

# Policy Research & Development: Expanding Telehealth Access in Rural Virginia



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## Telehealth

“the use of telecommunications and information technology to provide access to health assessments, diagnosis, intervention, consultation, supervision, and information across distance.”

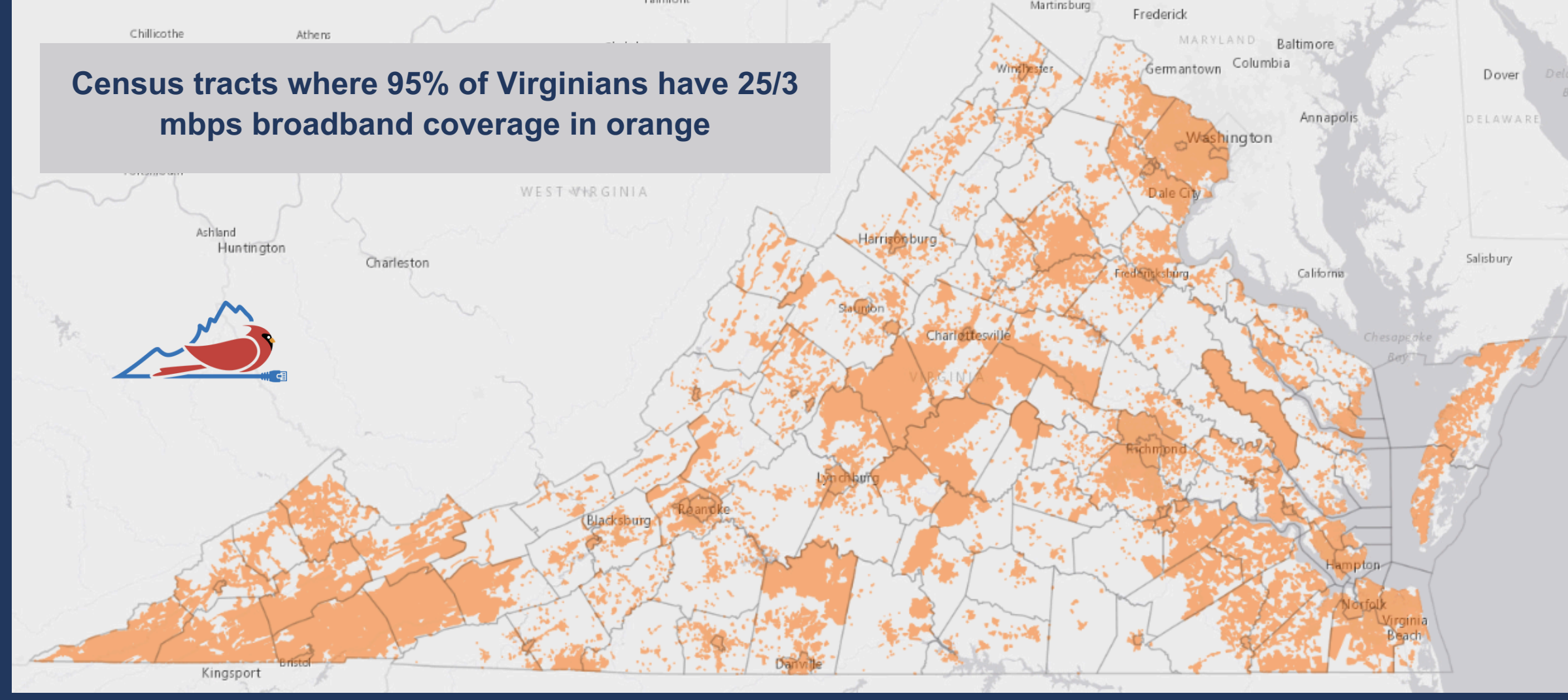
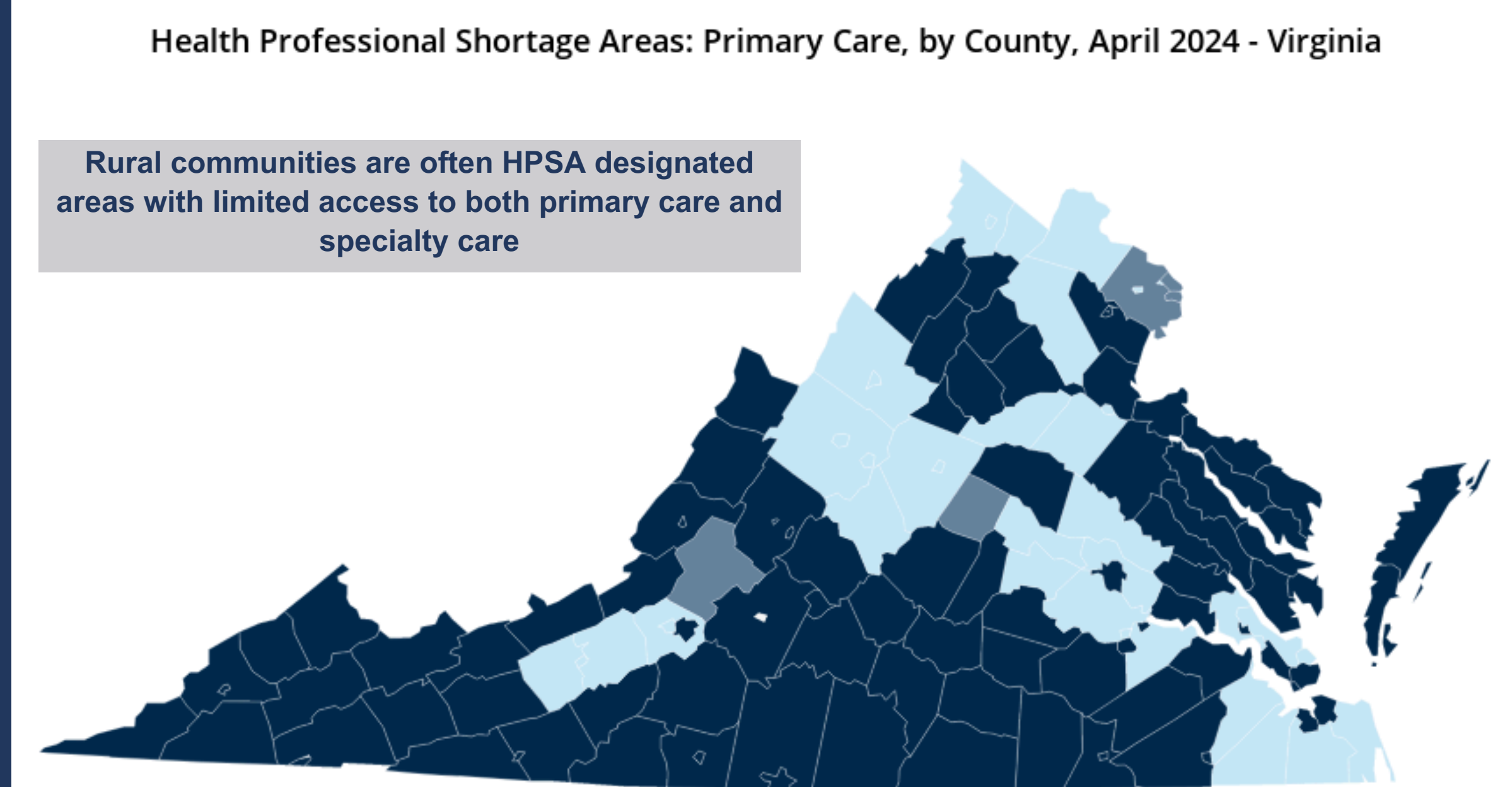
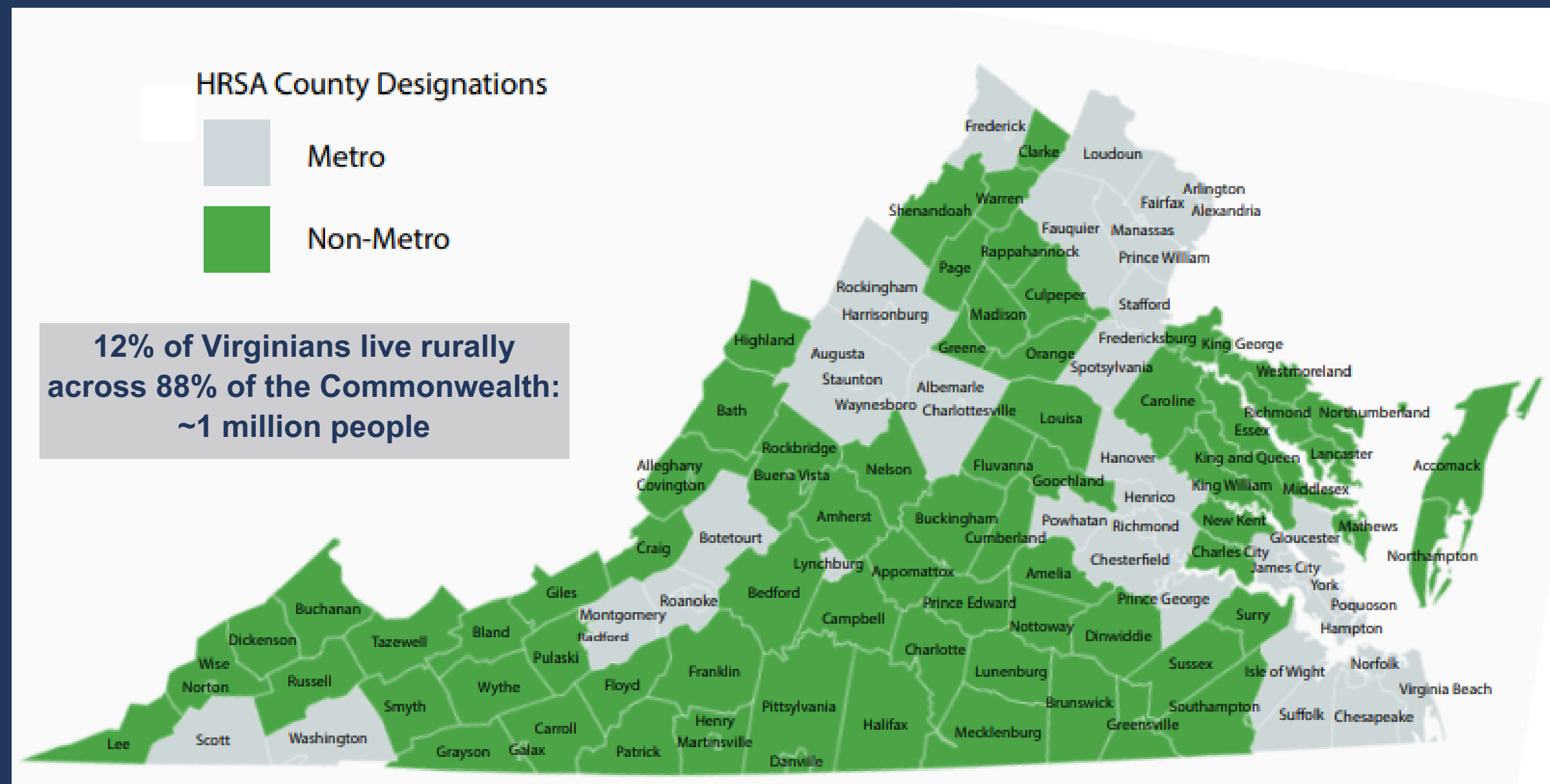
## Broadband Access

90% of Virginians have access to broadband service, but access drops to approximately half of the population in Virginia’s most rural communities.

Broadband is financially accessible ( $\leq$  \$60/month) to about 54.5% of Virginians before subsidizing government programs and utility promotions.

Rural Virginians are less likely to own telehealth compatible devices and have lower average digital literacy.

Rural communities are using “last-mile” broadband solutions in third places such as mobile health clinics and telehealth support at rescue squad stations. Barriers including transportation, time off work, and child care persist with these solutions disparately impacting older adults, people with disabilities, families with children, lower income individuals, and the most vulnerable within communities.



## Rural Health Disparities

Rural communities experience a wide range of health disparities including greater prevalence of many chronic diseases and increased risk of death rooted in the social determinants of health:

- Lower average education attainment
- Higher poverty rates
- Decreased employment opportunity
- Geographic isolation

## Internship Takeaways

The OHE acts as a partner to community-based organizations leading efforts to decrease health disparities. Public health work I’ve been exposed to depends on hearing voices from diverse perspectives and taking a creative, interdisciplinary approach to addressing barriers to healthy and flourishing communities. I will be taking the health equity perspective I’ve gained this summer through the rest of my career.

## Acknowledgments

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## Infrastructure Development

Virginia has state and federal funding to expand broadband access to unserved and underserved localities through the Virginia Telecommunication Initiative (VATI) and the Broadband Equity, Access and Deployment Program (BEAD) facilitated by the DHCD with the goal to achieve universal, affordable broadband access by 2028.

Virginia was one of the first states to partner with major power providers to simultaneously modernize the electrical infrastructure and expand “middle-mile” broadband infrastructure through the Utility Leverage Program.

## National Policy Trends

- Coverage and payment parity in reimbursement policies
- Easing interstate licensure requirements
- Recognition of audio-only telemedicine
- Adopting updated telehealth best practices

## Best Practices

- Pre-screening patients for accommodations (physical & intellectual disability, limited digital literacy, language, culture) before encounters
- Upgrade network for increased privacy and security standards post public health emergency
- System interoperability for data sharing & continuity of care

## Recommendations

- Codify payment parity in Virginia telehealth reimbursement policy
- Create streamlined licensure pathways for in-demand providers
- Recognize audio-only telemedicine in reimbursement definitions
- Partner with the Mid-Atlantic Telehealth Resource Center to coordinate statewide telehealth education and develop the telehealth network to be accessible, secure, and interoperable
- Fund and scale effective “last-mile” telehealth solutions