A NEEDS ASSESSMENT FOR MATERNAL TELEHEALTH SERVICES IN THE STATE OF HAWAI’I

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BACKGROUND/SIGNIFICANCE:

Healthcare System in Hawaii’i:
- 6 publically inhabited islands
- Only 1 Level 3 maternity hospital
- 10% of the land mass is urban
- Access to healthcare services is fragmented

Maternal Health in Hawaii’i:
- 1.4 million population
- ~17,000 births each year
- ~5000 women (25%) must travel to Honolulu for prenatal ultrasound examinations and high risk pregnancy care.
- Interisland travel is almost exclusively by fixed-wing airplane
  - $100-$300 round trip, plus
  - $75 taxi fare which is a public health burden
  - Lodging
- Prior to the COVID-19 pandemic, maternal telehealth services were being considered to increase access to prenatal care services.

METHODS/APPROACH/EVALUATION STRATEGY:

1) Secure funding to conduct the needs assessment
2) Assemble a Maternal Telehealth Task Force/Committee to implement the project
3) Convene a Maternal Telehealth Summit to obtain feedback from
   - FQHCs
   - Large hospital systems
   - Critical access hospitals
   - Local health practitioners
4) Meet with Stakeholders (Lieutenant Governor, CMS, Insurance Payers, Telecommunications Public Utilities, University of Hawai’i Leadership)
5) Partner with telehealth consultants from UAMS

OUTCOMES/RESULTS:

The Hawaii’i State DOH issued $14,000 in funding to convene a state-wide summit on Maternal Telehealth on October 9-11, 2019 in partnership with the PBTRC, HPCA, ACOG, University of Hawai’i which resulted in:
- Pre- and Post-surveys
- Sharing of “Best Practices”
- Round table discussions / focus groups
- Site visits to meet with local leadership to evaluate equipment and technology
- Writing grants to FCC, CARES, USDA
- Drafting Federal legislation

MFM Referrals
- 76% of providers refer patients to other clinics for:
  1. MFM consultations (87% of responses)
  2. Amniocentesis & chorionic villus sampling, Doppler studies, Fetal echocardiography, Genetic testing & counseling, Ultrasound examinations (all tied at 73% of responses)

Top 3 Barriers to Prenatal Services
- Cost of transit/lack of childcare
- Lack of transit/lack of support
- Distance/length of travel

DISCUSSION:

Findings from Facilitated Discussions and Site Visits
- Lack of specialty-trained personnel on neighbor islands (sonographers, genetic counselors, MFM Specialists)
- Lack of reliable broadband internet
- Lack of ultrasound image storage and reporting network
- Lack of telehealth-ready equipment for real time exams
- Funding, reimbursement, compliance, legal, MOU issues
- No coordination or sharing of telehealth platforms

SUMMARY/CONCLUSION:

We recommend that a Maternal Telehealth System for the State of Hawaii’i be created as a public utility

FUTURE DIRECTIONS:

- COVID-19 pandemic prompted rapid adoption of MFM video consultations to neighbor islands
- MI-Home program piloted to promote home visitations to provide mobile telehealth access
- Innovations with Bluetooth®
- Over $2M in grants submitted