

Telehealth for LGBTQIA+ Patients

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NATIONAL LGBTQIA+ HEALTH
EDUCATION CENTER

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Our Roots

Fenway Health

- Independent 501(c)(3) FQHC
- Founded 1971
- Mission: To enhance the wellbeing of the LGBTQIA+ community as well as people in our neighborhoods and beyond through access to the highest quality health care, education, research, and advocacy
- Integrated primary care model, including HIV and transgender health services

The Fenway Institute

- Research, Education, Policy



The National LGBTQIA+ Health Education Center

- Training and Technical Assistance
- Grand Rounds
- Online Learning
 - CE and HEI Credit
- Extension for Community Healthcare Outcomes (ECHO) Programs
- Publications and Resources



Learning Module



Publication



Toolkit



Video



Webinar

Technical Questions?

- Please call Zoom Technical Support:
1.888.799.9666 ext 2
- You can contact the webinar host using the chat function in Zoom. Click the “Chat” icon and type your question.
- Alternatively, e-mail us at education@fenwayhealth.org for less urgent questions.



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Sound Issues?

- Ensure your computer speakers are not muted
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- Choose “I will call in”
- Dial the phone number and access code



CME/CEU Information

This activity has been reviewed and is acceptable for up to 1.0 Prescribed credits by the American Academy of Family Physicians. Participants should claim only the credit commensurate with the extent of their participation in this activity.

Physicians	AAFP Prescribed credit is accepted by the American Medical Association as equivalent to AMA PRA Category 1 Credit™ toward the AMA Physician's Recognition Award. When applying for the AMA PRA, Prescribed credit earned must be reported as Prescribed, not as Category 1.
Nurse Practitioners, Physician Assistants, Nurses, Medical Assistants	AAFP Prescribed credit is accepted by the following organizations. Please contact them directly about how participants should report the credit they earned. <ul style="list-style-type: none">•American Academy of Physician Assistants (AAPA)•National Commission on Certification of Physician Assistants (NCCPA)•American Nurses Credentialing Center (ANCC)•American Association of Nurse Practitioners (AANP)•American Academy of Nurse Practitioners Certification Program (AANPCP)•American Association of Medical Assistants (AAMA)
Other Health Professionals	Confirm equivalency of credits with relevant licensing body.

Agenda

Importance of Low Barrier Programs

Program Planning

Equity & Access

Tips & Takeaways

Research consistently shows that LGBTQIA+ people face many barriers to accessing care. A 2022 national survey conducted by Center for American Progress found that 20% of LGBTQIA+ Americans, and nearly one third of transgender people, reported postponing or avoiding medical treatment due to discrimination.

<https://www.americanprogress.org/article/discrimination-and-barriers-to-well-being-the-state-of-the-lgbtqi-community-in-2022/>





Support for expansion of telehealth

For the LGBTQ+ community, health care access comes with additional complications that extend beyond geographical restrictions. Many LGBTQ+ individuals struggle to find a doctor they can trust, particularly when it comes to disclosing their sexual orientation or identity. As a result, some 18 percent of LGBTQ+ Americans simply avoid going to the doctor's office altogether out of a fear of being discriminated against, putting them at greater risk. For these people, expanding access to telehealth could provide a life-saving link to care that they may not otherwise have.

<https://www.lgbttech.org/post/making-telehealth-work-for-all-americans-especially-lgbtq>

Health Disparities

2015 US Transgender Survey found that:

~33% had at least one negative experience with a health care provider such as being verbally harassed or refused treatment because of gender identity

~23% of transgender people report not seeking needed health care in the past year due to fear of gender-related mistreatment

~33% did not go to a health care provider when needed because they could not afford it

Grasso C, Campbell J, Yunkun E, Todisco D, Thompson J, Gonzalez A, Brewster A, Keuroghlian AS. Gender-Affirming Care Without Walls: Utilization of Telehealth Services by Transgender and Gender Diverse People at a Federally Qualified Health Center. *Transgend Health*. 2022 Apr 11;7(2):135-143. doi: 10.1089/trgh.2020.0155. PMID: 36644515; PMCID: PMC9829154.



2022 U.S. TRANS SURVEY

Early Insights Report

47%

Nearly half (47%) of respondents had thought about moving to another state because their state government had considered or passed laws that target transgender people for unequal treatment (such as banning access to bathrooms, healthcare, or sports), and 5% had actually moved out of state because of such action.

Telehealth Benefits for LGBTQIA+ Patients

“Digital technologies have been used to improve research and clinical care for transgender and gender diverse (TGD) populations through various modalities; telemedicine, telehealth and mHealth. Digital health technologies, including HIT-enabled clinical decision support, telehealth, telemedicine, and mHealth, offer innovative ways to improve health care access, improve quality of care, and reduce health disparities for TGD populations, including and beyond HIV outcomes, through enhanced care delivery, clinician education, and enhancing social support networks.”

Radix AE, Bond K, Carneiro PB, Restar A. Transgender Individuals and Digital Health. *Curr HIV/AIDS Rep.* 2022 Dec;19(6):592-599. doi: 10.1007/s11904-022-00629-7. Epub 2022 Sep 22. PMID: 36136217; PMCID: PMC9493149.

Benefits for LGBTQIA+ Patients



Increasing access to clinicians trained in gender- affirming care

Ensures TGD patients access to care regardless of geographic location

Creating a Welcoming and Inclusive Health Care Environment

Impact health outcomes and disparities

Meet patients where they are

The pandemic has reinforced the importance of an individual approach to treatment for engaging some of the hardest to reach populations in care. The approach of meeting clients “where they are,” both physically and in their health journey, is critical to engagement.

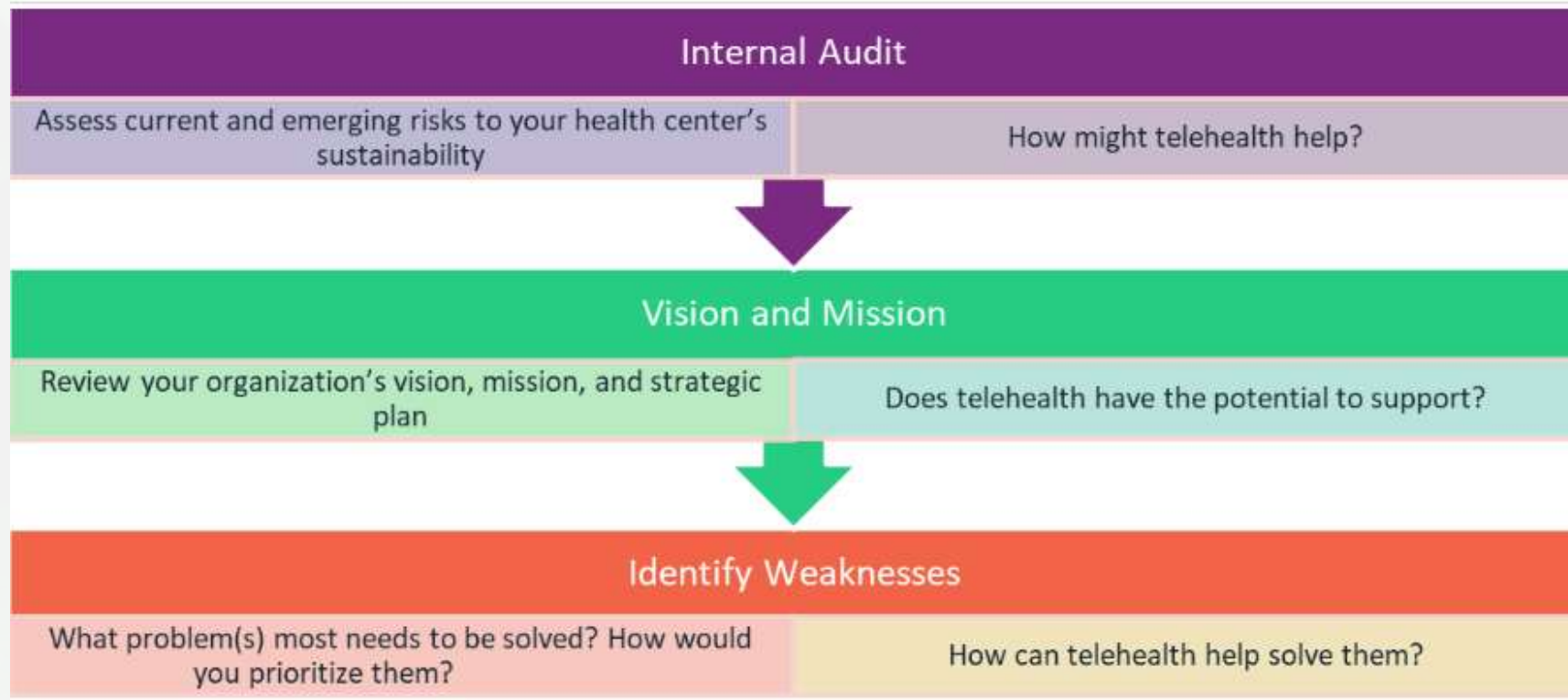


CULTURAL TRANSFORMATION

**Patients positioned at the
center of design**

Program Planning

considerations prior to diving in



Implement a Needs Assessment

Patient Needs Assessment

- Review Data, Patient Surveys

Integrate All Members of the Care Team

- End-user involvement in planning process

Consider Including Patients in Design

- Community Advisory Boards (CABs)

Telehealth Workplans

- Implementation plan for initiatives

Program Planning

Technology Challenges to keep in mind

HIT Products

- Integration into EHRs

Telehealth platforms have limitations

- Participant limits
- One size does not fit all
 - Only offer one modality (i.e., web based or app)
 - Integrated into patient portals
 - Language/Cultural/ASL

Socioeconomic Considerations

- Expensive
- need \$ to support innovation and care

Program Planning

Strategies to adopt early on in planning

Incorporate robust provider & staff resources – support services

Video First Approach – set expectations amongst staff & patients

Harness multidisciplinary teams for planning and quality assurance

Examples Include:

~Technical support & guidance in real-time. Phone # to reach a live person for staff & patients

~Messaging to patients – early & often

~Create diverse teams engaged in program planning. Can we recruit patients to participate??

Technical Support for Patients & Providers



Pre-Visit Planning

Questions to consider prior to the telehealth visit

Can the patient log on?

Does the patient know who to contact in case of issues?

Can their device, browser, and other software support the visit?

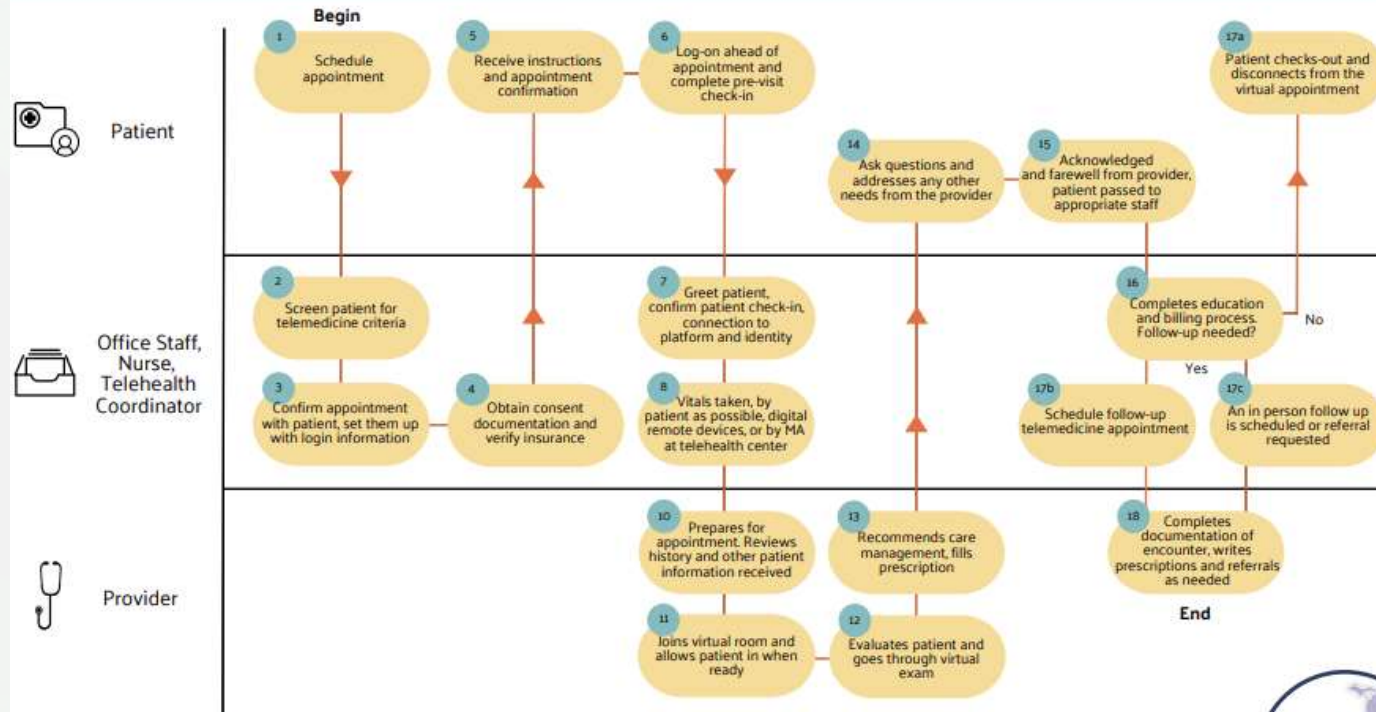
Does your vendor offer a test program or site?
Is the internet connection stable?



Sample Workflow

— Patient-Provider Telehealth Workflow —

Workflow will vary between states and institutions, with staff being responsible for varying sets of tasks from location to location. This is to give a general overview of the telehealth process. All organizations must maintain HIPAA compliance with the telehealth regulations and follow local and federal laws.



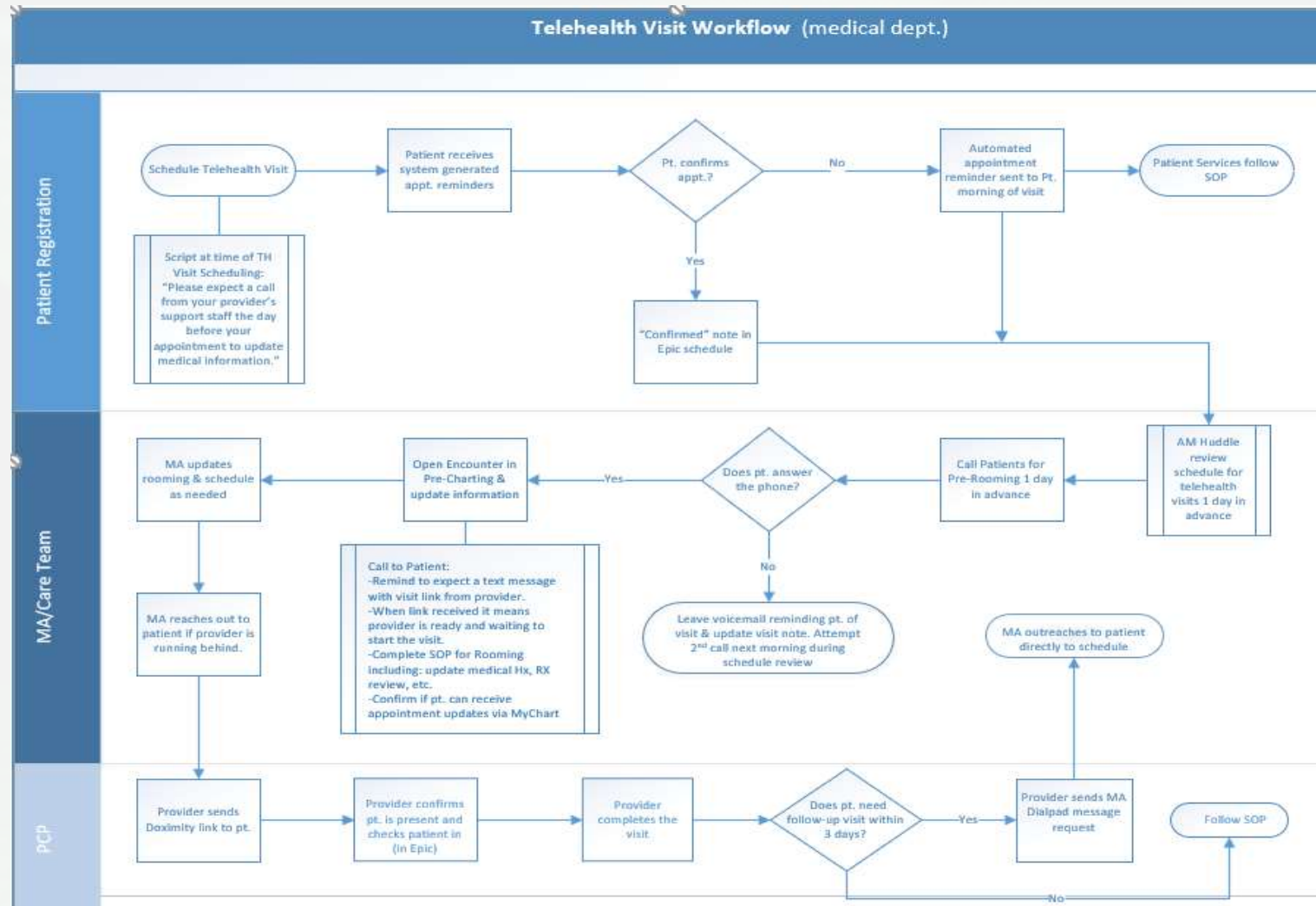
[@umtrc.org](#) [@UMTRC](#)

[Click here for other Sample Workflows](#)

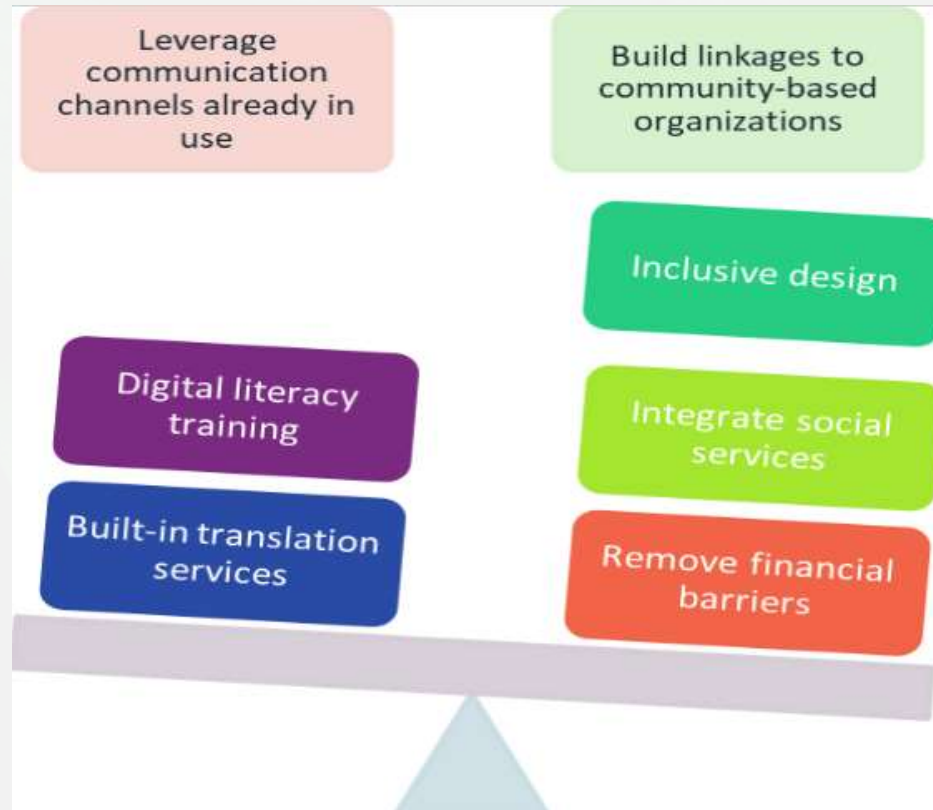
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**Integrated
Care
Visit
Workflow
Sample**



Ensuring Equity



Technology Equity

Technology equity is a social justice issue.

As telehealth technology becomes more prominent in health care, disparities in technology access and literacy among clients will widen existing health disparities. Therefore, technology access and literacy are social determinants of health to be included in treatment plans. In addition, prioritizing this issue will not only improve health but also social supports and conditions. Comfort and ability to participate in technology is fundamental to maintaining connections, obtaining and maintaining a job, and accessing basic needs.

<https://store.samhsa.gov/sites/default/files/pep21-06-02-001.pdf>

Increase Access for Patients

~Connect patients with devices

~Consider pilot programs with a subset of providers and patients for PDSA

~Choose a platform that allows patients to test their connection prior to their visits

~Involve care teams; MAs call patient day prior to ensure comfort level with technology

~Encourage clients to try telehealth, and reminding clients that they can discontinue telehealth at any time and have their visit on-site

Primary Drivers

Building a patient-centered & equitable telehealth program

~Strategy & Leadership

~Clinical Integration

~Providers, Staff & Patients

~Technology & Tools

~Reimbursement & Policy

Digital Tools Equity Assessment

1. Technology Needs
2. Language & Communication
3. Personal & Data Privacy
4. User Focused

HITEQ CENTER

<https://hiteqcenter.org/Resources/HITEQ-Resources/telehealth-and-digital-tools-equity-assessment>

Equity Framework

What:

Equity and community input are embedded in and drive health center strategy decision-making for telehealth care delivery.

How:

- 1) Practice collective reviews of telehealth policies to prevent “gatekeeping”
- 2) Create opportunities for community to share decision making about telehealth
- 3) Establish diverse working groups to review policies

What:

Patient choice and needs drive decisions regarding the mechanism(s) of their telehealth care; virtual supports to address needs are embedded in clinical systems

How:

- 1) Understand what the access points are for telehealth and allow for patients to utilize any access points
- 2) Integrate fields in clinical systems to document patient choices/preferences and needs for telehealth care; regularly confirm/update this information

What:

Policies directly identify equity as a priority drive decisions; telehealth advocacy efforts are informed by equity priorities/data and community input.

How:

- 1) Collect accurate data that is representative of the patient populations being served to identify who is and is not able to access telehealth
- 2) Monitor closely the developments in industry, policy, and reimbursement that will or may impact equity and/or telehealth goals

Equity Framework

What:

Providers have cultural competency

How:

- 1) Intentionally engage people in the community in telehealth decision-making
- 2) Deploy telehealth navigators to access patient digital access and provide support
- 3) Measure who is and who is not accessing telehealth services and why

What:

Technology is structured to enable flexibility/facilitate engagement in telehealth

How:

- 1) Intentionally create and actively engage in partnerships with community organizations that promote technology and those that enable access
- 2) Partner with vendors who are committed to and experienced in working with diverse populations (e.g., language needs, tech literacy)

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How Can Technology Have an Impact?

1. Equity/Access
2. Patient satisfaction
3. Improved health outcomes
4. Quality of Care and Services
5. Fiscal Performance



Tips for Expansion

Consider other ways technology can be used to help improve the care you provide:

- New modalities such as RPM, asynchronous specialty consults, etc.
- Continuous provider & patient education
- Cultivating trust and building relationships during the visit

Planning Telehealth Workflow (HRSA)

https://telehealth.hhs.gov/documents/Plan_Your_Telehealth_Workflow_05-17-2023.pdf

Key Initiatives to Sustain

- ✦ Care Team Integration
- ✦ Health Equity Framework
- ✦ Collecting & Examining data to identify care gaps/opportunities

Resources

Telehealth for LGBTQIA+ Patients:

<https://telehealth.hhs.gov/providers/health-equity-in-telehealth/telehealth-for-lgbtq-patients>

Health Equity in Telehealth:

<https://telehealth.hhs.gov/providers/health-equity-in-telehealth>

Recommendations for Collecting SO/GI Patient Data:

<https://fenwayhealth.org/new-paper-offers-recommendations-for-collecting-so-gi-patient-data/>

Privacy & Security: <https://www.hhs.gov/hipaa/for-professionals/privacy/guidance/telehealth-privacy-security/index.html>

Telehealth Playbook for FQHCs:

<https://playbook.fqhctelehealth.org/>

The National Consortium of Telehealth Resource Centers:

<https://telehealthresourcecenter.org/>

Questions?





Thank you

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