

Telehealth Consumer Listening Session

Summary

December 5, 2020 2:00-4:00pm

Background

On December 5, 2020, the Oregon Health Authority (OHA) and the Department of Consumer and Business Services (DCBS) held a Telehealth Consumer Listening Session (“consumer listening session”) for members of the public and consumer advocates. In addition, consumers were invited to email comments to OHA via email at community.outreach@state.or.us. The consumer listening session was attended by more than 50 individuals, with four consumers/consumer advocates giving prepared testimony and an additional six individuals sharing testimony and feedback throughout the live session. Additionally, OHA received 12 emails from consumers sharing telehealth stories.

The purpose of this summary is to share highlights from the live consumer listening session and emails collected from consumers between December 1 and December 5, 2020. This summary was prepared in lieu of recording the consumer listening session, to provide more privacy for the individuals who shared their stories. These stories include highlights of experiences from 22 individuals and may not be representative of general consumer experiences in Oregon.

The consumer listening session was a part of a three-part series of listening sessions, which also included a session aimed at providers and a session aimed at commercial health insurance companies. Recordings for the other listening sessions are available [here](#).

Highlights and themes from consumer testimony and emails

The following is a summary of the main themes raised by consumers and consumer advocates about telehealth in Oregon, including those provided by email and those provided at the live listening session on December 5. Direct quotes illustrate each theme.

Telehealth can be difficult or even impossible for some Oregonians to access, such as those without limited access to the internet, phones, or computers.

I receive 750 minutes of talk time each month. The minutes were increased due to the shutdown but then were discontinued a couple of months ago. As a result, I was cut off in the middle of a phone appointment and had to wait till the next monthly cycle. --Consumer email

... the people who benefit the most--our elderly--are least able to use the service. Case in point, my 85-year-old mother. For OHSU, where the bulk of her doctors/specialists practice, their virtual visits are in their online portal. One has to log in, go to the virtual mailbox, etc., to start the visit.

My mother has an iPad, can read her email and click on a link for a Zoom or other meeting. She can't do these logins with multiple steps, neither can my 75-year-old mother in law. And I'm sure they are not the exception but rather are representative of many people their age. --Consumer email

For the folks experiencing homelessness and other issues...those are the people my heart goes out to who need care the very most. So I just hope to find ways to sort of bridge those gaps and make it accessible for them as well. --Consumer testimony

Talking to our Latinx community here in the Rogue Valley what we're seeing is...many of the families don't have laptops, they're not very computer savvy and all of that, so for us having to do the whole medical virtual calls and all that they are really struggling with that. ... with the fires that happened this year it basically, you know, left many of our families homeless or living together three-to-four families in a little home, so that's been one of the concerns we're hearing on the ground is how are the doctors going to see me. --Consumer advocate testimony

Zoom or video connections are very spotty as we live in a rural area, no broadband but we use a satellite that really varies with its strength of connections. I want to update our modem but that costs, to us, \$300 if not more. I dislike video calls for that reason. --Consumer email

Telehealth can also be challenging for other reasons...

One consumer shared that telehealth was difficult for her children.

I would love to get them [my children] back into services...[it's] difficult over the telehealth because...like when they are sitting in the room their attention is more, much easier to grab onto.

... I don't prefer telehealth, especially for my children. --Consumer testimony

An advocate shared that for people with behavioral health conditions, access to out-of-network providers via telehealth is critical and encouraged the state to require this of commercial health plans.

[People with behavioral health conditions] have to access behavioral health services out-of-network at a significantly higher percentage than medical/surgical [services]. There is not parity in our services and by excluding out-of-network providers from the [State's telehealth voluntary agreement with commercial insurers] directive that has excluded a lot of care delivery in a time of need. One thing we encourage DCBS to do moving forward is to include out-of-network directives and coverage moving forward post pandemic. --Consumer advocate

For others, Telehealth is a great option “for those services that make sense.” Telehealth can even make accessing care easier for those with barriers to in-person care, such as those with childcare, transportation, or mobility challenges.

One [of my telehealth visits] was a follow-up after a test with a specialist and I thought that was really appropriate. I would have just sat in his office and talked to him anyway; there was no difference between me sitting there and being on the computer. --Consumer testimony

I live in Sandy, 35 or 40 minutes to go to town. Every time I need to see a specialist I need to have a child care provider and money on top of that...I'm waiting my time on the traffic as well. --Consumer testimony

I had some really great experiences with telehealth and it made it easy for me with mobility issues to access the doctors. --Consumer testimony

Consumers would like to have choice and options between a telehealth visit and in-person visit.

Choice should be between the patient and provider as to whether or not they have a video visit versus live and in-person. --Consumer testimony

It would be great to have a hybrid of telehealth and in-person opportunities to offer the choice for consumers. --Consumer testimony

Telehealth should be a permanent choice not dictated to people. --Consumer testimony

Depending on the health issue, some people think a video visit is best, or that in-person is needed. Some have questions about security or privacy.

[With a video visit] you can't see what's going on with the rest of my body that could cause a danger...so you have to be very careful. --Consumer testimony

... how safe is our information and whatnot through the system? So, I kind of get a little nervous, but then I've got nothing to hide. --Consumer testimony

Video allows for more context in the conversation (than audio-only) and knowing you have the provider's full attention. --Consumer testimony

Telehealth has helped people stay safe and avoid exposure during the pandemic and during recent disasters in Oregon.

My house was only level 1 evacuation level but the smoke was so bad in the house I couldn't stay. So, I left to stay in Gresham with my daughter's in laws. She evacuated from Sandy that was at level 2 with her husband and grandson. Here we were 3 units of family staying under one roof during the Covid pandemic. I needed medical care...but I didn't want to go to a medical facility to risk getting exposed to

Covid. So, I opted for a phone consult to reduce my risk. I was diagnosed over the phone and was able to get the prescription I needed. --Consumer email

I have had a video appt with my general practitioner, and I am so thankful that was an option. I have really been struggling with mental health and really needed guidance. I was too scared to go in person as my son, husband and I are at high risk with COVID-19. --Consumer email

The state should continue to seek feedback about telehealth is going for consumers, and to use additional strategies for those who are hard to reach.

Encouraging providers to have that immediate feedback loop to ask if that person got what they needed out of the session, if they felt that sense of connection and that they were heard and respected – I think would go a long way as we continue to evaluate the situation. --Consumer advocate

My state senator forwarded your announcement of a listening session for feedback on telehealth. What struck me was the irony of wanting to hear from people -- via Zoom -- who have tried "but not been able to get care by phone or video because [they] don't have access to a phone or good access to video or the internet." --Consumer email