Comparing in-Person Only, Telemedicine Only, and Hybrid Health Care Visits Among Older Adults in Safety-Net Clinics

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Introduction: Older adults face challenges in seeking healthcare. This study examined factors associated with in-person only versus teledmedicine only versus hybrid healthcare visits among adults 65+ in safety-net clinics.

Methods: Data was obtained from a large Texas-based Federally Qualified Health Center (FQHC) network. The dataset included 12,279 appointments for 3,914 unique older adults between March and November 2020. The outcome of interest was a 3-level indicator of telemedicine visits: in-person visits only, teledmedicine visits only, and hybrid (in-person + Telemedicine) visits during the study period. We used a multinomial logit model adjusting for patient-level characteristics to assess the strength of the relationships.

Results: Compared to their white counterparts, Black and Hispanic older adults were significantly likely to have teledmedicine only visits vs in-person only visits (Black RR: 0.59, 95% CI 0.41-0.86; Hispanic RR: 0.46, 95% CI 0.36-0.60). However, there were no significant racial and ethnic differences in hybrid utilization (Black RR: 0.91, 95% CI 0.67-1.23; Hispanic RR: 0.86, 95% CI 0.70-1.07).

Discussion: Our findings suggest that hybrid opportunities may bridge racial and ethnic disparities in access to care. Clinics should consider building capacity for both in-person and teledmedicine opportunities as complementary strategies.