some politicians and media drastically shortchange urban communities when they talk about the unserved and underserved needing broadband and healthcare. But *digital redlining* happens in urban areas as well as rural. Hours-long travel times to see doctors afflict urban residents with crappy public transportation as well as rural residents located way out in the hollows.

Chattanooga and their urban broadband network are a booming success story. Their public-owned gigabit broadband infrastructure also serves the public electric utility. The city scored another high-profile win with their recent pilot program to distribute 1,000 free telehealth accounts to the most economically blighted area in the city.

“Our pilot project is bringing a variety of resources to a beautiful but under-resourced neighborhood called Orchard Knob,” said Deb Socia, President and CEO of the Enterprise, a nonprofit that works at the intersection of technology and inequality. “We received a Tennessee Valley Authority award to work with residents, area nonprofits, and the Parkridge Medical System to identify needs and bring resources to address [social determinants of health](SDH).”

SDH are conditions under which people are born, grow, work, live, and age, plus a wider set of forces and systems that shape daily life. They are 1) Economic Stability, 2) Education Access and Quality, 3) Health Care Access and Quality, 4) Neighborhood and Built Environment, 5) Social and Community Context. SDH also contribute to wide health disparities and inequities.

Again, we see a community bringing in more resources than telehealth technology. Socia said, “The neighborhood has high levels of diabetes, stroke, heart disease, asthma. We’re planning to give homes indoor air quality sensors, and adding, home Internet access, digital skills training, and devices.” Some homes are getting energy upgrades and smart thermostats. Especially exciting are the telehealth appointments.

Many Orchard Knob residents work but not at jobs that offer healthcare, and they earn too much to qualify for the state’s health programs. Subsequently, these residents can’t mitigate the negative effects of the SDH without the telehealth benefits.
The city tackled the accessibility and expense of public transit in these neighborhoods. “If the only store you can walk to is the Dollar General, those residents will have a very different meal plan than someone who can go to the farmers market,” Socia said. The pilot addresses air quality, which is necessary because Chattanooga sits in a valley.

Broadband builders a number of broadband builders only want to build the network and be done with it. However, the Chattanooga pilot reflects how critical a component broadband is. The city’s electric power board, EPB, was part of the pilot planning from the beginning, contributed funding and are building out WiFi in public spaces.
Conclusion

No doubt, telehealth is something that every community should consider for more reasons than just money. But since there are more than 90 federal agencies pouring literally billions of dollars into broadband and digital technologies including telehealth, let’s be glad and make a joyful noise! The stars probably aren’t going to align like this again for quite some time.

These four telehealth projects and the people leading them are part of a growing trend of visionary planning to transform healthcare and broadband. Follow them on social media and regular media. These are pilots, so expect versions 2.0, 3.0, and 4.0. Remember that needs assessment – market analysis – is an on-going exercise.

Also remember having a healthy community leads to a healthy local economy. When word gets out that your town or city has the most innovative healthcare system, leading-edge medical teams and technology, and reliable, blazing-fast broadband, there should be a lot of people and companies beating on your digital doors.

Folks – let’s do this right!

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Mr. Settles’ consulting services, on-site works, reports, and books help community leaders and stakeholders leverage broadband as an economic driver. He’s a nationally known and respected thought leader. Mr. Settles gets communities to ask the right questions so they find the best answers for their digital needs.

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