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# Audio Only Telehealth

January 26, 2021

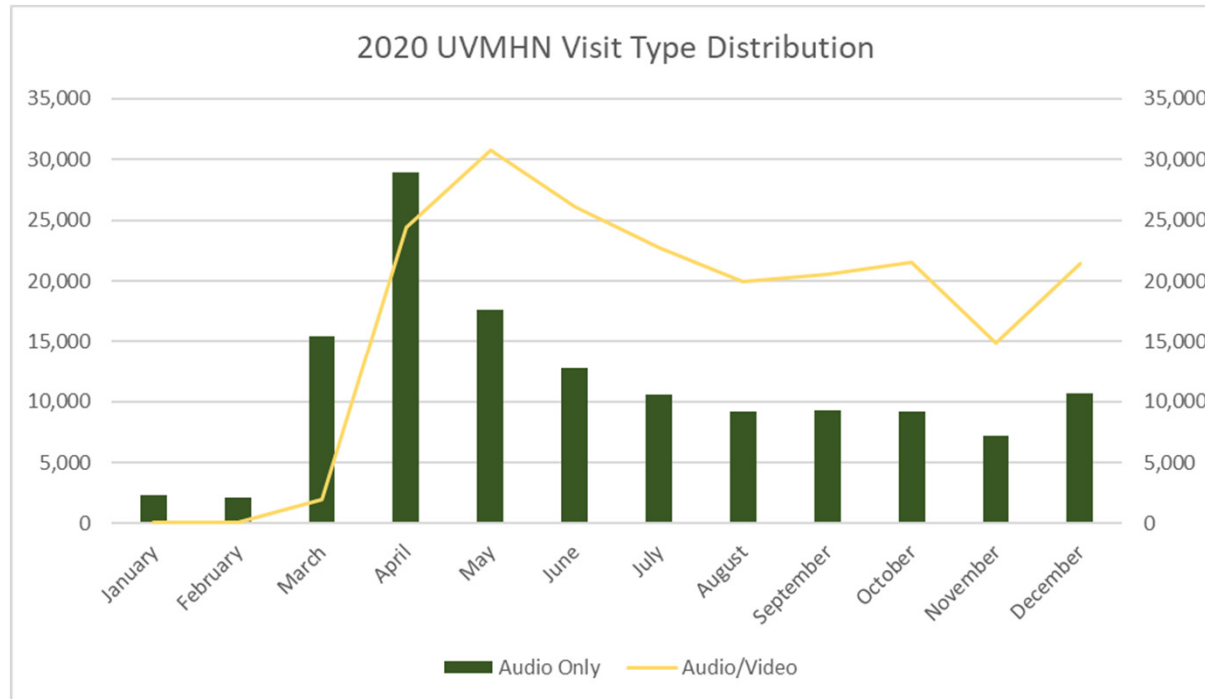
Todd J. Young, Network Director of eHealth Services

THE  
University of Vermont  
HEALTH NETWORK

# Audio Only Telehealth

- UVMMMC, CVMC and PMC volume in 2020: 125,080
  - UVMHN volume in 2020: 135,270
  - April, 2020 saw the highest volume
  - Volume leveled out after May, 2020 and continues to be around 8,000 per month
- The following Health Service Areas (HSAs) make up 48% of this volume:
  - Berlin, VT
  - Middlebury, VT
  - St. Albans, VT
  - Rutland, VT
  - Morrisville, VT
- Highest utilizers have been Family Medicine/Internal Medicine, Cardiology and Psychiatry

# Audio Only Telehealth



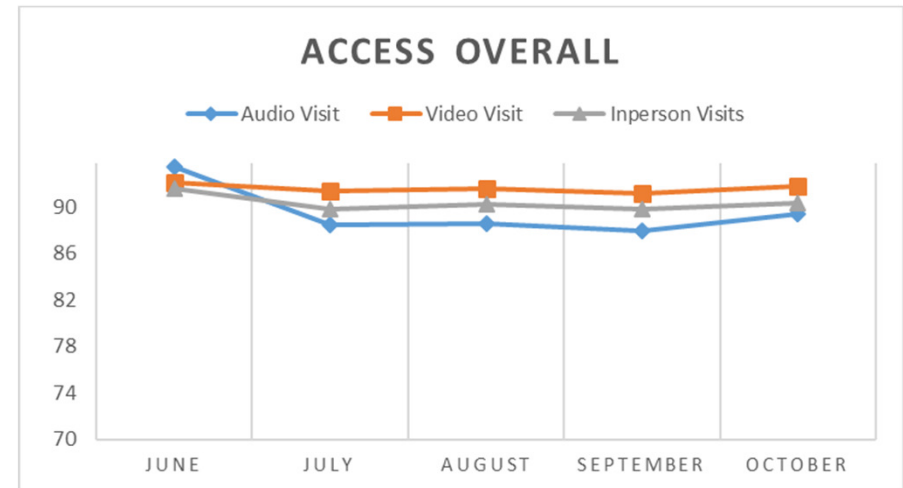
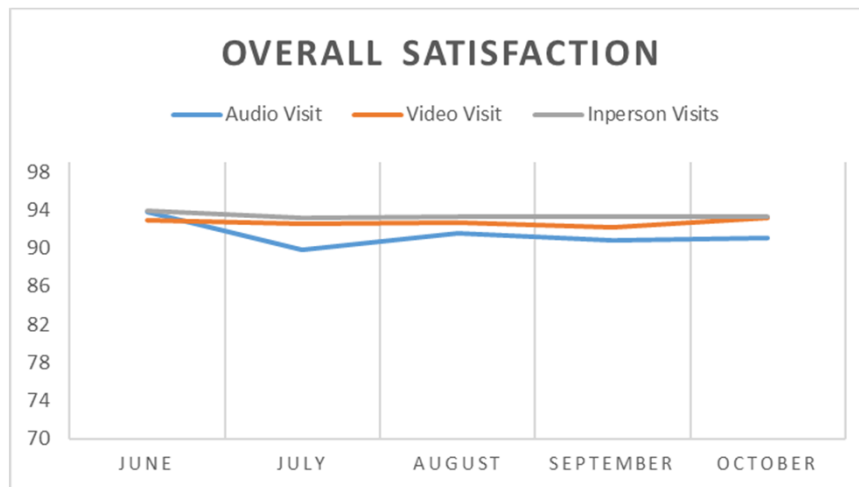
- More audio only than audio/video until April, when distribution changed from 54% audio and 45% audio/video to 36% audio and 64% audio/video
- Audio only volume remains substantial

# Audio Only Telehealth

What we are hearing:

- Audio only is a good option for when quick check-ins are needed, and for when there are technical barriers
  - “Our internet is not good enough to do video chats or cell phone calls. We have to use tried and true ‘land line’.”
  - “Provider simply called my cell number, which was no problem for this follow up visit.”
  - “No camera on my desktop. Phone call instead.”
  - “When only going over for lab results, the phone/video visits are great. We live over an hour from UVM– especially in the winter, these telemedicine visits are wonderful.”
  - “Excellent experience. I’m disabled and not able to do Zoom meetings. I was afraid they wouldn’t allow it and I would be without healthcare.”
- Connectivity remains to be a barrier around our region
  - This has an impact on the stability of an audio/video connection

# Patient Satisfaction



Note: Audio only satisfaction can include patients that started with video but needed transition to audio due to technical issue. It may effect satisfaction scores.

# Audio Only Telehealth

It's important that this remains an option for our patients because it allows:

- Patients access to virtual care when they do not have access to a device, broadband availability at their home or due to digital literacy.
- Provides the option of connecting with patients when either the patient or the provider has those barriers
- Care teams to continue providing care in a way which patients are already comfortable
- Care teams to focus on providing care and not acting as technical support when issues arise
- Quicker access to a care team when a check-in or triage is needed