Transcript Details

This is a transcript of an educational program. Details about the program and additional media formats for the program are accessible by visiting: https://reachmd.com/programs/frontlines-multiple-sclerosis/ms-management-strategies-for-ensuring-equitable-access-to-teleneurology/32669/

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MS Management: Strategies for Ensuring Equitable Access to Teleneurology

Announcer:
Welcome to *On the Frontlines of Multiple Sclerosis* on ReachMD. On this episode, we'll learn about how we can address access barriers to telemedicine for neurologic care with Dr. Marisa McGinley. She's a neurologist at the Cleveland Clinic who specializes in multiple sclerosis care. Let's hear from Dr. McGinley now.

Dr. McGinley:
My specialty is multiple sclerosis, and these patients require a lot of subspecialty visits. MS care is not just about the neurologist's care, so a lot of what we do in the MS field is thinking about how we provide multidisciplinary care. So as neurologists, we're in charge of thinking about imaging monitoring, lab work monitoring, and getting patients their disease-modifying therapies. But other important components to care are things like health psychology, physical therapy, occupational therapy, and rehabilitation. And so when we think about the use of teleneurology, what we're really trying to figure out is how we can use that to minimize the number of times that patients are actually going to have to travel for subspecialty care, and then how we can use teleneurology to then leverage local resources. Using teleneurology so that the neurologist and MS specialists can connect with the MS patient means we can identify the needs of the patient and then understand what really necessitates them driving to the subspecialty center versus what can we arrange locally.

So I think that it has a great potential to provide increased access to subspecialty care because patients can reduce that driving geographic barrier. And then it allows us the opportunity to think about how we coordinate care locally and really minimize the use of centralized subspecialty care. So again, we're trying to bridge that gap of improving access, decreasing the geographic barriers, and moving care to local resources that are more accessible for patients.

There's a lot of promising use of teleneurology, but there's clearly a lot of work to be done because patients do not have universal use of this tool. And so what kind of policy changes or institutional changes can we make to make teleneurology more accessible for all the patients that we're caring for?

First, I think it's important to reiterate the changes that happened during the pandemic that allowed for this increased access overall, including things like parity in coverage of telemedicine visits. Before the pandemic, many insurers did not cover telemedicine visits or had very restricted rules about coverage, so fortunately, a lot of those pandemic coverage regulations have continued. But I think it's important that we continue to advocate for coverage by insurers and parity in payments of telemedicine visits because we can provide very equivalent care via these telemedicine visits as in-person care. So I think that foundationally we made that great step, and we need to make sure that continues.

Secondly—and this is something we talk about with any technology—is the concept of a digital divide, which is that technology is great for many populations, but it's not necessarily accessible to all for a variety of reasons. And some of that is surrounding digital literacy, so understanding how to use the technology. So having more systems and instruction in place, as well as more reach-outs to patients to make sure that they understand the use of the technology—especially when institutions are switching across different platforms—is going to be really important.

The other thing that's important is engaging communities. So when we see lower utilization by certain populations, we need to understand the reason behind that. Is it because these populations have true barriers to utilizing that, including things like broadband access or instructions not in the appropriate language, or is it a preference or a mistrust of that healthcare delivery method? And so as we develop these different methods of providing care, we really need to engage patients and communities to better understand what

people's needs are and how we can adapt the system to meet those needs and expectations for healthcare.

Announcer:
That was Dr. Marisa McGinley talking about ways we can improve patient access to teleneurology. To access this and other episodes in our series, visit *On the Frontline of Multiple Sclerosis* on ReachMD.com, where you can Be Part of the Knowledge. Thanks for listening!