

# Defining the ‘digital divide’

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## What it is

Telehealth is here to stay. And while it has the *potential* to dramatically increase access to care, many patients face barriers that prevent them from accessing virtual care options. These barriers constitute the **‘digital divide,’** which includes inadequate access to technology, unreliable internet coverage, and low digital literacy. In fact, the [American Medical Informatics Association](#) **asserts** that, “access to broadband is, or will soon become, a social determinant of health.”

## Why it matters

There is a wealth of data demonstrating that the digital divide is greater for some populations:

- The [Pew Research Center](#) found that only 58% of Black Americans and 57% of Hispanic Americans reported owning a desktop or laptop computer. 23% of Black Americans and 25% of Hispanic Americans reported being “smartphone only” internet users, meaning they lack traditional home broadband services.
- [Pew](#) reports that only 55-60% of American adults aged 65 and older own a smartphone or have broadband internet access.
- They also found that while 96% of Americans own a cellphone of some kind, among Americans making less than \$30,000 a year only 82% use the internet, only 71% have cell phones, and only 56% have home broadband access.
- Our [Consumer Virtual Visit Survey](#) reports that consumers making less than \$24,000 a year represented only 18% of all new telehealth users. Consumers making more than \$71,000 a year represented almost twice that amount, at 33%.
- An [Annals of Internal Medicine study](#) found that less than 40% of the people who live more than a 70-minute drive from a primary care physician have the internet bandwidth necessary for a telehealth visit. This demonstrates that physical access challenges can often manifest virtually.
- The [National Center for Education Statistics](#) reports that 16% of U.S. adults are not digitally literate, and adults who are not digitally literate are, on average, less educated, older, and more likely to be Black or Hispanic, or born outside the U.S.
- Collectively, **at least 1 in every 4 Americans** may not have the access to technology, access to the internet, or the digital literacy necessary to participate in video visits.

Left unaddressed, the digital divide means that widescale shifts to telehealth could actually exacerbate health inequities—not reduce them. As health care organizations iterate on the telehealth services they rapidly stood up this spring, they have an opportunity—and obligation to their patients—to address these barriers to virtual care.

## What to do next

Use our starter list to learn how organizations can promote telehealth equity in bridging the ‘digital divide.’ But remember: Change doesn’t happen overnight. Monitor your organization’s efforts and continually evolve your telehealth services to provide more equitable virtual care.

Source: “A Description of U.S. Adults Who Are Not Digitally Literate,” National Center for Education Statistics, May 2018; “Addressing Equity in Telemedicine for Chronic Disease Management During the Covid-19 Pandemic,” NEJM Catalyst, May 4, 2020; Advisory Board Covid-19 Consumer Survey, June 2020; “Ensuring the Growth of Telehealth During Covid-19 does not Exacerbate Disparities in Care,” Health Affairs, May 8, 2020; “Mobile Fact Sheet,” Pew Research Center, June 12, 2019; Physician Executive Council interviews and analysis; “Request for Comment – Actions to Accelerate Adoption and Accessibility of Broadband-Enabled Health Care Solutions and Advanced Technologies,” American Medical Informatics Association, May 24, 2017; “Smartphones help blacks, Hispanics bridge some – but not all – digital gaps with whites,” Pew Research Center, August 20, 2019; “The Limitations of Poor Broadband Internet Access for Telemedicine Use in Rural America: An Observational Study,” Annals of Internal Medicine, September 3, 2019; Physician Executive Council research and analysis.

# Starter list: How to bridge the ‘digital divide’ (page 1 of 3)



## Understand how the digital divide manifests in your community

- Collect patient demographic information such as age, location, and primary language spoken.
- Perform a simple digital needs assessment to screen for digital access and literacy during patient intake. There are several examples to pull from, such as the [City and County of San Francisco's Digital Equity Intake Form](#).
- Access the [FCC's Mapping Broadband Health in America maps](#), which overlay broadband access and health data at the national, state and county levels, to better understand your state's and county's broadband access.
- Leverage your regional payers' data on patient access and social determinants of health, when available.
- Work with schools in your community to access any data they might have on the digital divide. As more students work remotely, schools are likely to know which students lack digital access.
- Share national or local data on the digital divide with clinicians and executives at your organization, so they can champion solutions to improve access to virtual care.



## Evolve your telehealth offerings to be more accessible to vulnerable patients

- Offer phone visits to ensure access for patients who lack access to video technology.
- Offer virtual visits outside of traditional working hours to increase access for essential workers.
- Ensure that your telehealth offerings are accessible from multiple types of internet browsers and digital devices.
- Since research suggests that vulnerable populations are [less likely to use patient portals](#), offer video visit access points outside of your organization's patient portal.
- Guarantee virtual interpreter services for your English as a Second Language patients.
- Accommodate patients who are deaf or hard of hearing. [Options include](#):
  - Remote interpreting services on the same screen or platform
  - Remote interpreting services on a different screen or platform
  - Communication access real-time translation (captioning the visit in real-time)
  - Other accessibility services, such as relay services
- Ensure your organization is offering an adequate number of phone or virtual visits to meet patient needs; access our [Virtual Shift Estimator](#) to estimate the percentage of visits that *could* be virtual by specialty at your organization.
- Provide medical assistant (MA)-assisted virtual visits for patients who need assistance with video visits; the MA is in-person to collect data and facilitate the visit, but the physician or advanced practice provider (APP) consults virtually. This model works well where there are provider shortages – especially for geriatric patients, who often struggle with digital literacy but have chronic conditions that require consistent monitoring.
- If you don't have the existing staff capacity to evolve your telehealth options, consider contracting with a national telehealth vendor to provide additional coverage.

Source: Advisory Board Virtual Shift Estimator, August 20, 2020; "Covid-19: Guidelines for Health Care Providers – Video-Based Telehealth Accessibility for Deaf and Hard of Hearing Patients," Hearing Loss Association of America, April 17, 2020; "Mapping Broadband Health in America," Federal Communications Commission; Physician Executive Council interviews and analysis; "San Francisco Digital Equity Playbook," City and County of San Francisco, April 2018; Physician Executive Council research and analysis.

# Starter list: How to bridge the ‘digital divide’ (page 2 of 3)



## Connect patients with the technology necessary for virtual visits

- Share low cost broadband options in your market with patients.
  - Goodwill has a [resource page](#) that includes information on a free phone program and reduced-rate internet options.
  - National Digital Inclusion Alliance maintains a [list of low-to-no cost internet providers](#) nationally.
- Help connect patients who struggle to use manual technology with adaptive alternatives, such as assistive keyboards or mouse alternatives.
- If resources allow, invest in loaner programs to provide wireless-connected technology (such as pre-loaded tablets or phones) to patients that don't have any or lack digital literacy. The U.S. Department of Veterans Affairs [piloted an initiative](#) to provide tablets to high-need veterans and found that it improved health care access, even with low provider interest in the program.
- If resources allow, invest in strategically located communal telehealth resources for areas facing the greatest access challenges. Factors to consider include: distance from sites of care, public transportation infrastructure, economic indicators, presence of multi-family households, and broadband access.
  - For example, [video visit kiosks](#) placed in pharmacies, supermarkets, and other community locations. Or, [school-based telehealth](#) programs.



## Build patients' digital literacy so they can engage in virtual visits

- Create patient education materials that outline the visit's cost, what to expect from the care team, what patients need to do beforehand, wait times, the virtual rooming process, appointment length, what patients need with them during the visit, and follow-up steps.
- Make sure your education materials are compatible to be read via both phone and computer.
- Ensure that patient education materials are translated into at least one other language that is prominent in your community.
- Send pre-visit appointment reminders to patients that direct them to educational materials.
- If you don't have automated pre-visit outreach, call patients ahead of visits to confirm a technology plan and surface potential barriers, including:
  - Access to reliable home internet service
  - Access to a video technology such as a desktop, laptop, tablet, or smart phone
  - Access to physical materials required to conduct the visit. This will depend on the type of visit—more complex visits may require home monitoring equipment such as thermometers, blood pressure cuffs, or pulse oximeters. For simpler visits a patient may just require something like a flashlight to check their pupillary light reflex
  - App installation instructions and support
  - Tips for how to secure and maintain video permissions, such as: Not watching YouTube on your phone while in the virtual “waiting room”, because it can override the video permissions necessary for a video visit
- Consider leveraging latent staff capacity (e.g. medical students, hospital volunteers, non-clinical staff for whom projects have been paused amid Covid) to help provide basic pre-visit technology support for patients.
- Partner with local community organizations, such as your public library or community center, to offer digital literacy courses.

Source: "Free and Low Cost Internet Plans," National Digital Inclusion Alliance; "Staying Connected While Staying at Home," Goodwill; "School-Based Telehealth Makes Health a Priority for Teachers, Providers," mHealth Intelligence, January 17, 2020; "Two Healthcare Systems Use Telehealth Kiosks to Expand Reach," HealthLeaders, March 06, 2018; "VA's Tablet Program Puts a Positive Spin on Telehealth Expansion," mHealth Intelligence, September 25, 2019; Physician Executive Council research and analysis.

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## Raise community awareness of your organization's telehealth offerings

- Market the availability of telehealth options across multiple communication channels that will reach vulnerable patients. To use limited resources wisely, consider using the data you have collected to tailor outreach based on patients' demographic information. Channels should include:
  - Your organization's website
  - Your organization's social media platforms
  - Email outreach
  - Phone call or text outreach
  - Mailers
- Ensure that your organization's telehealth marketing materials are translated into at least one other language that is prominent in your community.
- Leverage community partners, who may know who requires access to care better than you, to raise awareness of telehealth services by giving them fliers or equipping their staff with scripting.
- Leverage staff members who specialize in developing strong, trusting relationships with patients (such as community health workers) to raise awareness of telehealth services.
- Equip care managers, front desk staff, and medical assistants with standardized outreach scripting and criteria to inform patients about telehealth options.
- Equip physicians to offer virtual follow-up visits and to explain the benefits of telehealth to their patients at the end of in-person visits.



## Help us add to the list. How is your organization bridging the digital divide?

If your organization is making additional investments to bridge the digital divide for your patients and you think other leaders should know about it, send a brief overview to Ryan Furr-Johnson at [RFurrJo@advisory.com](mailto:RFurrJo@advisory.com)