## Scope Review of Literature regarding Efficacy of Telehealth (2004-present)

Telehealth has been shown to be equally as effective as face-to-face care, including the care of vulnerable and marginalized populations, and has demonstrated cost-effectiveness. Additionally, the literature suggests high patient satisfaction with both videoconference and telehealth methodologies in studies where satisfaction was assessed.

Clinical area	Equivalence to in-person care
Telemental health	Outcomes of telemental health were not significantly different from those of
	in-person care
	• Caveat: patients' demographic characteristics and internet access might have
	impact on the use of telehealth-administered assessment (e.g., older adults)
Telerehabilitation	Generally equivalent to or yields better outcomes than in-person care
Teledermatology	Diagnosis and treatment concordance ranges from "acceptable"/ "good" to
	equivalent compared to in-person care
Teleconsultation	Potential alternative to in-person care, but equivalence is unclear as
	teleconsultation encompasses widely varied conditions

Chronic Disease Management: Recent peer-reviewed literature indicates that telehealth has been found beneficial for diabetes care, chronic disease self-management, chronic obstructive pulmonary disorder (COPD), and cognitive behavioral therapy for HIV antiretroviral and depression treatment retention. Studies also support improved health literacy and self-management behaviors among an intervention group of adults aged 50 and older with at least one chronic condition.

Condition	Key Findings
Diabetes	<ul> <li>Telehealth for nutrition management in older adults living at home was likely to yield clinical improvements compared to usual care or no intervention</li> <li>telehealth and telemedicine were impactful for diabetes, leading to clinically relevant reduction of hemoglobin A1C (HbA<sub>1c</sub>; ≤-0.5%), and higher reduction rates for recently diagnosed patients and those with higher baseline HbA<sub>1c</sub> (&gt;8%)</li> </ul>
	• Telehealth was effective for <i>diagnosing</i> diabetic foot ulcers, but it was unclear whether it was effective for <i>treating</i> them
COPD	<ul> <li>Telehealth found to be an effective component of COPD management, including maintenance of physical activity and delivery of patient education</li> <li>The effects of providing oral anticoagulation management via telehealth and in person were similar</li> </ul>

## **Implications**

Current evidence supports the effectiveness of telehealth interventions for certain conditions, but there is insufficient evidence about the impact of telehealth on *utilization*. Further research (e.g., what factors affect the extent to which telehealth interventions substitute for or complement in-person visits and whether those effects change as telehealth is more widely adopted) is needed to inform decision making. Nonetheless, telehealth has the potential to improve access to care for specific patient populations of particular concern, including people living in rural areas, those with transportation barriers, and those facing provider shortages.

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