

# Digital inclusion, an emerging social determinant of health

This is an excerpt from the [Magellan Healthcare](#) April *eMpowered for Wellness* newsletter, which can be found [here](#). Sign up to receive this monthly newsletter [here](#).

*A message from Thomas Lane, NCPS, CRPS, senior director, community and recovery supports*

Welcome to Magellan's April 2020 edition of *eMpowered for Wellness*. In this month's feature article here, I'll make the case for why I believe digital inclusion is an under recognized social determinant of health.

In the midst of the COVID-19 crisis, healthcare providers, including peer and family support specialists, are responding by transitioning to virtual visits via various telehealth platforms, making digital inclusion even more important today.

We are seeing peer support services adapting quickly, with peer-run and traditional provider organizations ramping up capabilities for tech-enabled/tech-assisted peer support. CMS is even relaxing some of the requirements for telehealth, in an effort to offer Medicaid and Medicare beneficiaries virtual access to healthcare providers. Many commercial insurers are following suit.

However, a digital divide exists across the U.S for many people. This is especially true for folks living with disAbilities and those reliant of publicly funded healthcare services. Many rural and frontier communities still do not have reliable high-speed internet service. In some cases, folks are dependent on dial-up connections. No matter where you live, you may not have access to the devices necessary for a digital connection.

With the COVID-19 pandemic looking like it will continue to be of major concern for months to come, the role of telehealth and telemedicine has quickly come to the forefront of discussions about how folks can access healthcare in light of social distancing and stay-at-home orders.

So, what exactly do we mean when we talk about telehealth and telemedicine? I like these descriptions from the American Academy of Family Physicians:

**Telehealth** refers broadly to electronic and telecommunications technologies and services used to provide care and services at-a-distance. Telehealth is different from telemedicine in that it refers to a broader scope of remote healthcare services than telemedicine.

**Telemedicine** is the practice of medicine using technology to deliver care at a distance. A physician in one location uses a telecommunications infrastructure to deliver care to a patient at a distant site. Telemedicine refers specifically to remote clinical services, while telehealth can refer to remote non-clinical services.

A dependency on technology is what telehealth and telemedicine have in common.

Considerations like the availability of broadband connectivity, access to HIPAA-compliant technology platforms and how the end user can best benefit from remotely delivered treatments, services and supports are just part of the discussion. There remain considerable barriers to the delivery of digital healthcare in rural and frontier communities, and linguistic and cultural considerations often present added challenges. In short, it's not as easy as it sounds to deliver high quality, effective telehealth and telemedicine.

If you don't have a newer device, or access to broadband connections, access to *effective digitally delivered* care and support can be particularly difficult. Add to this limited minutes and inadequate data plans for folks dependent on the FCC's Lifeline program, and we begin to see a picture of the many factors contributing to digital exclusion. Fortunately, as of March 30, the FCC has temporarily waived Lifeline usage requirements and general de-enrollment procedures until May 29, 2020. Nonetheless, the digital divide is still of concern.

What happens for Lifeline subscribers if the FCC temporary waiver is not extended? The answer is that many, many people will find themselves back on the other side of that digital divide, due to limited minutes and data plans. If you had to choose between staying in touch with family and friends, or using up minutes to talk to a case manager or doctor, which would you choose? And, let's not forget about those regions still without reliable broadband service.

We see how digital inclusion is extremely important, but we also see another glaring example of how health inequities directly affect many people's everyday lives. These are folks who experience digital exclusion on an almost daily basis.

Some of you may wonder, what exactly is digital inclusion anyway? You'll be glad to know there is a group focused on this very topic. The [National Digital Inclusion Alliance](#) (NDIA) is a non-profit organization leading the way in this space. I encourage everyone to invest a little time getting familiar with this organization. They define digital inclusion as follows:

**Digital Inclusion** refers to the activities necessary to ensure that all individuals and communities, including the most disadvantaged, have access to and use of Information and Communication Technologies (ICTs). This includes 5 elements: 1) affordable, robust broadband internet service; 2) internet-enabled devices that meet the needs of the user; 3) access to digital

*literacy training; 4) quality technical support; and 5) applications and online content designed to enable and encourage self-sufficiency, participation and collaboration. Digital Inclusion must evolve as technology advances. **Digital Inclusion requires intentional strategies and investments to reduce and eliminate historical, institutional and structural barriers to access and use technology** (my emphasis).*

Closely related to the subject of digital inclusion are the subjects of digital equity and digital literacy. Let's look at NDIA's description of the first term.

***Digital equity** is a condition in which all individuals and communities have the information technology capacity needed for full participation in our society, democracy and economy. Digital Equity is necessary for civic and cultural participation, employment, lifelong learning, and access to essential services.*

NDIA references the American Library Association's definition for our second term.

***Digital literacy** is the ability to use information and communication technologies to find, evaluate, create, and communicate information, requiring both cognitive and technical skills.*

Let's focus on telehealth for now. Remember, telehealth can refer to remote, non-clinical services. Virtual peer support has quickly become a hot topic of conversation. This is true across the spectrum of peer support and peer-delivered services, from grassroots mutual self-help groups and community-based peer organizations to traditional providers. Even before the COVID-19 crisis, there has been a steady growth in digitally delivered peer support.

That's certainly true here at Magellan, where we are adapting our recovery support navigation and family support coordinator services to be delivered via technology. We are committed to offering the best peer support experience we can, so we are partnering with Dr. Karen Fortuna at Dartmouth to have our teams certified in digital peer support. Stay tuned for our e-interview with Dr. Fortuna as part of our Thought Leaders feature in upcoming issues of *eMpowered for Wellness*.

Those of you who read previous issues of this year's *eMpowered for Wellness* newsletter will recognize strong similarities between descriptions and definitions of social inclusion and digital inclusion. This applies equally to the concept of personal wellness. What's the common thread, you may wonder? For all of these concepts, we must be *intentional* in our actions, activities and programs. Just as wellness and social inclusion will not happen on their own, so too is the case for digital inclusion.

Stay tuned for our Thought Leaders feature with Dr. Karen Fortuna. I'll be providing some additional resources for you on the topic of digital inclusion, including findings from the literature.