

Telehealth Use, Interest and Barriers for Delivering the National Diabetes Prevention Program: Virginia, 2019



Survey and report completed by
the Virginia Center for Diabetes
Prevention & Education at the
University of Virginia.

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Survey Report: Use, Interest in and Barriers around using Telehealth for Delivering the National Diabetes Prevention Program (National DPP)

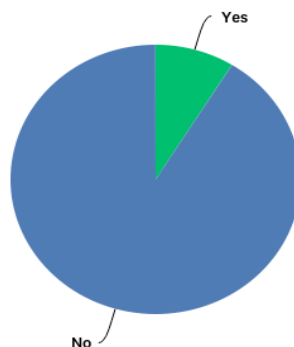
Introduction

A survey was conducted in 2019 to all National DPP organizations in Virginia to assess their use, interest in and barriers to using telehealth for delivering the National DPP. The Virginia Center of Diabetes Prevention and Education, a National DPP lifestyle coach training site and technical assistance center for diabetes prevention, reached out to the 37 organizations that lead in-person National DPPs in Virginia. Some of these organizations have multiple National DPPs sites in Virginia. The survey was not administered to the Airforce or Giant Foods since these are national programs or to YDPP's that we know are no longer providing the program. We had a 97% response rate. The following summarizes the organization's response to the survey.

Use of Telehealth for National DPP in Virginia

As of 2019, only three (8.3%) organizations in Virginia use telehealth to support their delivery of the National DPP.

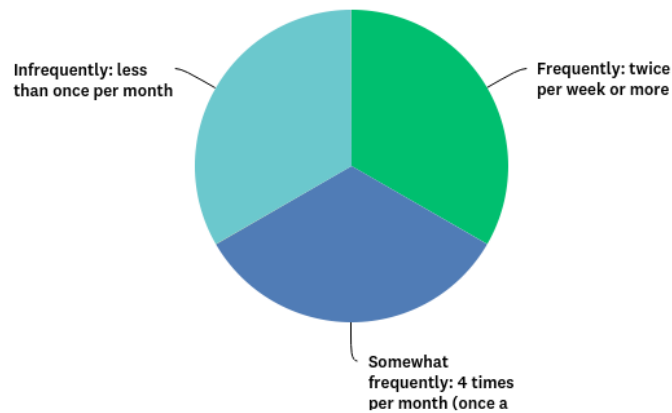
Q1 Does your organization use telehealth to deliver any part of your National DPP?



Of those organizations using telehealth, 100% use live video conferencing to deliver classes, 33% (n=1) use remote monitoring of body weight and 33% (n=1) use phone in addition to videoconferencing as part of a pharmacy medical management approach to chronic disease management.

The frequency of using telehealth varies considerably with each organization and is dependent upon the number of cohorts they have occurring at any one time period.

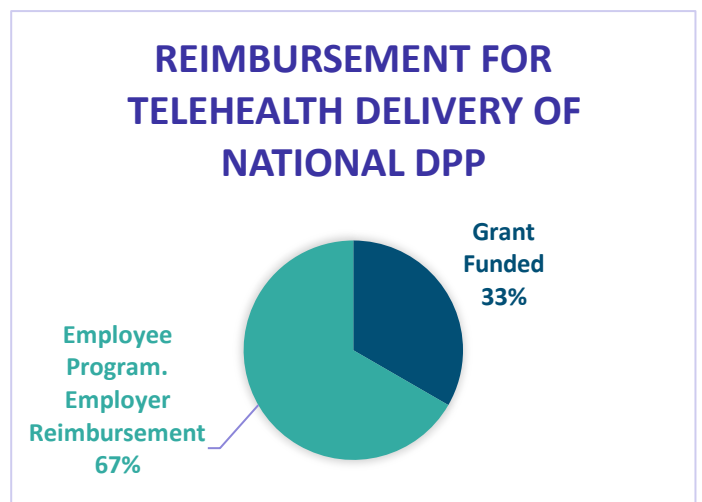
Q3 How frequently do you use live video conferencing to deliver the National DPP?



The video conferencing platform used varies by site and include Zoom, Skype, Vidyo and GoToMeeting.

Billing and Payment for Delivering National DPP using Telehealth

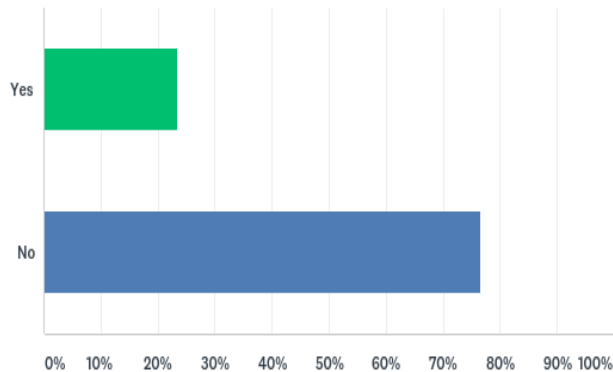
No organizations that use telehealth for delivering the National DPP bill health insurance companies for reimbursement of their services. They were reimbursed as depicted in the following figure.



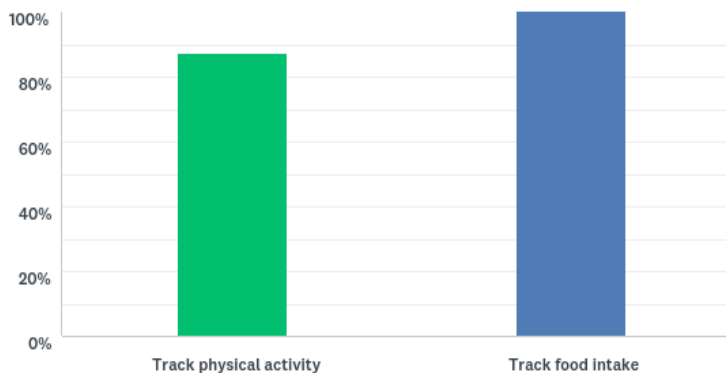
Use of mHealth in National DPP for Engagement

All organizations were asked about their use of mHealth to engage and support their participants within the National DPP. Currently 22% of National DPPs in Virginia use mHealth within their National DPP delivery. Physical activity and food tracking were the only mHealth apps used within National DPPs in Virginia.

Q9 Does your organization use mhealth to engage patients in your National DPP?



Q10 What do you have your patients use mhealth apps for? (check all that apply)



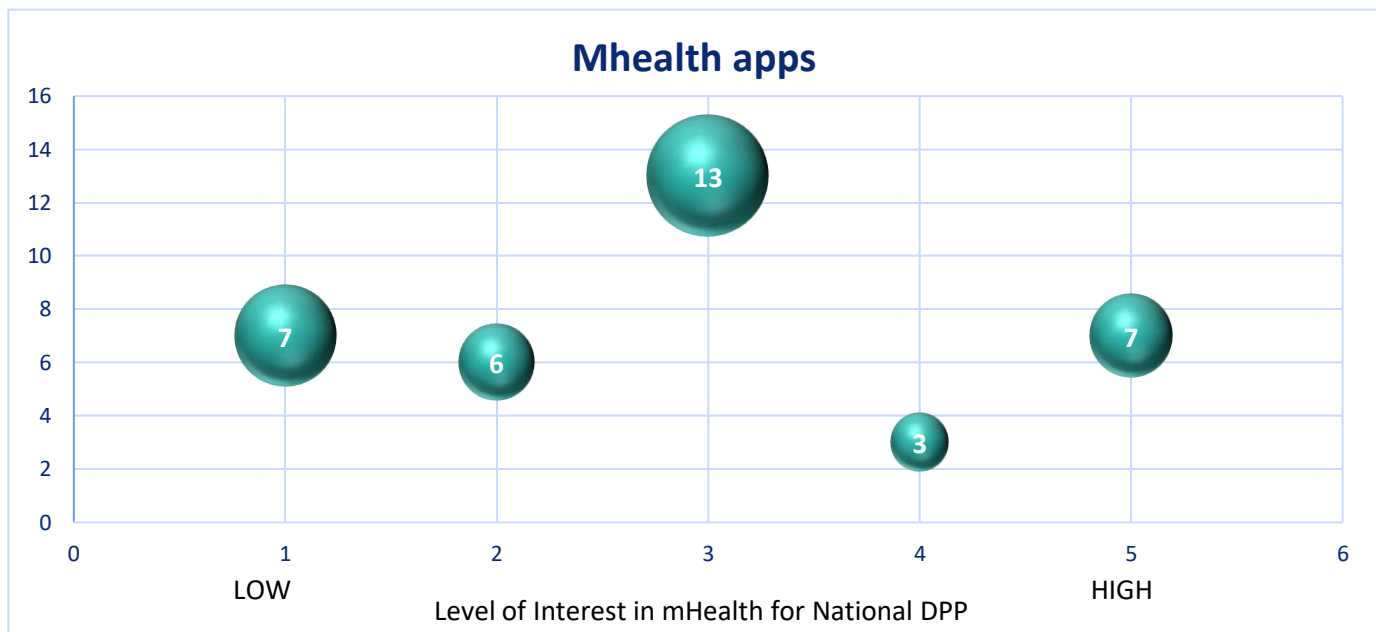
Technical and Organizational Support

Of those who use telehealth currently, two (67%) of the longer-standing programs have excellent tech support from their organizations. The newer, grant-funded program had no technical support to deliver their program. Among all National DPPs in Virginia, 56% reported that their organization provides a low amount of encouragement to use telehealth whereas 19% of organizations reported a high level of encouragement.



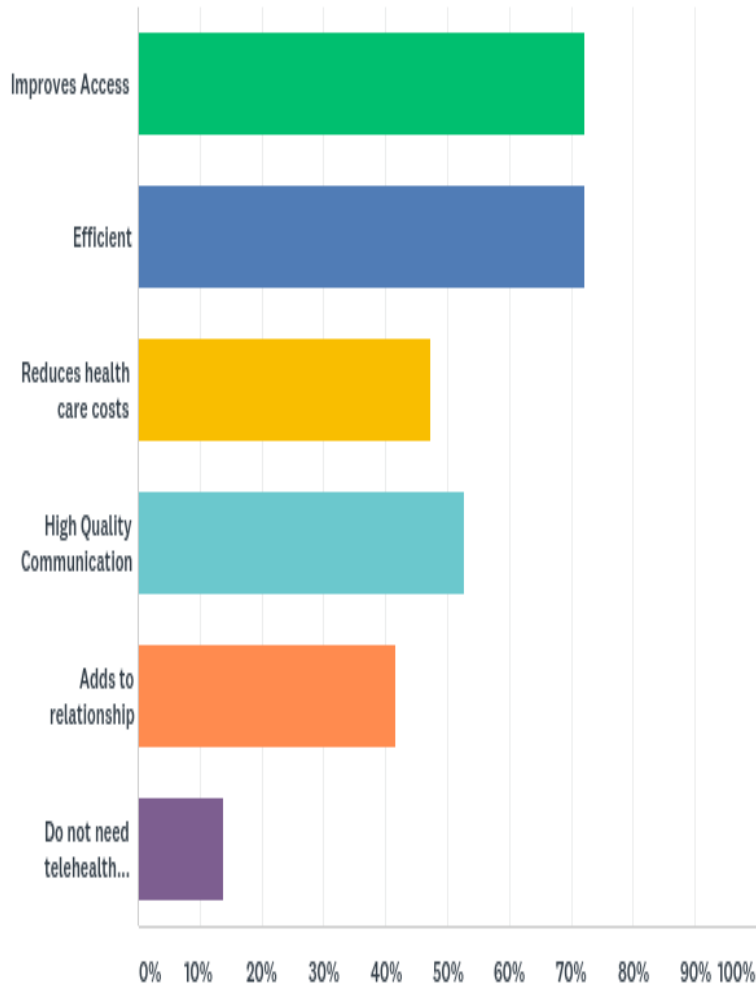
Interest in Telehealth as a Delivery Aid for the National DPP

On a scale from one to five with five representing “Very Interested”, National DPP’s in Virginia were *interested* in using live video conferencing (mean weighted score 2.8) to deliver their program and mHealth (mean weighted score 2.9) to engage participants and track their behaviors but interest varied considerably.



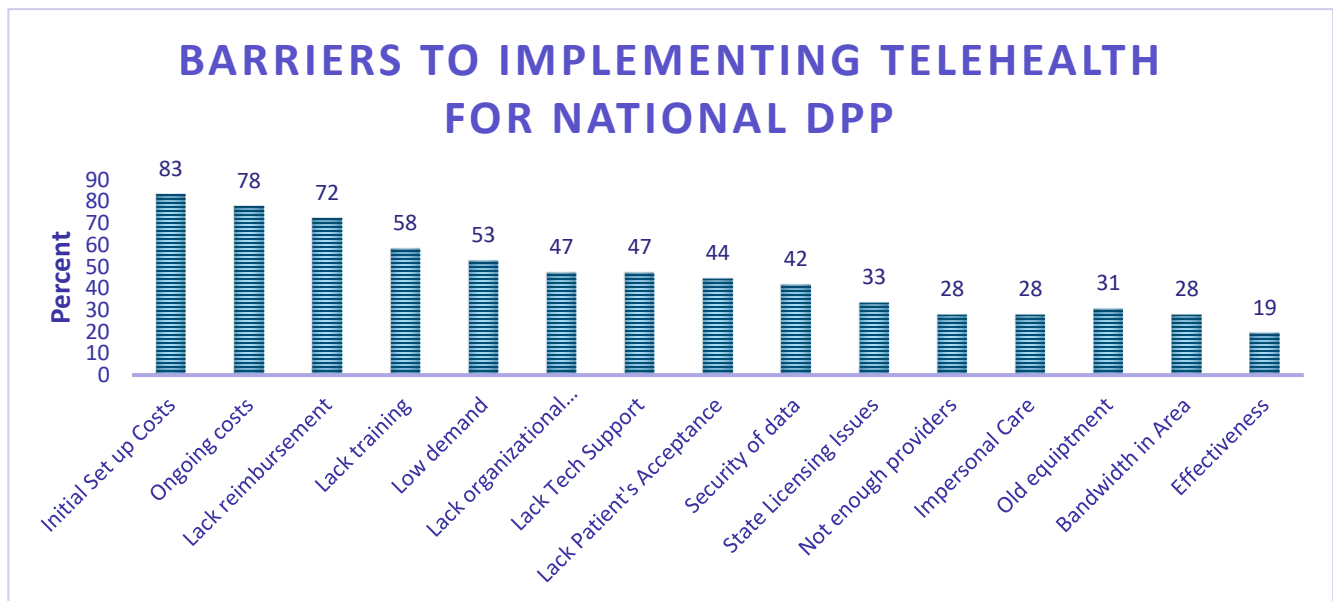
Over 70% of the respondents believe that the primary reasons to use telehealth for delivering the National DPP was “Improved Access” and “Contributes to a more Efficient Use of Time”.

Q13 What would be your organization's reason(s) to use telehealth services for National DPP in the future? (check all that apply)



Barriers for using Telehealth for National DPP in Virginia

The top three barriers to using telehealth in delivering the National DPP in Virginia are all financial barriers and include initial set up costs (82%), ongoing costs (79%) and lack of reimbursement (70%). Fifty-nine percent of respondents reported a lack of training in telehealth as a major barrier. A minority of respondents reported low bandwidth in area as a barrier to using telehealth. This may reflect a low number of National DPPs in more rural areas of Virginia that lack bandwidth.



Summary

Only 8% of National DPPs in Virginia currently use telehealth in delivering their program. The primary sustainable way to get reimbursement for telehealth delivery of the National DPP is currently through providing the program to larger employers who reimburse local National DPP organizations to provide the program to their employees. More programs (22%) use mHealth in their programs than live video conferencing; the primary mHealth applications are for tracking physical activity and dietary intake. There is solid interest in using telehealth primarily because providers believe it will increase access and efficiency but organizational encouragement to use telehealth is low. The greatest barriers to using telehealth were financially based including high set up costs and lack of reimbursement. The majority of providers reported a lack of training in telehealth and 75% were interested in further support and training.