

Telehealth in Medi-Cal

IMPROVING ACCESS AND EQUITY

Telehealth is an effective alternative to many types of in-person care. Video and phone visits offer additional benefits to patients, such as the elimination of transportation barriers and increased accessibility to care during the workday. For individuals without internet or with restrictive data plans, phone visits are especially critical. If these telehealth options are removed or limited, patients could suffer the consequences of delayed care, further widening the disparities gap.

Patient-centered care through the convenience of telehealth is the new standard of care. Medi-Cal must evolve with the rest of the health care industry to achieve health equity for low-income Californians.

“UCI Family Medicine serves patients in Orange County including patients in Anaheim and Santa Ana who seek care at the Family Health Centers and the Senior Health Center in Orange, and the Gottschalk Plaza in Irvine. Many of our patients in Santa Ana and Anaheim do not have phones or computers with video capacity. Many of our seniors are unable to navigate complex computer programs or even access MyChart. While we have activated teams to help patients gain video capacity, many still face insurmountable barriers. We have also noted a marked decrease in patients who come for in-person visits to our clinics resulting in less than optimal control for patients with chronic conditions such as diabetes and hypertension. Phone visits have been a lifeline for patients to stay in contact with primary care professionals, receive medications and remote monitoring when possible. Access and reimbursement for phone visits is critical to maintain the health of our patients and especially for the most vulnerable populations of seniors and patients attending our federally qualified health centers.”

CYNTHIA HAQ, MD, PROFESSOR AND CHAIR, ON BEHALF OF UCI FAMILY MEDICINE

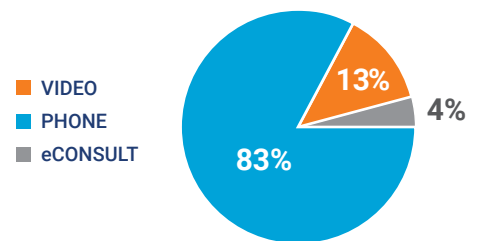
PHONE VISITS ARE ESSENTIAL

Phone visits have provided a critical linkage to care for our patients during the COVID-19 pandemic and will continue to be an important modality once the public health emergency is over. Since video visits are not an option for many patients, maintaining access to phone visits with adequate payment will be crucial for the health and well-being of our patients and communities.

UC IRVINE HEALTH

In response to the COVID-19 pandemic, California’s public health care systems dramatically expanded their delivery of video and phone visits. From August 2020 to January 2021, University of California Health, which includes five academic medical centers, provided **an average of 160,781 telehealth visits per month with over 80% conducted by video.**

Telehealth Visits by Type*



*Across University of California Health

We call on the Legislature and Governor to **pass AB 32**, which will ensure that **all Californians have equal access to care through telehealth.**