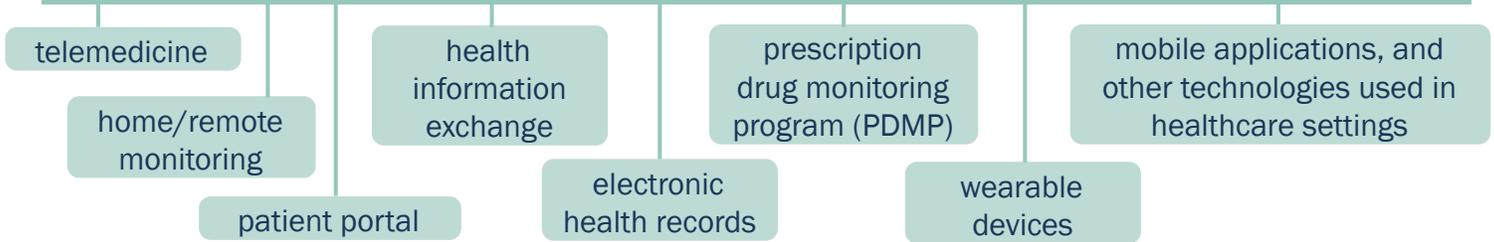


Leveraging Digital Health Tools to Advance Health Equity

SOUTHEAST

To address gaps in technology adoption that impact underserved communities, the National Center for Primary Care (NCPC) at Morehouse School of Medicine is examining the adoption and use of digital health tools by primary care clinicians in four southeastern states: Georgia, Kentucky, North Carolina, and Tennessee.

Digital health tools (DHT) include:



Southeast Demographics

Total Population: 32.2 million+

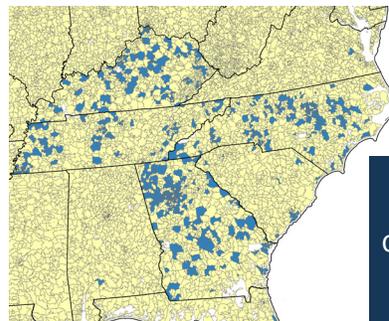
3% Asian | 20% Black | 4% Other | 74% White



Hispanic Ethnicity



Live in Rural Area

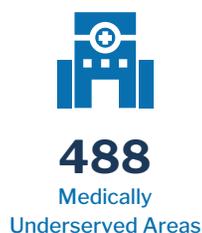


Number of Survey Participants in Southeast ZIP Codes

0 >=1

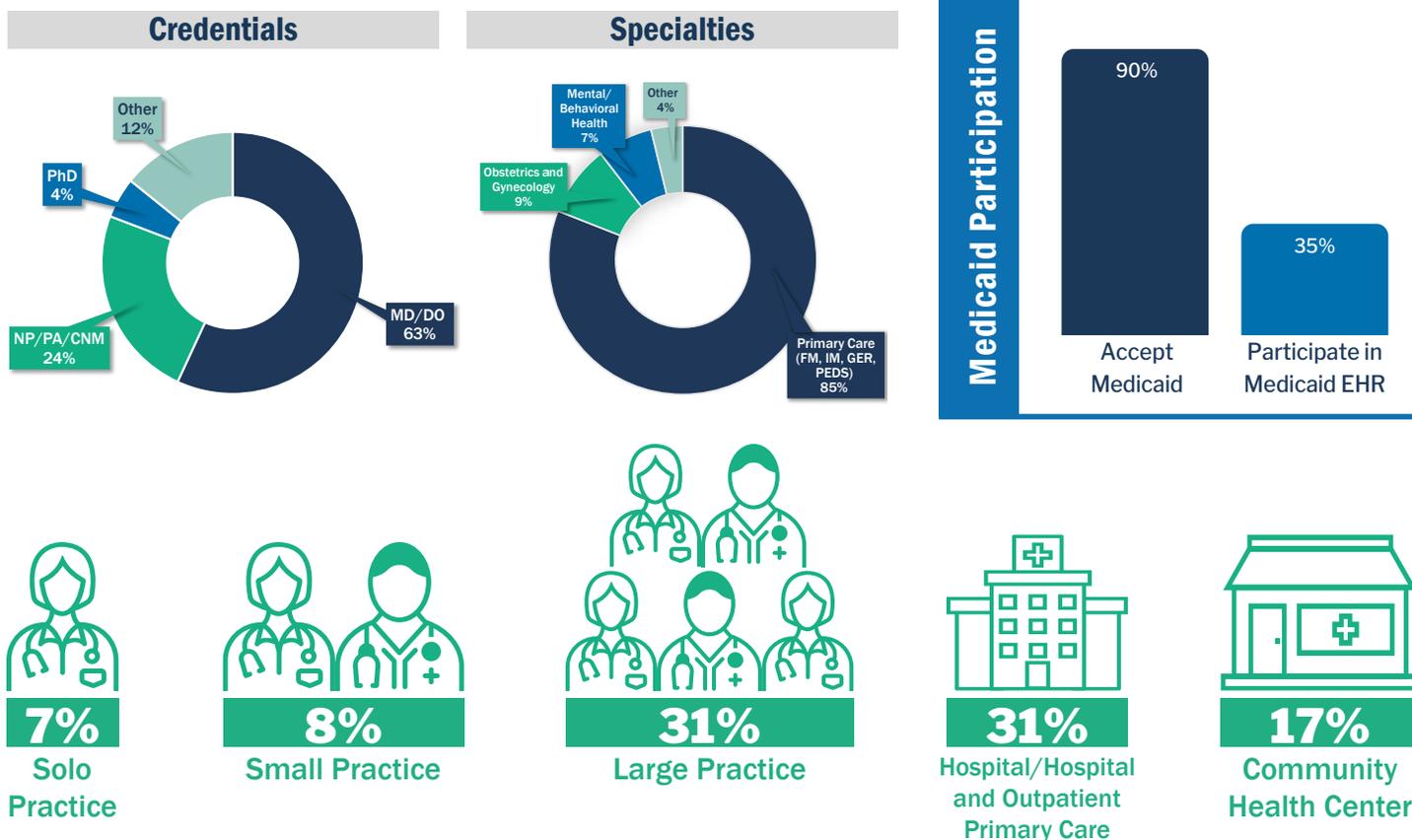
More than 1200 clinicians in the Southeast have completed the survey, highlighting the challenges and opportunities they have experienced using digital health tools.

Social Determinants of Health in the Southeast



Survey Participants Demographics

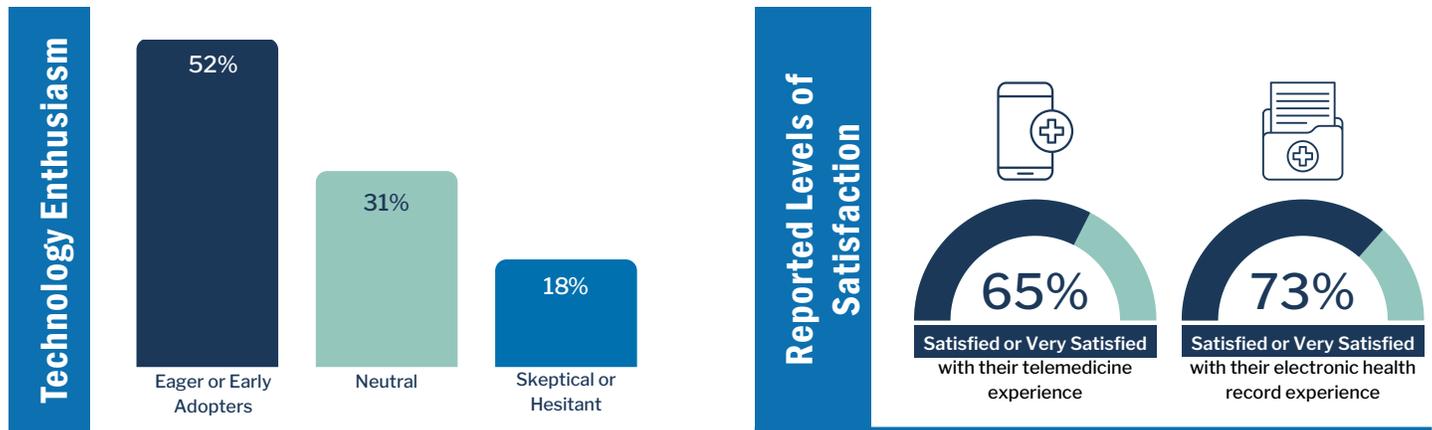
The majority of the 1200 clinicians who participated in the survey held MD or DO credentials, specialized in primary care, and practiced in urban areas. They reported being satisfied with existing DHT.



91%
of all survey participants practice in urban areas



9%
of all survey participants practice in rural areas



Current Digital Health Tool Use

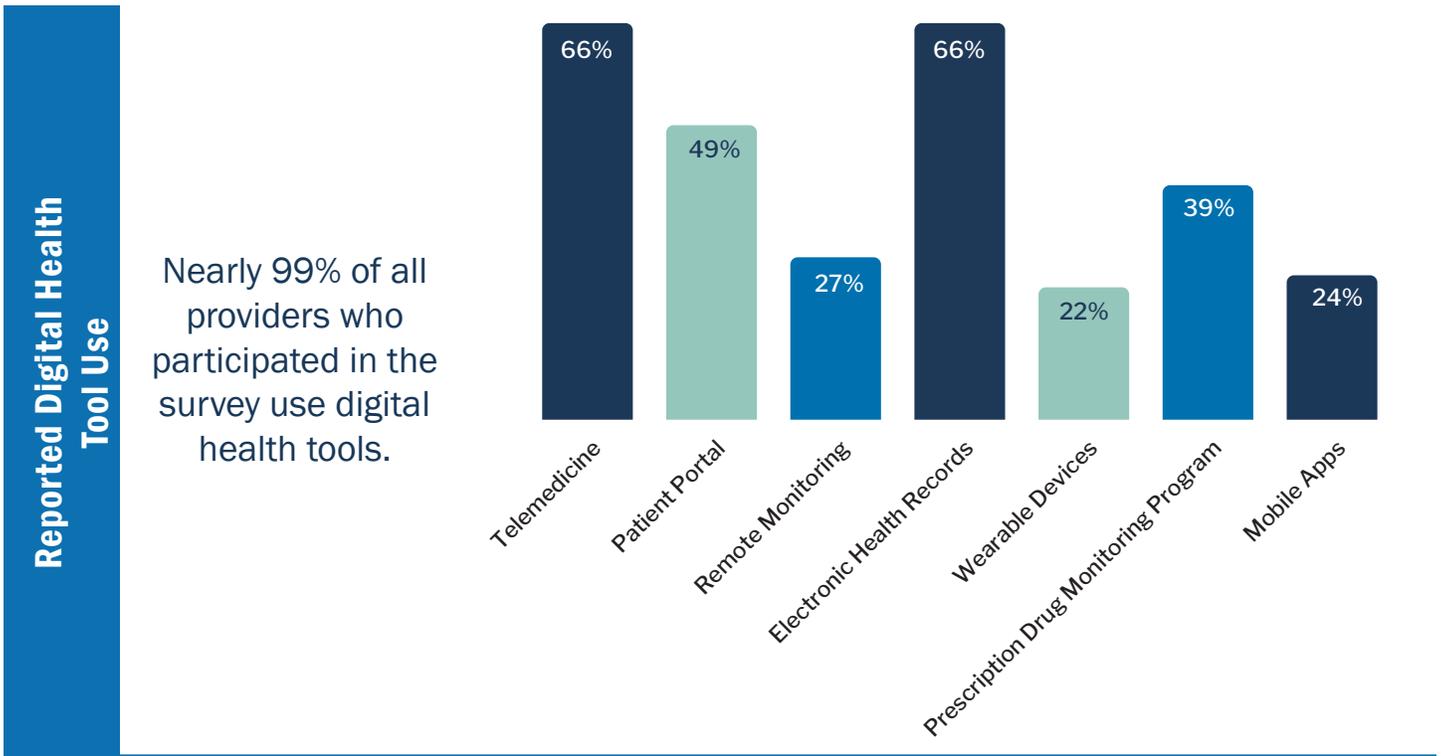


76% of respondents were connected to the State HIE

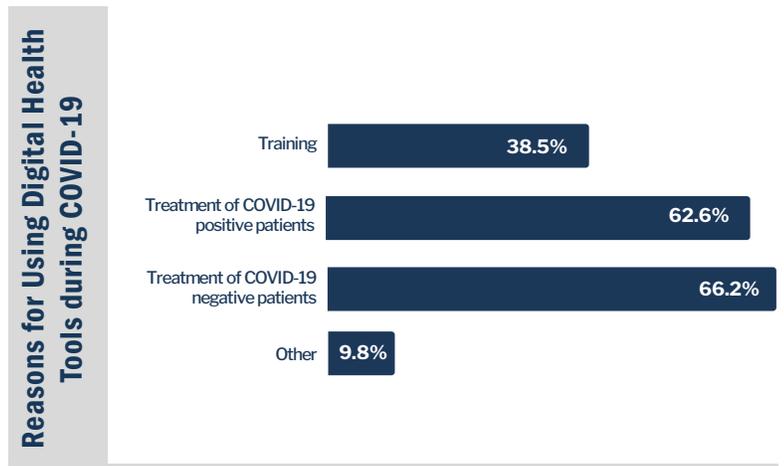
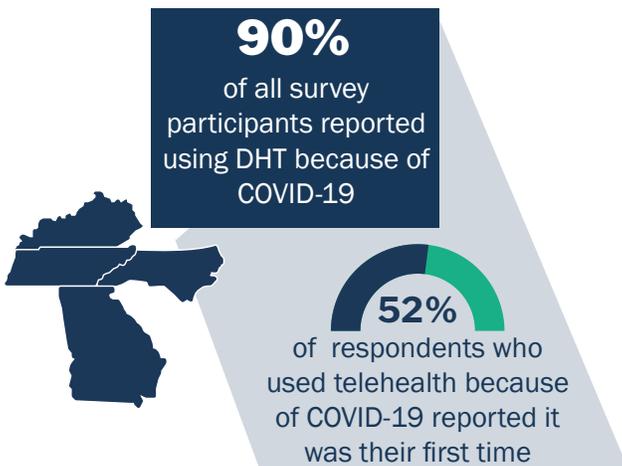


40.8% of respondents were using the State HIE

Seven in 10 providers reported being connected to the Health Information Exchange (HIE), but less than half reported using it.



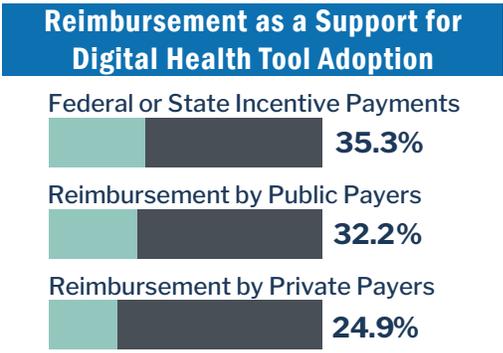
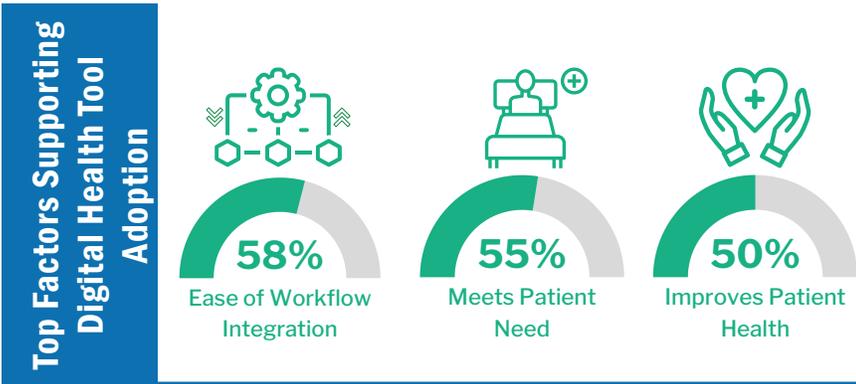
Digital Health Tool Use and COVID-19



Factors that Support and Impede Digital Health Tool Adoption

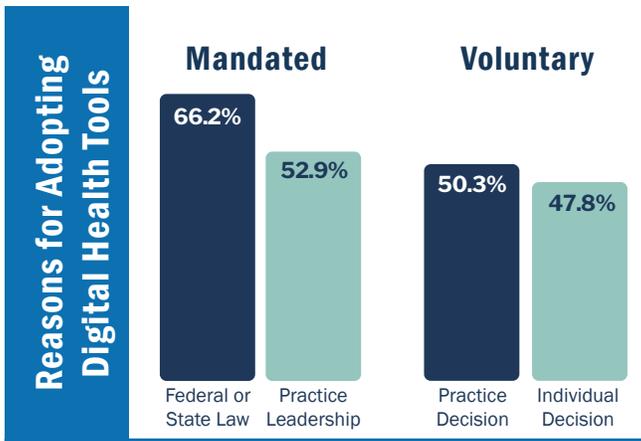
“ Why should I cater to the EHR? The EHR should cater to me.
-Focus Group Participant

“ ... I remember in the 90s when we first started trying to pull in EHR and it was extremely challenging. I’m just going to say that it was extremely challenging to go from taking notes and charts to putting it on and the computer. It was a very long and arduous learning curve for those of us of a certain age.
-Focus Group Participant



“ Traditionally, if [telehealth] is done well, families feel like if I call, they will help me and not if I call, I will be put on hold for two hours and be given an appointment in two weeks. So, it’s not so much the technology, but what’s happening when that phone is picked up, that’s important as well...
-Focus Group Participant

“ It’s really not always the technology, it’s who’s on the receiving end, how well that relationship is, how well it works, and what families get.
-Focus Group Participant



Reasons for Digital Health Tool Use after COVID-19

- Triage**: patients before visit to emergency department (for COVID and non-COVID related symptoms)
- Assessment**: of COVID-19 symptoms prior to referral to specialists and hospitals
- Chronic Care**: management
- Continued Access**: to care for rural and underserved communities