



Ohio StationMD Pilot Program: Report on Outcomes

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Marc J. Tassé, PhD
Jordan Wagner
Xiaoya Zhang

The Ohio State University
Nisonger Center

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Glossary of Terminology

StationMD	A telemedicine service that is specialized in providing a wide range of medical services to persons with intellectual disability and related developmental disabilities (see: https://stationmd.com/).
StationMD enrollee	A person who signed-up during the Ohio StationMD pilot program period which started on February 18, 2022.
StationMD engaged user	A person who is signed-up for use of StationMD and who has made at least one call to the StationMD.

Ohio StationMD Pilot Program: Report on Outcomes

INTRODUCTION

Persons with intellectual disability and related developmental disabilities (ID/DD) are a group of individuals who are often marginalized and who have historically experienced significant disparities in access to healthcare services (Havercamp et al., 2004; Scott & Havercamp, 2014). In a previously published Center for Diseases Control and Prevention report (CDC, 2019), they found that South Carolina's Medicaid claims data showed that from 2001-2011, Medicaid members with ID/DD had more than 21,000 potentially avoidable visits to the emergency department (ED).

In part because persons with ID/DD often experience unnecessary hospitalizations, one research study examined available administrative medical records and found that adults with ID/DD are nearly 4 times as likely to incur high annual health care costs as their peers without disabilities (Lunsky et al., 2019). Because of health inequities and health disparities faced by this population, it is common for these individuals to be more likely to access the ED as a last, or only resort, to obtaining much-needed medical care (Blaskowitz et al., 2019; Laurer et al., 2021; Walsh et al., 1997). It is common for persons with ID/DD who present to the ED to experience medical complications while waiting to be seen by the ED team that result in their being unexpectedly hospitalized. In fact, a study by Acosta and her colleagues (2022) reported comparably high rates of hospitalizations for persons with ID/DD, reporting that they found that this population was 4 times more likely to be hospitalized following an ED visit than their peers without a disability. Hence, avoiding

unnecessary visits to the ED may often reduce the likelihood of this vulnerable population experiencing other health care complications.

One positive outcome of the COVID-19 pandemic was that the lock downs and physical distancing forced a pivot to telemedicine and the increased use of other technology solutions to bring supports and services to persons with ID/DD while minimizing physical contact. A systematic review of the literature on telehealth services even before the surge in usage resulting from the COVID-19 pandemic concluded that higher patient satisfaction was directly correlated with the availability of telehealth services (Kruse et al., 2017). These authors reported that the most frequently cited factors contributing to high patient satisfaction with telehealth use included: preferred modality, ease of use, improved communication, improved outcomes, lower costs, and decreased travel time. The benefits of telehealth services for persons with disabilities was highlighted in a published report from the National Academies of Sciences, Engineering, and Medicine (NASEM, 2022). The NASEM highlighted telehealth services as one silver lining in the COVID-19 pandemic. A resulting recommendation from their workshop panels on the outcomes of COVID-19 for children with disabilities was the value-added and ease of telehealth services for this population and how telehealth services substantially reduced barriers to accessing health care services, one of which is the perennial problem for people with disabilities. Another benefit noted was that the availability of telehealth services contributed to overcoming several barriers to accessing health care services that were associated with social determinants experienced by persons with ID/DD (e.g., poverty, rurality, transportation, etc.).

STATIONMD

StationMD is a telemedicine service that is specialized in providing a wide range of medical care to people with ID/DD (see here: <https://stationmd.com/>). Their stated mission is to improve the access to timely and quality medical care for persons with ID/DD. StationMD is staffed by physicians who have specialty training in working with persons with disabilities and many of whom are emergency medicine physicians as well. Their telehealth services include access to personalized medical care 24 hours/day, 7 days/week. StationMD services are not limited to providing telehealth ED or urgent care consultations, but also include delivery of primary care, medication consultation, and behavioral health services. This service prides itself in filling a much-needed telehealth service that can fill gaps in access to healthcare professionals for this vulnerable population and can provide immediate access to an emergency room physician, who is knowledgeable and has experience working with persons with ID/DD who often have complex secondary health and behavioral conditions.

StationMD services are focused on reducing unnecessary trips to the ED or urgent care and limiting adverse hospital stays and experiences that often result from an ED visit. In situations where an ED visit cannot be avoided, StationMD physicians provide critical care coordination by contacting the medical team at the local ED and provide them with critical medical information that equip them to be better prepared for the incoming patient. The goal of this StationMD service is to facilitate and expedite triage for the awaiting ED team by providing critical care information on the known diagnoses, current medications, health status, presenting problem, and other critical care details regarding the incoming

patient. In addition to services being available in Ohio, StationMD currently provides telehealth services to more than 45,000 individuals across 22 states.

OHIO STATIONMD PILOT PROGRAM

In their commitment to reducing barriers to health care services for Ohioans with ID/DD, the Ohio Department of Developmental Disabilities (DODD) contracted with StationMD in 2022 to implement a pilot program with the goal of improving access to health care and enhancing health outcomes for Ohioans with ID/DD. The DODD invited individuals with ID/DD, through county boards, providers, intermediate care facility for individuals with intellectual disability (ICF), and other stakeholders to enroll in the Ohio StationMD pilot program. The first enrollee into the Ohio StationMD pilot program was on February 18, 2022. That date started our data collection for this outcome study of the Ohio StationMD pilot program. A total of 5,229 individuals served by DODD throughout the state were enrolled in the Ohio StationMD pilot program.

Evaluation Activities

This outcome study included three sources of information in its evaluation of the Ohio StationMD pilot program: (1) Ohio Medicaid claims analysis (2021-2022), (2) online surveys of StationMD enrollees, and (3) focus groups with agency personnel who had StationMD engaged users. Results from these three sources of data contributed to identifying trends in the use of StationMD services, utilization of Medicaid covered medical services, user knowledge and experience of StationMD enrollees, and user experience and satisfaction of StationMD engaged users. Approval of this research study and related data

collection was obtained by The Ohio State University Behavioral and Social Sciences Institutional Review Board on February 20, 2023.

MEDICAID CLAIMS DATA ANALYSES

All Medicaid claims data were analyzed by DODD staff. Only de-identified analyzed Medicaid claims data were shared with the members of the Ohio State research team. The Medicaid claims data analyses examined usage of health care services by all persons served by DODD (n=63,852) and compared usage of health care services of StationMD enrollees and non-enrollees across two points of time (before and after February 2022, the start of the Ohio StationMD pilot program). 4,343 persons were StationMD enrollees during this time and included in the analysis. The Medicaid claims data of all persons served by DODD between 1 July 2021 and 31 December 2021 (time 1) was compared to 1 July 2022 and 31 December 2022 (time 2). Time 1 represents a six-month period prior to the implementation of the StationMD pilot program and Time 2 represents a six-month period after the start of the StationMD pilot program. These time periods were selected regardless of the StationMD enrollee's exact enrollment date. Parsimony drove the selection of these two time periods. Though these groups were not matched in all characteristics, both groups had diagnoses of intellectual/developmental disabilities.

CHARACTERISTICS OF THE SAMPLE

The Ohio State Nisonger Center examined the Medicaid claims data analyses for the 4,343 individuals who were StationMD enrollees and StationMD engaged users in the Ohio StationMD pilot program as well as individuals served by DODD who were not enrolled in StationMD during the pilot program. We provide below some descriptive information to

characterize the sample of StationMD enrollees and how they compare to the larger population of persons with ID/DD served by DODD.

The chronological age of StationMD enrollees is presented in age ranges that go from “< 20” to “70+” years old. Although there is a negative correlation between age and total number of people served by county boards, meaning that the older the group the less people who could be enrolled; there was a positive correlation between age and percent of people from each age group among the StationMD enrollees, meaning the older the age group, the higher the percentage of people from that age group who were StationMD enrollees (see table below).

The reported gender of those among the StationMD enrollees was 59% = male, 40% = female, and 1% = “*prefer not to say*,” which is within 2% of the state representation. Race of participants was reported as follows: 76% = *White/Caucasian*, 14% = *Black/African American*, and < 1% = *Asian*. The remaining 9% categorized their race as “*other*” or “*prefer not to say*.”

Chronological Age

Chronological Age (Years)	StationMD Engaged Users (N=398)	StationMD Enrollees (N=4,343)	Total DODD Population Served (63,852)	Percentage of StationMD Enrollees from Total DODD Population Served
< 20	3.8% (n=15)	4.7% (n=203)	27.6% (n=17,631)	1.2% (203 of 17,631)
20 to 29	15.1% (n=60)	13.0% (n=566)	22.6% (n=14,459)	3.9% (566 of 14,459)
30 to 39	15.1% (n=60)	17.4% (n=756)	17.5% (n=11,198)	6.8% (756 of 11,198)
40 to 49	17.8% (n=71)	16.1% (n=698)	10.9% (n=6,960)	10.0% (698 of 6,960)
50 to 59	21.1% (n=84)	19.4% (n=841)	9.6% (n=6,135)	13.7% (841 of 6,135)
60 to 69	19.4% (n=77)	20.0% (n=869)	8.1% (n=5,148)	16.9% (869 of 5,148)
70 +	7.8% (n=31)	9.4% (n=410)	3.6% (n=2,321)	17.7% (410 of 2,321)

Race

Race	StationMD Engaged Users (N=398)	StationMD Enrollees (N=4,343)	Total DODD Population Served (63,852)
Asian	0.3% (n=1)	0.5% (n=20)	0.7% (n=464)
Black or African American	11.8% (n=47)	14.4% (n=626)	14.8% (n=9,417)
White	76.1% (n=303)	75.8% (n=3,298)	64.5% (n=41,176)
Other	4.3% (n=17)	2.8% (n=123)	5.7% (n=3,620)
Unknown	7.5% (n=30)	6.5% (n=281)	14.4% (n=9,175)

Living Arrangement

Although more than 60% of Ohioans with ID/DD served by DODD reside in “*Homes with family or relatives*” (n=39,302), only 13% of all StationMD enrollees (n=568) were from this type of living arrangement. Approximately 398 individuals of the 4,343 StationMD enrollees in the Ohio StationMD pilot program made at least one call to StationMD. The adults with ID/DD living in “*Homes with family or relatives*” represented a small percentage of these StationMD engaged users (i.e., 7% or 28/398).

We examined who accessed StationMD services the most by their type of living arrangement. During the Ohio StationMD pilot program, the largest subgroup of the 398 StationMD engaged users were individuals living in an “*ICF*” setting and represented 30% (119 of 398) of the StationMD engaged users. The fact that individuals in “*ICF*” living arrangement settings was the largest group of StationMD engaged users may be explained by them being individuals with the highest intensity healthcare needs, since they only represent overall, less than 7% of the total DODD served population. The second largest group of StationMD engaged users, by type of living arrangement, were individuals living in “*Congregate community*” settings (n=105 or 26% of all StationMD engaged users), followed by individuals living in “*Alone – community*” settings (88 of 398, or 22% of all individuals who were StationMD engaged users), and finally, it was the group of individuals living in a “*Congregate DODD licensed waiver home*” (n=47 or 12%) who were among the highest users of StationMD services. It should be noted that in examining who were the highest users of StationMD services by living arrangement, proportionally speaking, it was this last group (i.e., *Congregate DODD licensed waiver home*) of which 15% (47 of 319) of these

StationMD enrollees were StationMD engaged users. See the Table below for a break-down by living arrangement.

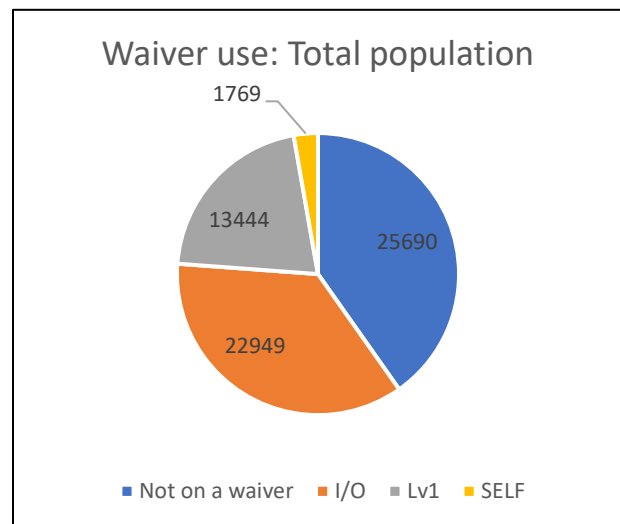
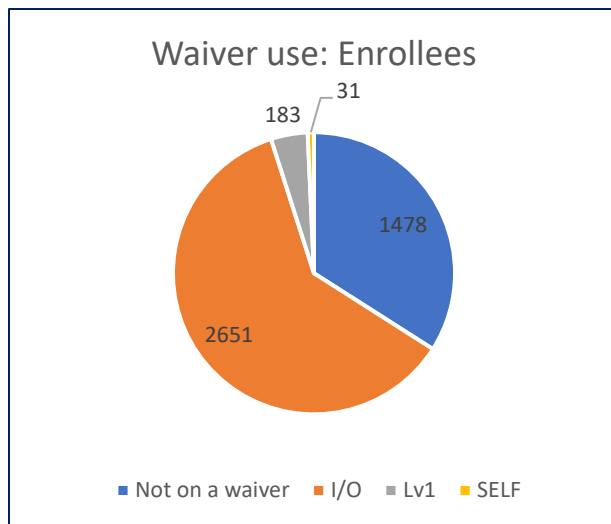
Living Arrangement	StationMD Engaged Users (n=398)	StationMD Enrollees (n=4,343)	Total DODD Population Served (n=63,813)
Family/ Relative	7.0% (n=28)	13.1% (n=568)	61.6% (n=39,302)
Alone – Community	22.1% (n=88)	22.2% (n=964)	13.3% (n=8,482)
Congregate Community	26.4% (n=105)	24.2% (n=1,049)	8.9% (n=5,660)
Private ICF	29.9% (n=119)	27.2% (n=1,181)	6.5% (n=4,172)
Foster Care/Family Living	0.5% (n=2)	1.7% (n=72)	2.7% (n=1,738)
Congregate DODD Licensed Waiver Home	11.8% (n=47)	7.4% (n=319)	2.1% (n=1,353)
Developmental Center	0.3% (n=1)	0.3% (n=11)	0.9% (n=545)
Alone DODD Licensed Waiver Home	0% (n=0)	0.1% (n=3)	0.1% (n=62)
Other	0.5% (n=2)	1.3% (n=57)	1.8% (n=1,154)
Blank/Unknown	1.5% (n=6)	2.7% (n=119)	2.1% (n=1,345)

Type of HCBS Waiver and Status in Ohio's StationMD Pilot Program

The largest difference in types of Home and Community-Based Services (HCBS) waivers among the StationMD enrollees and all Ohioans served by DODD on HCBS waivers was that only 4% of all StationMD enrollees were on a Level One waiver. However, approximately 21% of all Ohioans served by DODD are individuals who are served on a Level One HCBS waiver (see Figure and Table below). Also, 61% of all StationMD enrollees were individuals who were served on an Individual Options (IO) waiver, despite only 36%

of all individuals served by DODD being served on a HCBS IO waiver (see Figures and Table below). It is unclear if the different proportions of persons enrolled in the Ohio StationMD pilot program were explainable by the characteristics of the individuals typically served on these two types of waivers or some other factors.

HCBS Waivers



	Total Number of StationMD Enrollees (n=4,343)	Percentage of StationMD Enrollees (n=4,343)	Percentage of Total DODD Population Served (N=63,852)
Not on a waiver	1,478	34.0%	40.2%
I/O waiver	2,651	61.0%	35.9%
LV1 waiver	183	4.2%	21.1%
SELF waiver	31	0.7%	2.8%

County of Residence

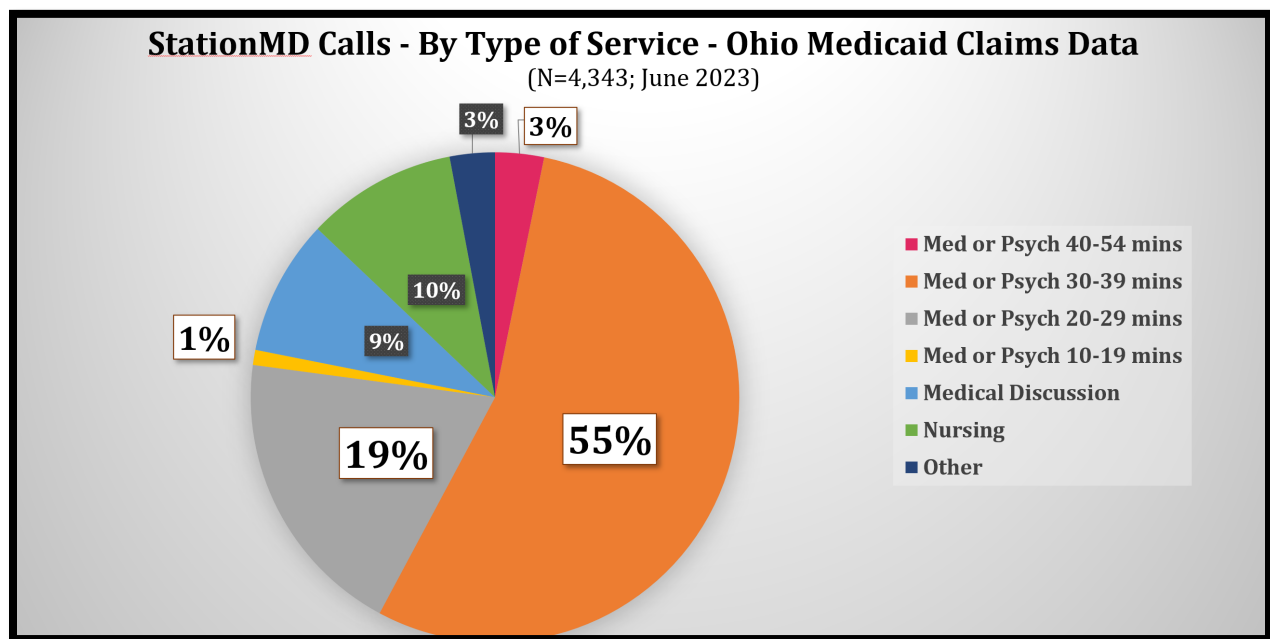
The group of 4,339 Ohioans who were StationMD enrollees, were a geographically diverse group, residing in 77 of Ohio's 88 counties (87.5%). There remained only 11 counties (12.5%) from which of the population served by DODD, no one was enrolled in the Ohio StationMD pilot program (see Appendix B for number of StationMD enrollees by county). County of residence was missing for four enrollees. Approximately 31% of all StationMD enrollees resided in two of Ohio's largest counties: (1) Cuyahoga (19%) and (2) Franklin (12%). Of the counties represented in the Ohio StationMD pilot program, some counties were more engaged in recruiting individuals to be enrolled into StationMD services and the pilot program. For example, Seneca County had the largest proportion of its served ID/DD population enrolled in the Ohio StationMD pilot program with 39% of its served population being a StationMD enrollee. Portage County was next with 30% of people served in Portage enrolled, and Wood County had approximately 20% of people served by their county enrolled in StationMD.

Characteristics of StationMD Engaged Users

Approximately 398 people, or 9% of all StationMD enrollees, were engaged users, namely, they recorded at least one call to StationMD services during the Ohio Station pilot program. The group of StationMD engaged users (n=398) logged a combined 1,010 calls to StationMD. The remaining 3,945 individuals (91% of all StationMD enrollees) did not make any calls to StationMD during the entire pilot program period through which we analyzed the utilization data. If they received medical care, it was not through StationMD.

StationMD Calls by Types of Procedure

Of all calls made to StationMD, 75% were resolved with a “med or psych appointment” that lasted less than 40 minutes in duration. The remaining 25% of procedures logged during the calls to StationMD necessitated a 40-minute or longer “physician consultation”, “medical discussions”, “nursing”, and a number of non-billable procedures (see Figure below).



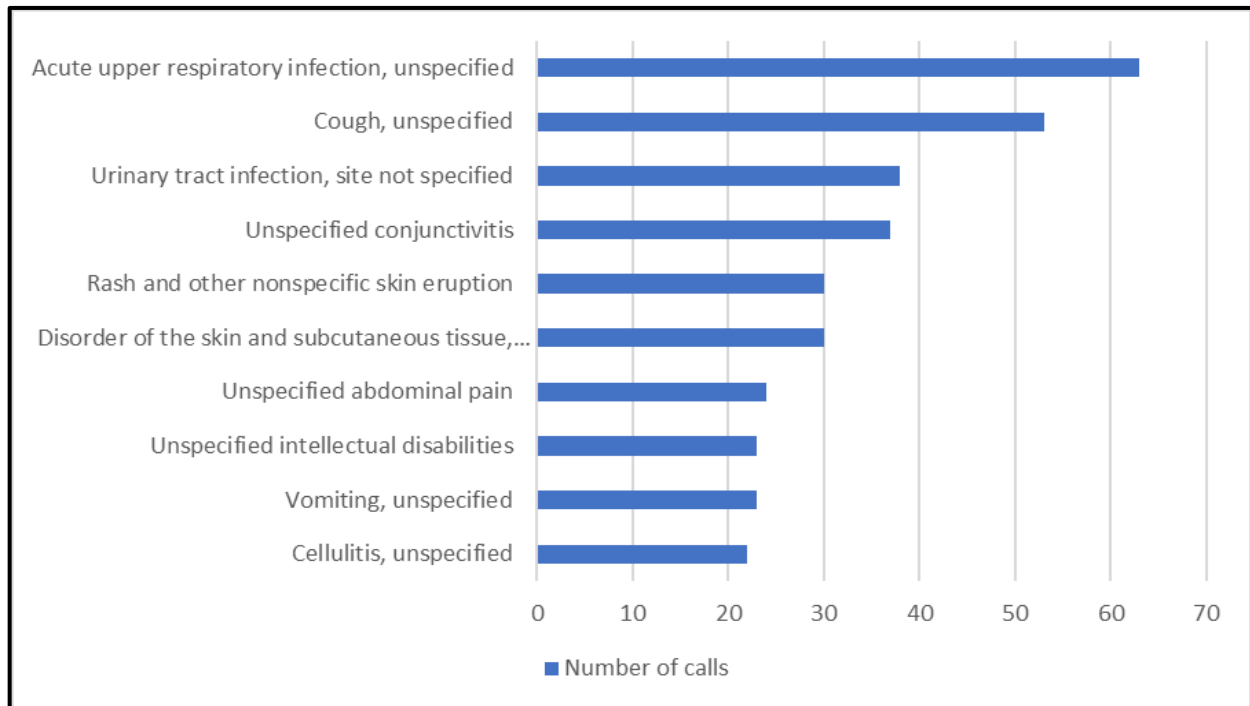
Outcomes and Diagnoses

Again, a total of 1,010 StationMD calls were made by the 398 StationMD engaged users. Of these 1,010 calls made to StationMD services, 897 (89%) were medical consultations that were resolved within the one telehealth consultation and did not necessitate any further medical intervention, except perhaps a recommendation to monitor the patient or monitor the patient’s vitals and call back if the patient’s health worsened. In other words, StationMD physicians were able to resolve almost 90% of all calls received

while maintaining in the person's own residential setting or home. Only 11% or 113 of the 1,010 calls made to StationMD resulted in a transfer to another healthcare service (e.g., urgent care or emergency department). People in the StationMD cohort had on average one fewer visit to emergency departments when compared to the non-StationMD cohort during the study period. Though these groups were not matched in all characteristics, both groups had diagnoses of intellectual/developmental disabilities.

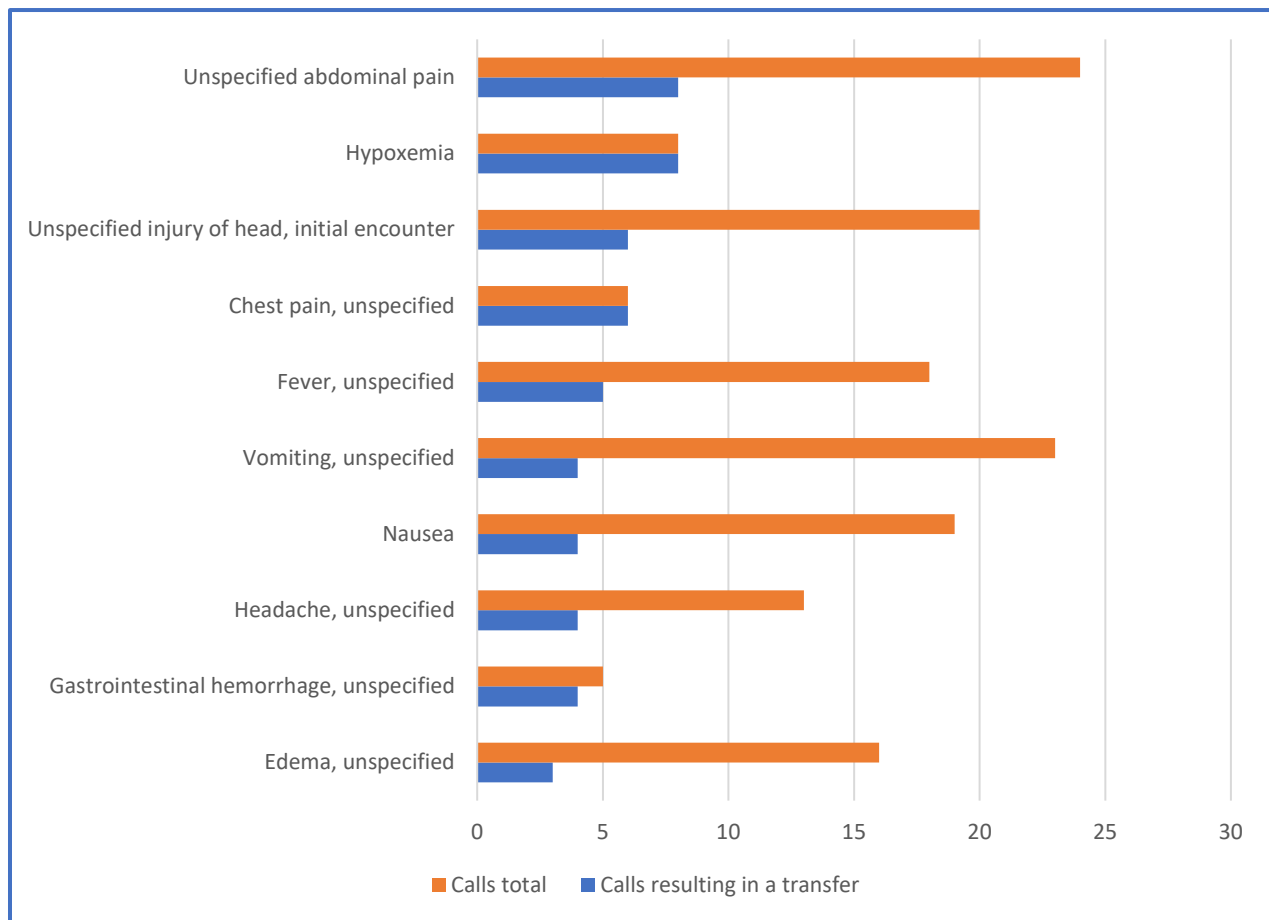
The top 10 most common reasons for a call to StationMD accounted for 34% (343 of 1,010) of all calls made. Of these 343 calls, only 15 calls resulted in a transfer to the emergency department. Of all calls made to StationMD for one of these top 10 diagnoses (see Bar Graph below), 328 of the 343 calls to StationMD (96%) were addressed by the team of StationMD physicians without necessitating a transfer to another healthcare option (e.g., emergency department). The top 10 most common calls are listed below. A table containing a breakdown of all 1,010 StationMD calls with all of the top 50 diagnoses, which accounts for approximately 2/3 of all StationMD calls made, can be found in Appendix A.

Top 10 Diagnoses Assigned During a Call to StationMD



A total of 684 StationMD calls could be aggregated into the 50 most frequent medical diagnoses and 69 of these 684 calls (~10%) resulted in a transfer to the ED. From the sample of these 50 most common medical diagnoses, 22 diagnoses resulted in at least one transfer. We have included the top 10 reasons for a transfer in the graph below (see Graph below).

Top 10 Diagnoses Resulting in Transfer



We also noted below the top 10 medical diagnoses that were the – proportionally speaking – to result in the StationMD physicians recommending that the person with ID/DD be transferred to an ED or urgent care (see Graph below).

Top 10 Diagnoses with the Greatest Likelihood for Transfer.

Medicaid claims data comparisons at time 1 (before the start of the Ohio StationMD pilot program) and time 2 (the same period of time but one year later; after enrollment of 4,343 in the Ohio StationMD pilot program) for the 398 people who were StationMD

engaged users indicate that there were no significant differences in the total number of claims made between the two time points for “use of telemedicine” and “hospital admissions” (see discussion below). There were fewer claims in every category for those who were StationMD engaged users, including a slight decrease in the number of ED visits between time-1 and time-2 for StationMD engaged users. The largest differences between the two groups at time-2 were found for “reduced average patient visits” and “reduced average prescriptions”.

Time-1 and Time-2 Differences*

	StationMD Engaged Users	DODD Population Not Enrolled in StationMD
Number of People	398	59,509
Number of Calls	1,010	0
Avg. Visits Patient DIFF	-11	-5
Avg. Visits OP Prof DIFF	-3	-2
Avg. Visits Telemedicine DIFF	-1	0
Avg. Visits MHSA Telemedicine DIFF	0	0
Avg. Providers DIFF	-2	-1
Avg. Scripts Rx DIFF	-21	-5
Avg. Admits DIFF	0	0
Avg. Visits OP Fac DIFF	-1	-1
Avg. Visits ER DIFF	-1	0

* Negative numbers indicate fewer claims during time 2 when compared with time 1.

One important finding is that more than 90% of all calls made to StationMD were identified as conditions that would be best resolved without a transfer to an alternative healthcare option. Hence, medical situations that did not necessitate a visit to the ED but that might have resulted in a visit to ED, in the absence of the availability of StationMD.

ONLINE SURVEYS

We invited all 5,229 StationMD enrollees (i.e., individuals with intellectual disability or related developmental disabilities), their family members, and direct support professionals supporting the enrollees, including ICF staff members. Because new participants could enroll in the StationMD services and previously enrolled participants could unenroll, there were some participants who were invited only in 2023 to take the survey and others who were only invited in 2024. Between surveys, 196 people stopped use of StationMD and 336 new individuals began use of the service. 5,031 were enrolled at the time of the second year and 4,343 during the first year of survey distribution. Some of the StationMD enrollees were served and supported on an HCBS DD waiver and others were living in other types of living arrangements (e.g., ICF-IID facilities). To elicit feedback about their experience using StationMD, we created four distinct StationMD surveys (see Appendix C): (1) Individuals with lived ID/DD experience, (2) family members, (3) direct support professionals, and (4) ICF staff members. These surveys were available online through Qualtrics and were open between 24 April 2023 and 28 June, 2024.

On two occasions listings of StationMD enrollees were provided by DODD to the research team members. These listings contained the contact information for StationMD enrollees, their guardian, name of their provider agency, county of residence, and their SSA. Email invitations were sent to all StationMD enrollees and their families/guardians, providers, and SSAs for whom we had email addresses. More than 2,250 recipients were included in the email blasts. In these emails, we suggested that provider agencies make flyers about the study available in their office and in the homes of enrollees. Invitations for

this study were additionally featured in email blasts through large listservs, including: OPRA newsletter and DODD’s Memo Monday. Working with OPRA, the survey was announced during their “All-Members Call.” We also made phone calls to several provider agencies, SSA/county boards, and ICFs to enhance outreach and distribute our invitation to participate in our StationMD outcome study. More than 2,250 recipients were included in the email blasts.

A total of 322 Ohioans who were enrolled in StationMD services accessed our online outcome survey between April 24, 2023, and June 28, 2024. Of this group, a total of 271 individuals enrolled in StationMD completed the online survey, including: (1) 22 adults with lived ID/DD experience, (2) 74 family members of adults enrolled in StationMD, (3) 122 direct support professionals who supported adults enrolled in StationMD, and (4) 53 ICF-IID staff members who supported adults enrolled in StationMD. We summarize below the responses from these 271 participants who were enrolled in using StationMD or supported an individual who was enrolled in using StationMD (see Table below).

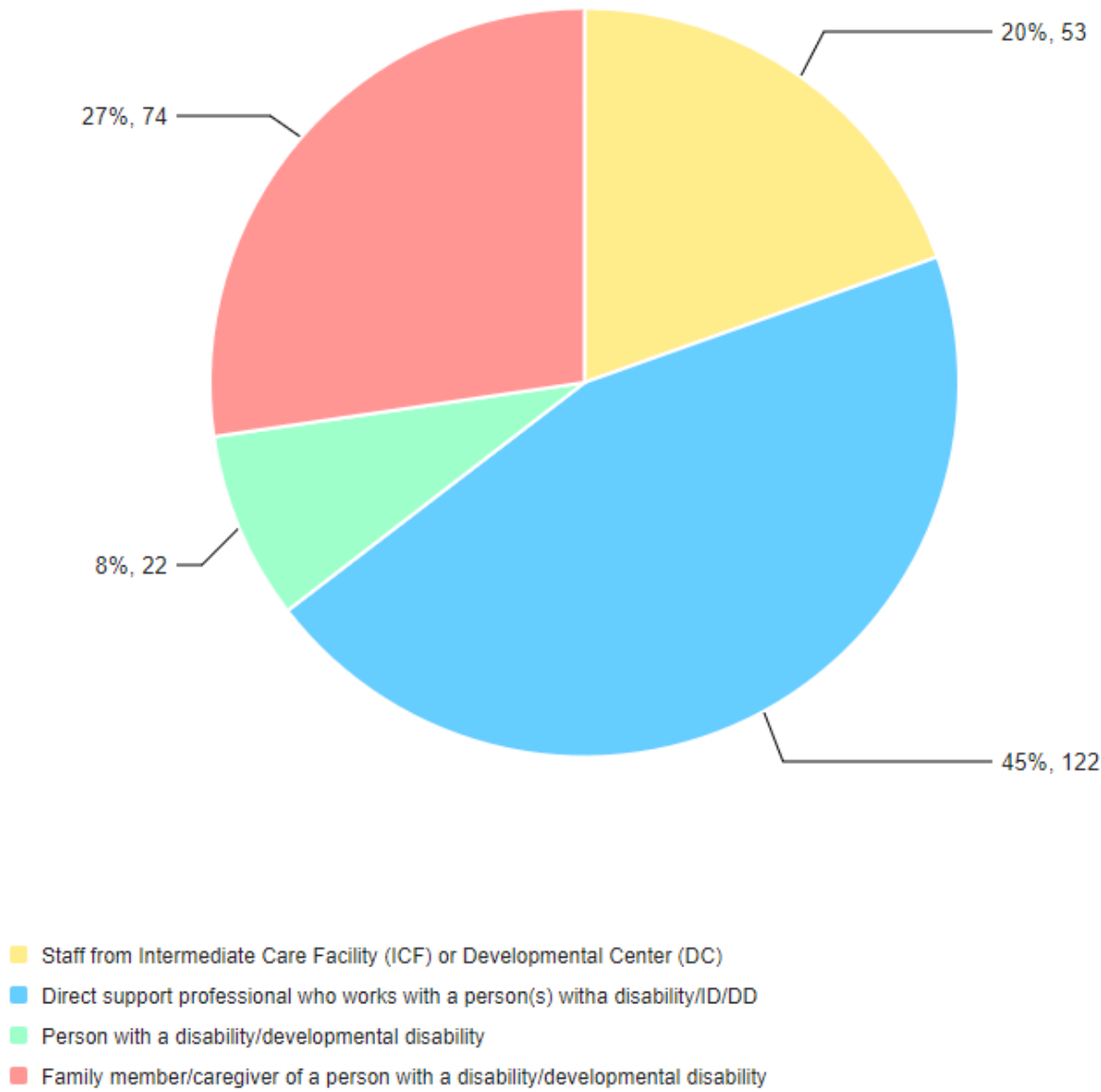
OVERALL SURVEY QUESTIONS:

Q1. Are you answering the StationMD Online Survey as: (N=271)

22	Adult with an ID/DD who is enrolled in StationMD.
74	Family member/caregiver of a person with ID/DD who is enrolled in StationMD.
122	Direct support professional who supported an adult with ID/DD who is enrolled in StationMD.
53	Staff member from an Intermediate Care Facility (ICF) or Developmental Center (DC) who supported an adult with ID/DD who is enrolled in StationMD services.

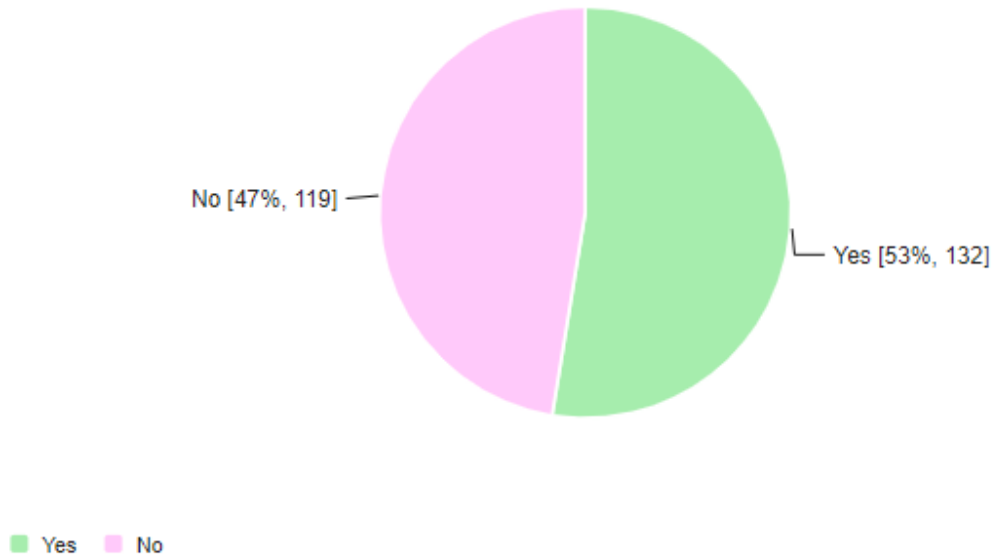
Q1 - Are you answering the StationMD Online Survey as:

271 Responses



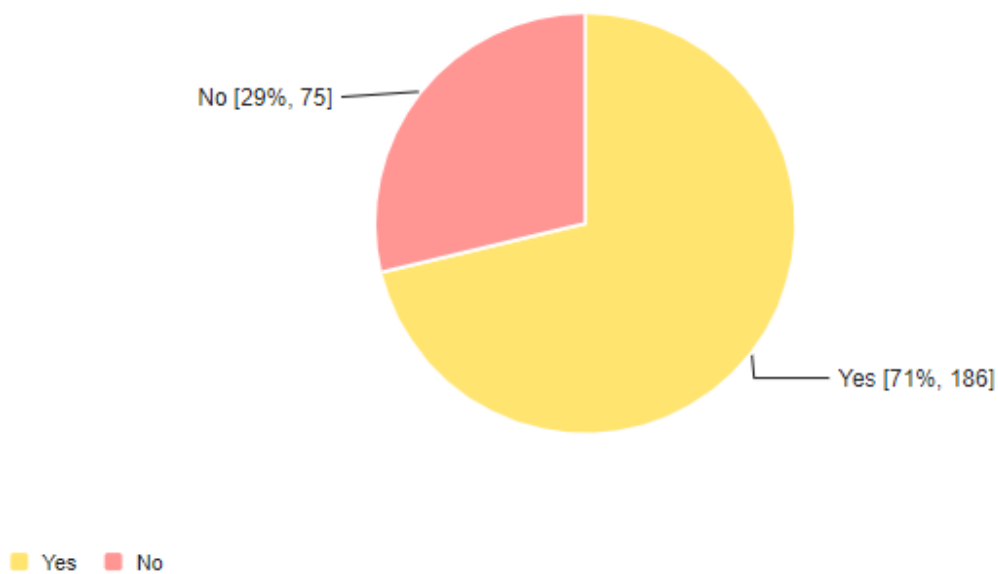
Q2 - Are you enrolled in StationMD?

251 Responses



Q3 - Have you or the person you support used StationMD at least once?

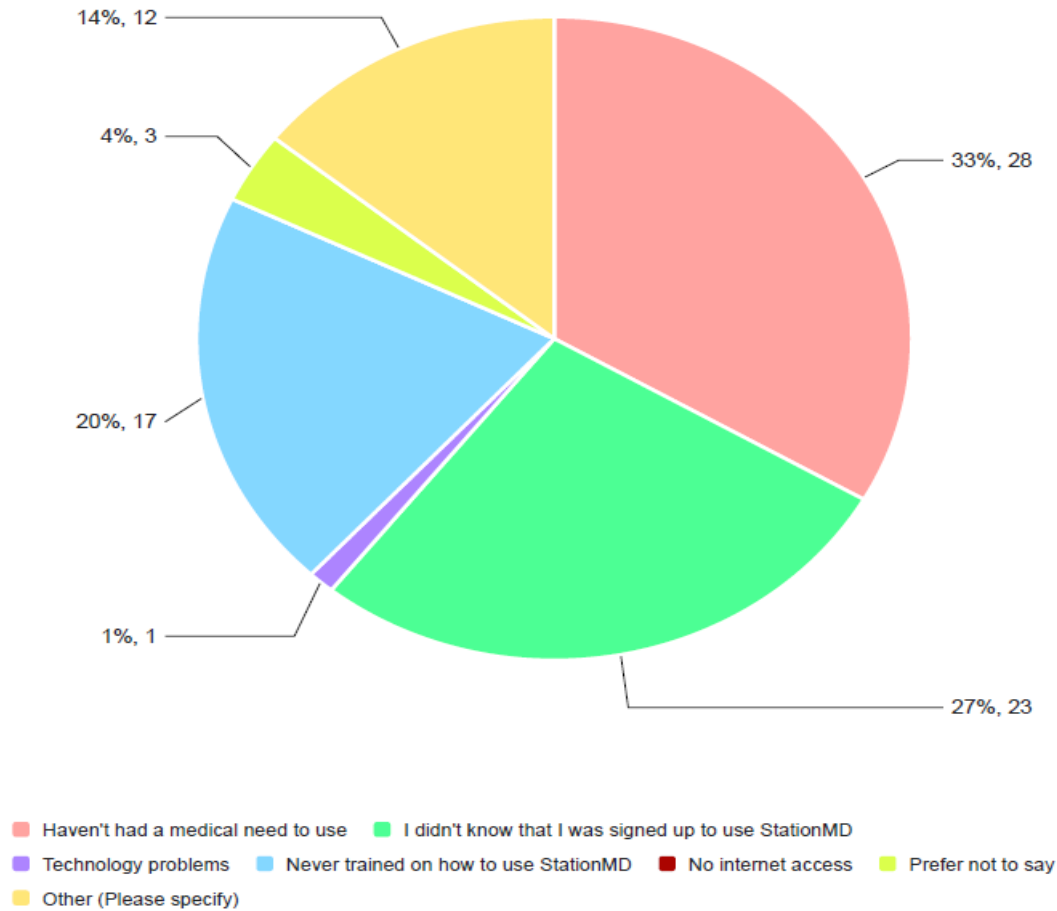
261 Responses



The 75 respondents who responded “No” to Q3 *“Have you or the person your support used StationMD at least once?”* were routed to question 3.5. We present below the response from these 75 StationMD enrollees regarding the reasons they cited for not having made a call to StationMD. The reader will note that the 75 respondents who answered “No” to Q3 checked a total of 84 response options to the question Q3.5 *“Why have you not used StationMD (Check all that apply)?”* Twelve respondents indicated “Other” and inputted the reason in the provided text box (see listing of these “other” responses below).

Q3.5 - Why have you not used StationMD? (Check all that apply) -
Selected Choice

84 Responses



Q3.5 - Other reasons (Please specify) - Text

Other (Please specify) - Text

I have regular access to medical care through previously established providers and I am satisfied with current care.

I was able to take my daughter to our PCP when she needed to have medical care.

Never heard of StationMD

Been able to get out into the community for appointments

No one has ever reached out to the person who I helped sign up for the services.

I signed up three individuals to participate in Station MD. No one has ever said they were contacted by Station MD to begin services. When first enrolled, we were told that a representative from Station MD would be contacting the individual (or guardian or provider). I am not aware of any contact having been made. I don't think the individuals, guardians, nor providers know how to contact Station MD nor what the actual benefit would be of contacting Station MD.

Not aware

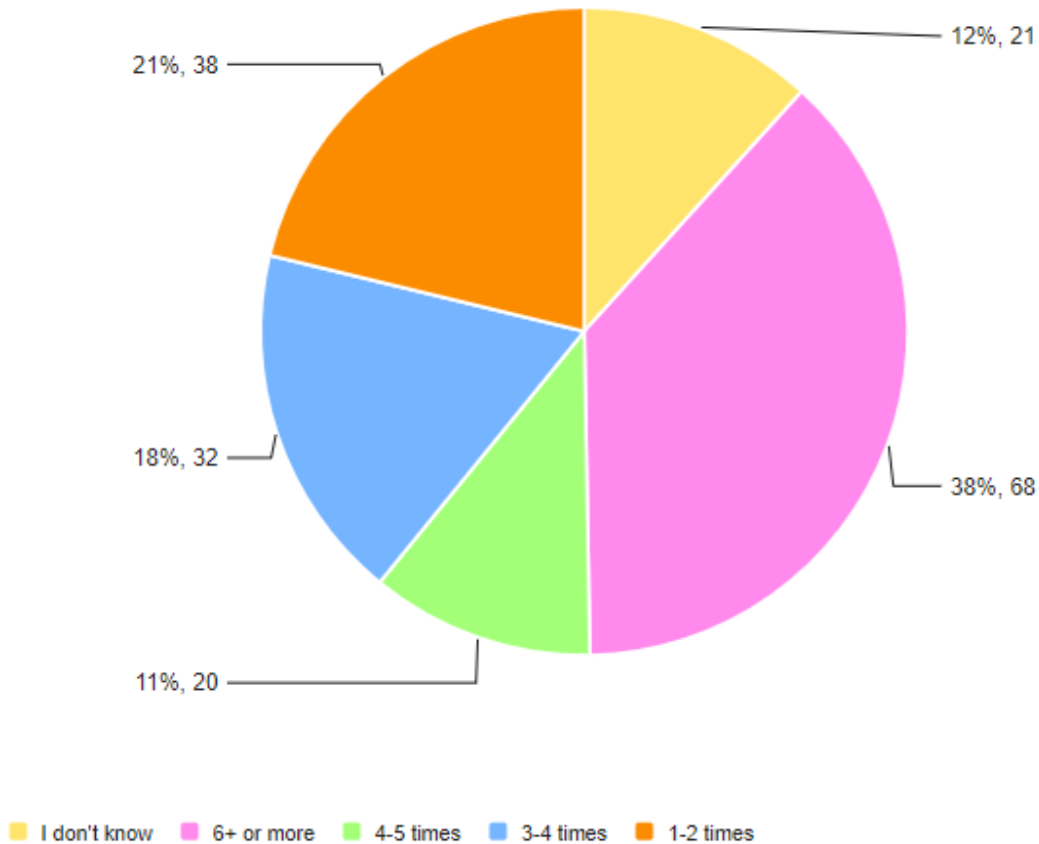
Similar service available through insurance so they use that instead.

I don't completely trust an online doctor for normally intelligent people. I really don't think this would be appropriate for a mentally handicapped person. I also do not trust paid caregivers. I am embroiled in a mess with a provider now

Staff forget that they can use it.

Q4 - How many times have you used StationMD?

179 Responses



SPECIFIC QUESTIONS ANSWERED BY INDIVIDUALS WITH LIVED ID/DD EXPERIENCE

Of the 22 respondents who identified themselves as an individual with lived ID/DD experience, nine reported never having used StationMD services. The remaining 13 respondents who identified as an individual with lived ID/DD experience endorsed having used StationMD at least once and reported being happy with their StationMD experience.

All but one respondent said that the StationMD doctor understood what they were telling them and 12 of 13 respondents said the StationMD doctor used clear language and explained things in a way that they could understand.

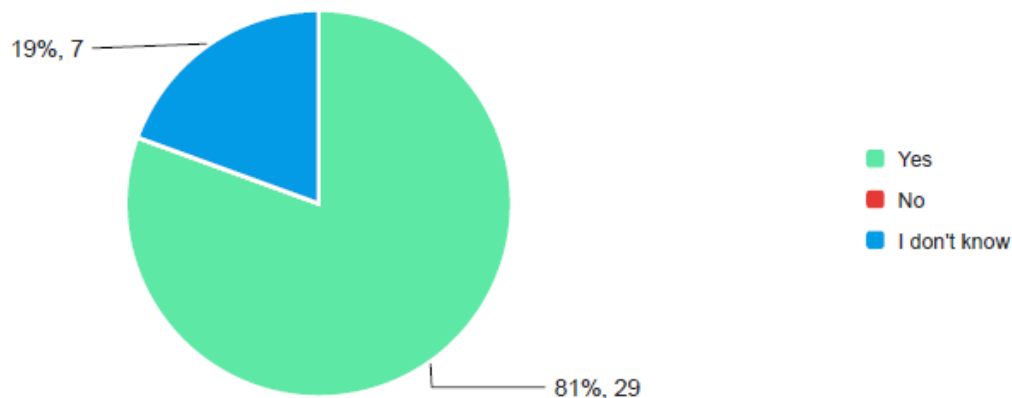
Unfortunately, the size of this sample is too small (13 of a total of 398 StationMD engaged users) to reasonably assume their responses provide a representative sample of the population of Ohioans with lived ID/DD experience who have used StationMD. Hence, we do not further discuss the responses herein.

SPECIFIC QUESTIONS ANSWERED BY FAMILY MEMBERS

Of the 74 family members who logged onto the StationMD online survey, 35 responded that they, or the person they support, had not made any calls to StationMD services since enrollment. The responses of the remaining 36 family members to our StationMD survey questions are summarized below.

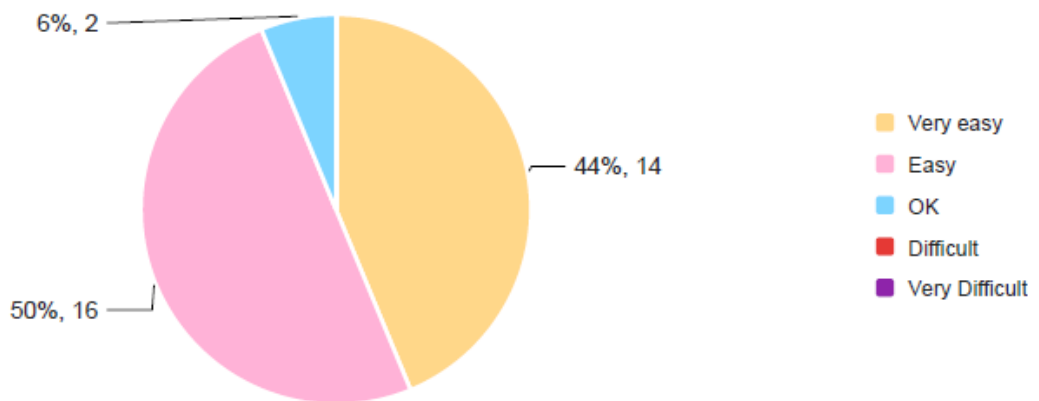
1. Do you feel the consultation with StationMD services improved the overall health outcomes of the person with developmental disabilities who is using these services?

36 Responses



2. How easy/difficult was it to connect and speak with a StationMD doctor?

32 Responses



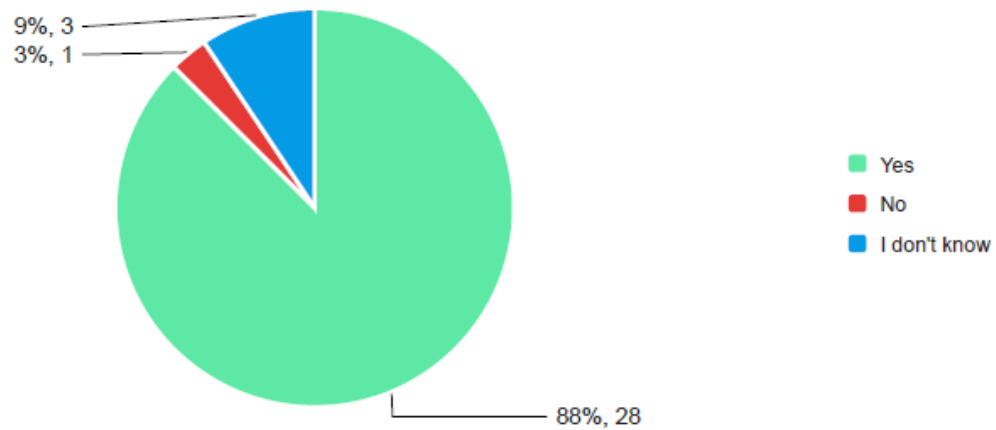
3. On average, how many, minutes in total was spent before you got to speak to a StationMD doctor?

31 Responses

Field	Min	Max	Mean	Standard Deviation	Variance	Responses	Sum
Minutes - Text	0.00	32.00	11.19	9.64	92.87	31	347.00

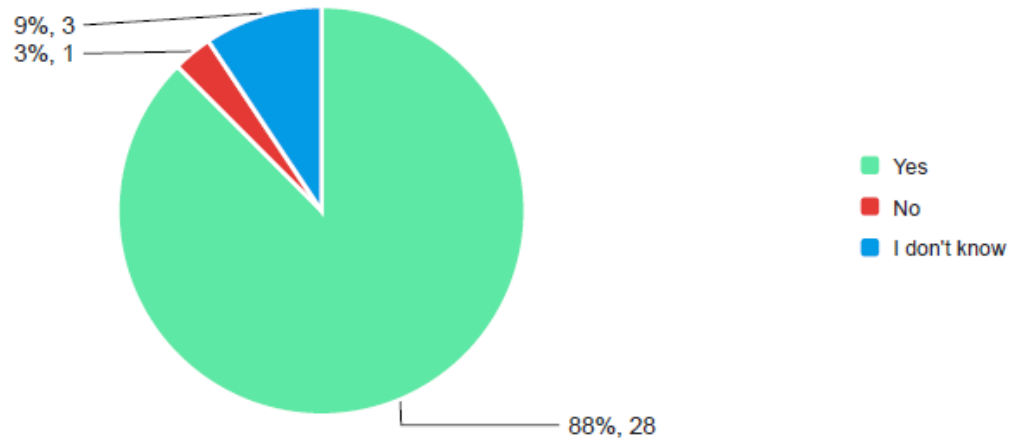
4. Did StationMD doctors demonstrate an understanding of the unique needs and experiences of people with developmental disabilities?

32 Responses



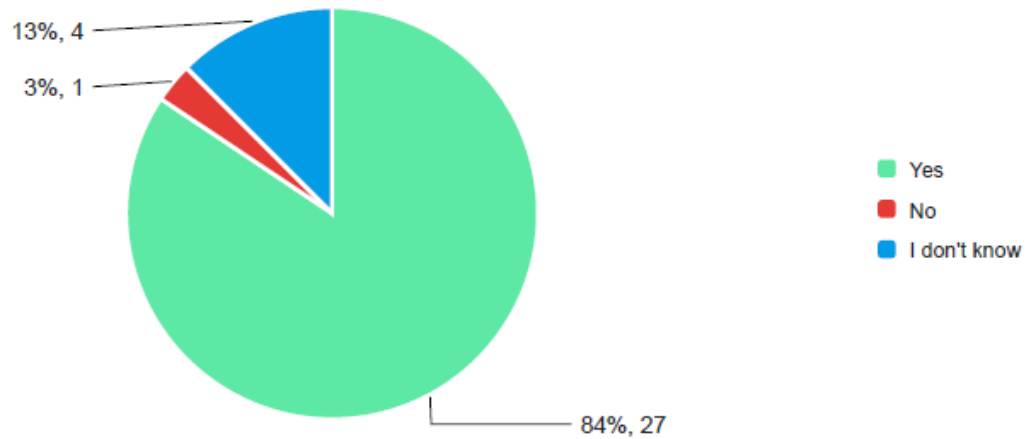
5. Does StationMD make your daily life as a family member/caregiver less stressful?

32 Responses



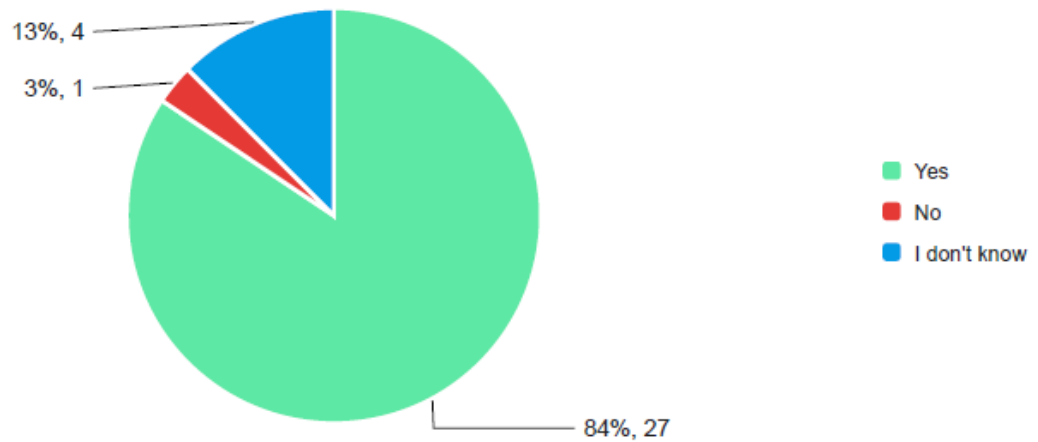
6. Does access to StationMD services improve your confidence in the access to health care services being provided to your loved one?

32 Responses



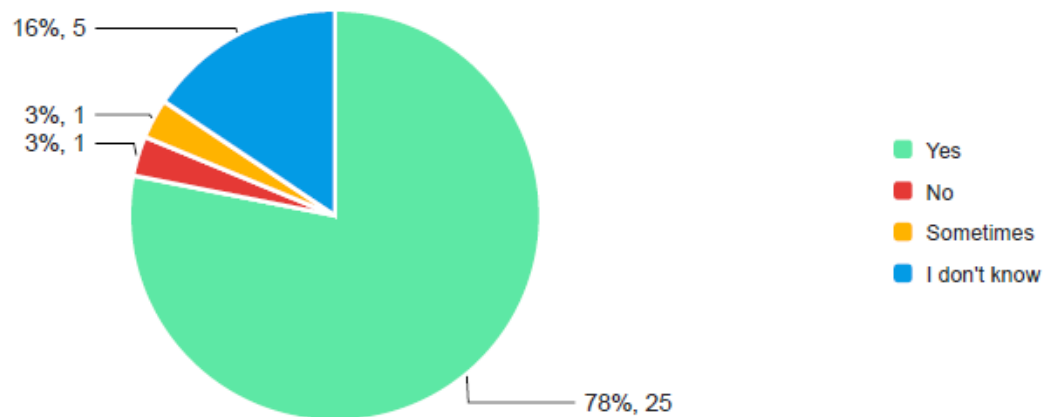
7. Do StationMD services help answer health care needs for your loved one?

32 Responses



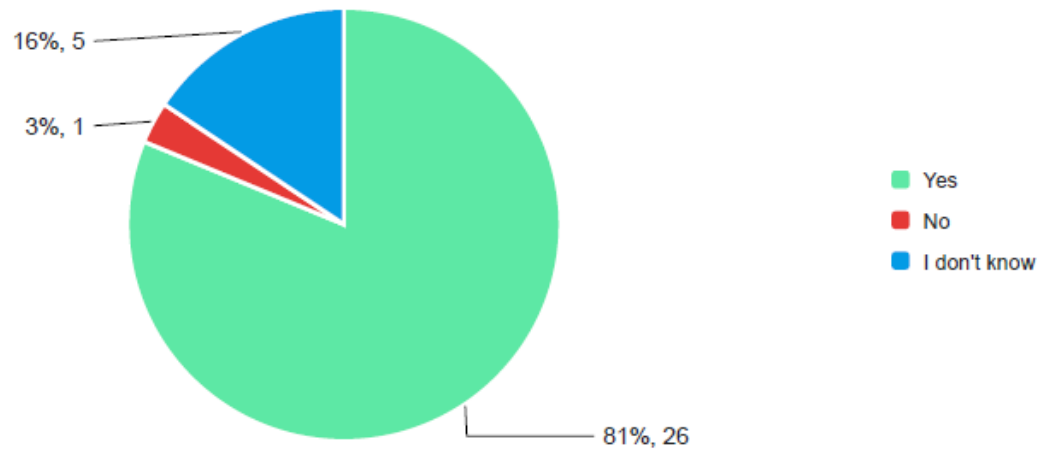
8. Do StationMD doctors use effective communication strategies with persons with disabilities/developmental disabilities?

32 Responses



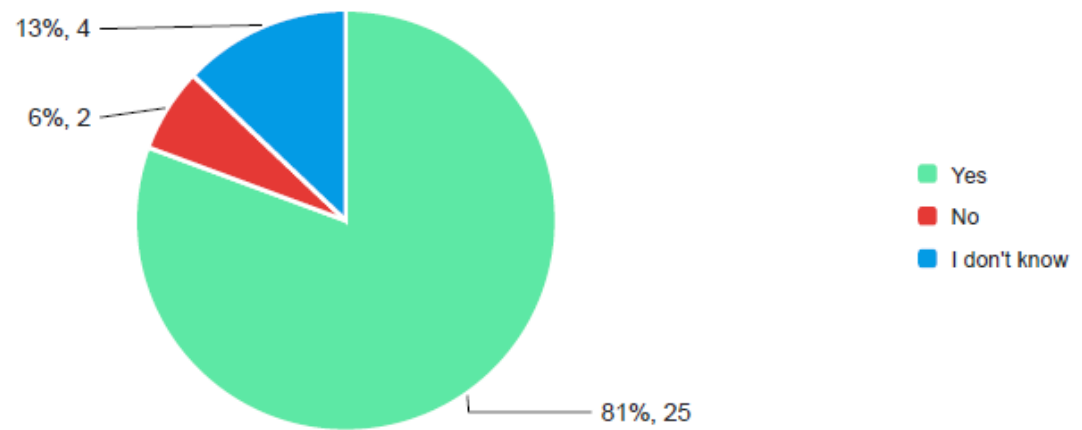
9. Does access to StationMD give you more time to help/care for your loved one?

32 Responses



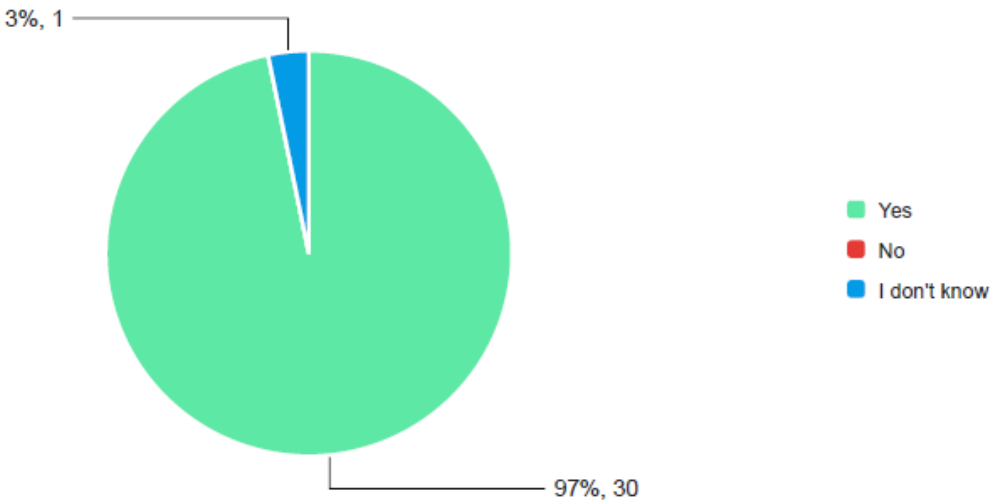
10. Do StationMD services improve the overall quality of life of your loved one?

31 Responses



11. Were you able to understand the treatment or advice provided by StationMD doctors?

31 Responses



12. What else would you like to tell us about your StationMD visit?

[FAM] What else would you like to tell us about your StationMD visit?

I think it is the best medical service out there.

Thank you

Very effective

It was easy to talk with the providers. They understood the situation and were able to provide a helpful solution.

Would probably benefit from a bit more understanding on how to better utilize StationMD with my son

The service provided save us precious time. It provides everyone with peace of mind and the ability to keep everyone at home safe

its probably good for icfs where it is harder for the staff to get people to the doctor office

Any access to medical help for DoDD individuals is important. ER sometimes take to long when a simple medication will work.

We travel and it's nice to know I can access services from anywhere

NA

Thank you foir providing this service for those with I/DD who cannot access conventional medical services.

I do not have anything to add.

It has been very helpful

Nothing

nothing, thanks

Thanks for the option.

It helps keep emergency room visits to a minimum

StationMD has made getting our individuals seen much more efficiently. I would love the opportunity to have more of them seen if slots become available in the future.

13. How likely are you to recommend StationMD? (0 = Not likely, 10 = Extremely likely) - Group

31 Responses



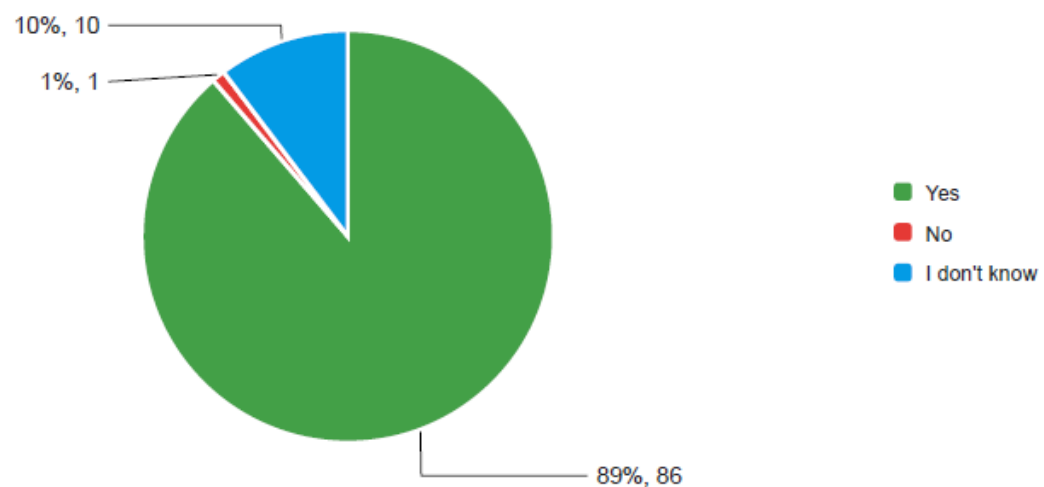
■ Detractor [4] ■ Passive [7] ■ Promoter [20]

SPECIFIC QUESTIONS ANSWERED BY DIRECT SUPPORT PROFESSIONALS

Of the 122 direct support professionals (DSP) who logged onto the StationMD online survey, 19 responded that they, or the person they support, had not made any calls to StationMD services since their enrollment in the Ohio StationMD pilot program. The responses of the remaining 103 DSPs to the StationMD survey questions are summarized below (some questions were skipped and some respondents tapered off. More than 90 people answered the questions listed).

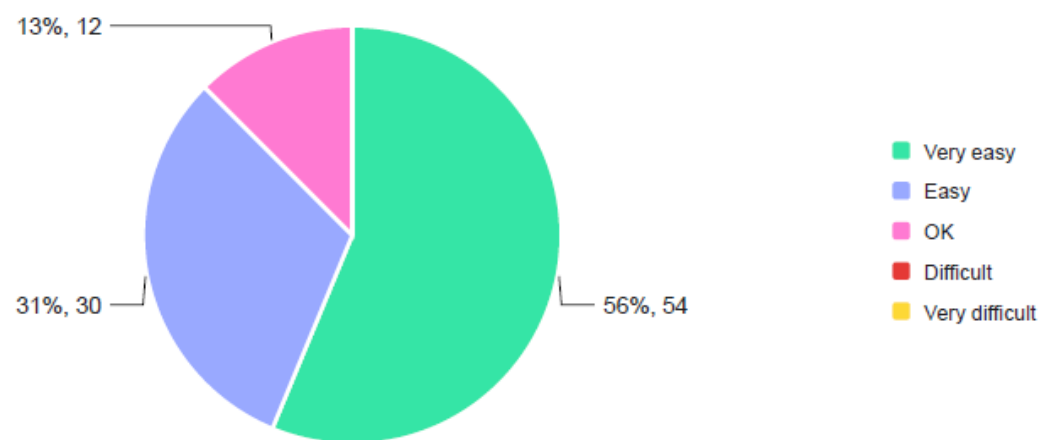
1. Do you feel the consultation with StationMD services improved overall health outcomes of the person using these services?

97 Responses



2. How easy/difficult was it to connect and speak with a StationMD doctor?

96 Responses

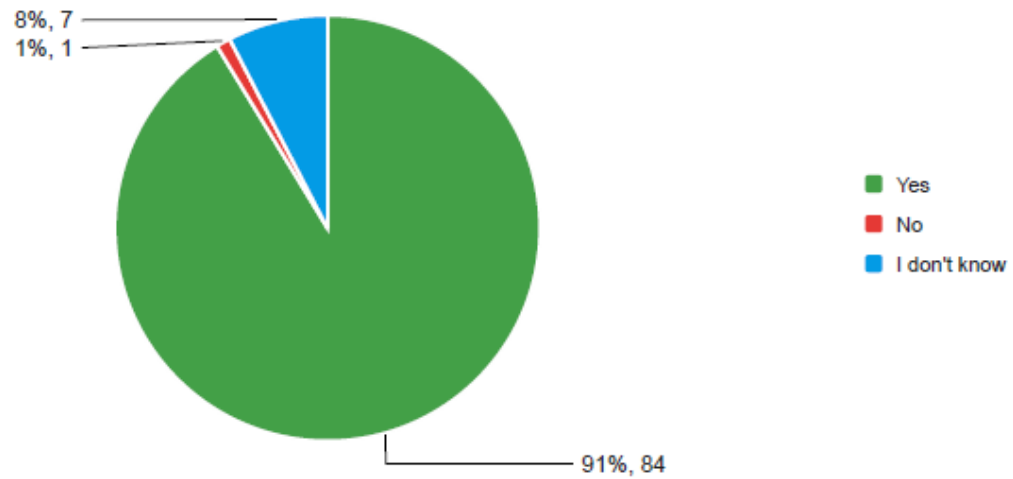


3. On average, how many, minutes in total was spent before you got to speak to a StationMD doctor?

Field	Min	Max	Mean	Standard Deviation	Variance	Responses	Sum
Minutes - Text	0.00	40.00	8.94	7.03	49.46	93	831.00

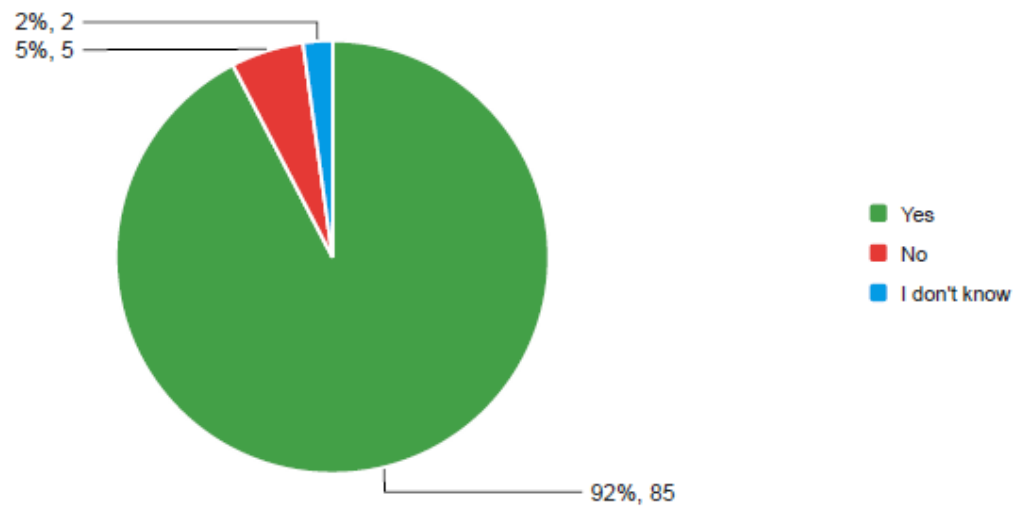
4. Did StationMD doctors demonstrate an understanding of the unique needs and experiences of people with developmental disabilities?

92 Responses



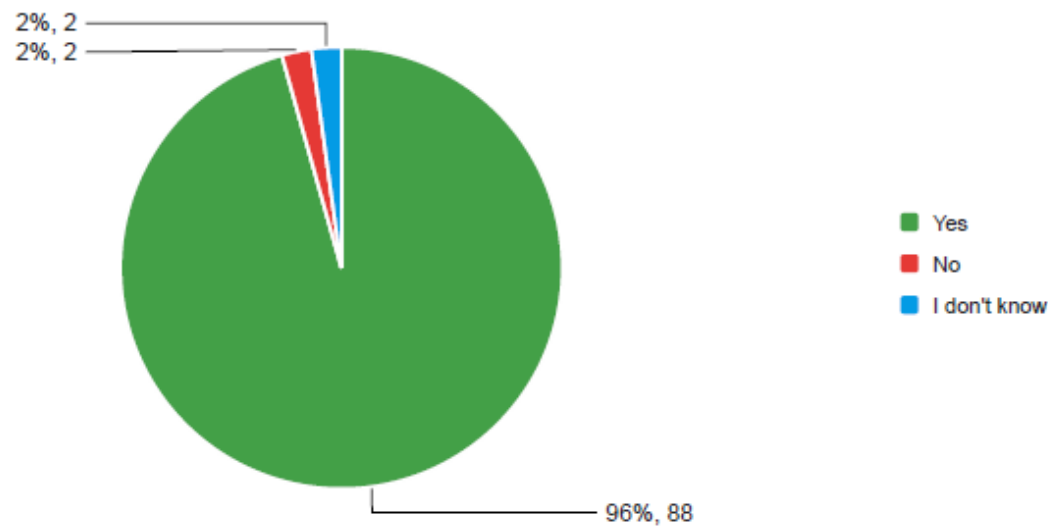
5. Does StationMD make your job less stressful?

92 Responses



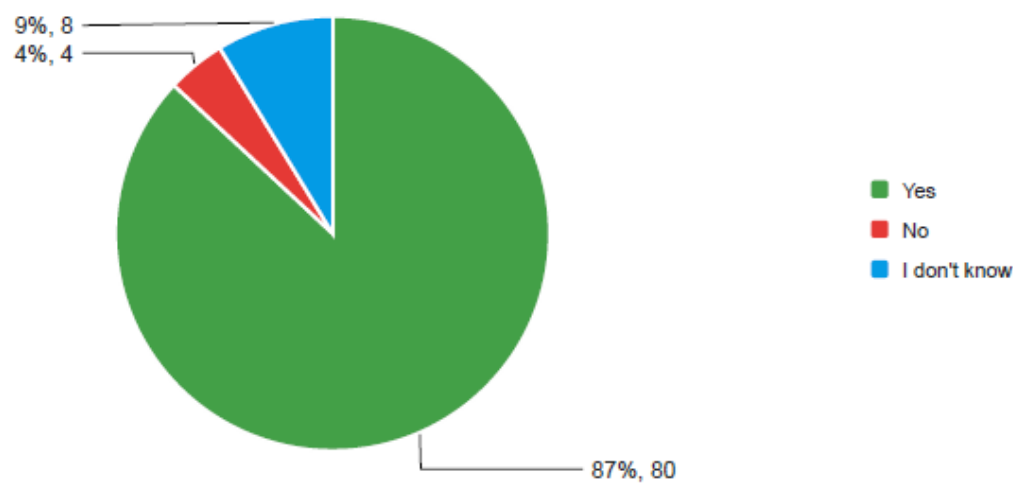
6. Does access to StationMD services improve your confidence/ability to provide quality care?

92 Responses



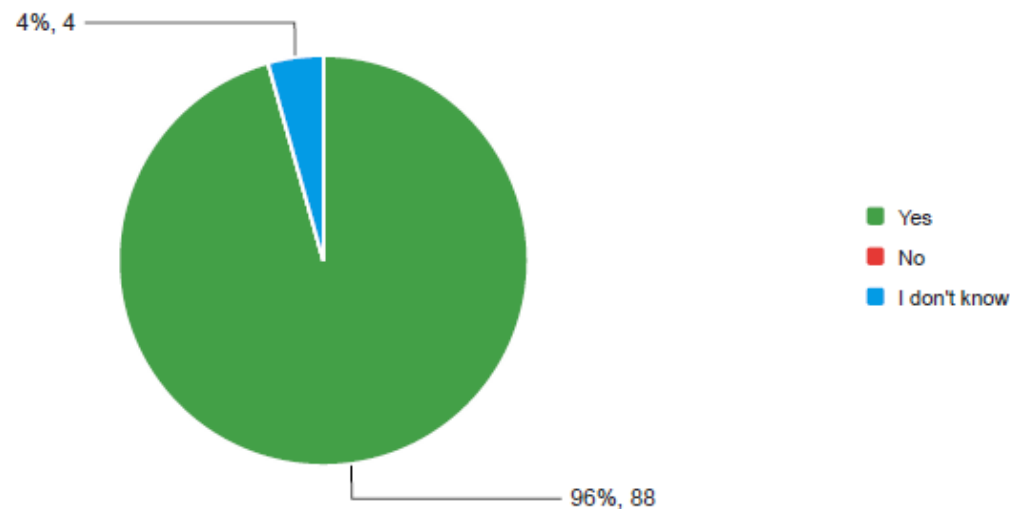
7. Does having access to StationMD improve your job satisfaction?

92 Responses



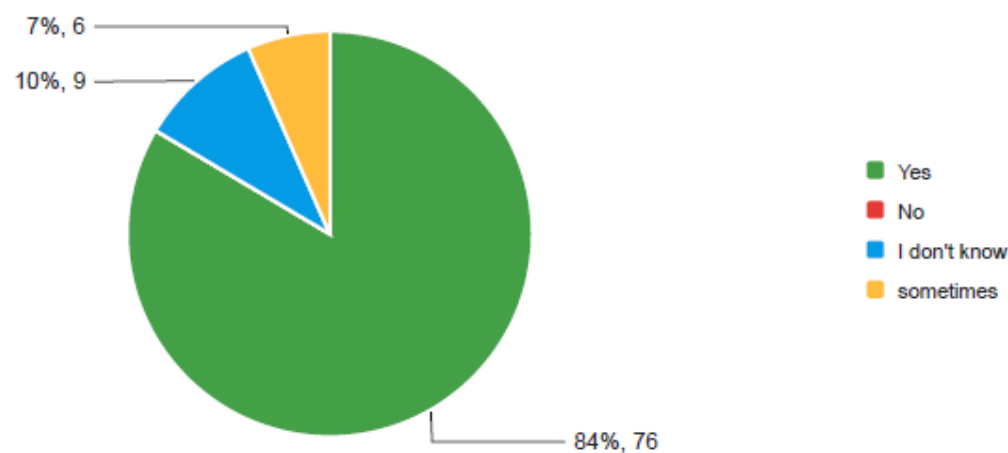
8. Do StationMD services help you meet the health care needs of the person(s) you support?

92 Responses



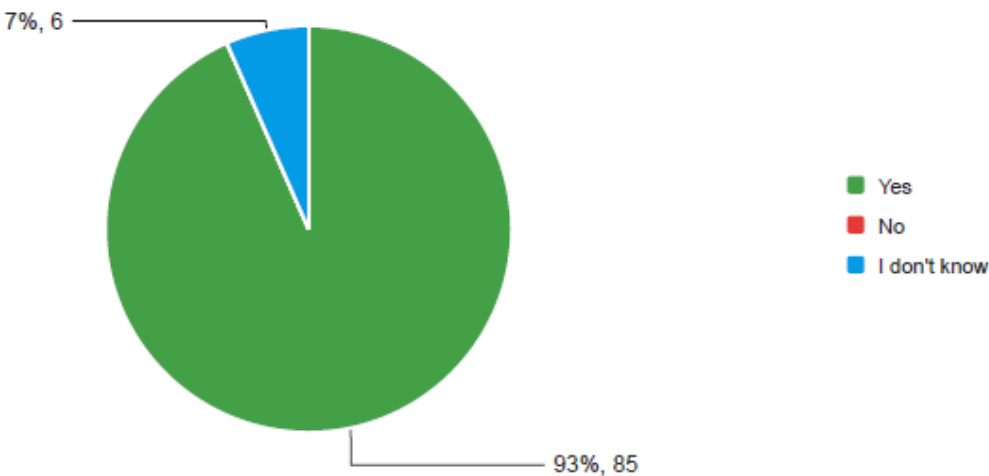
9. Do StationMD doctors use effective communication strategies with persons with disabilities/developmental disabilities?

91 Responses



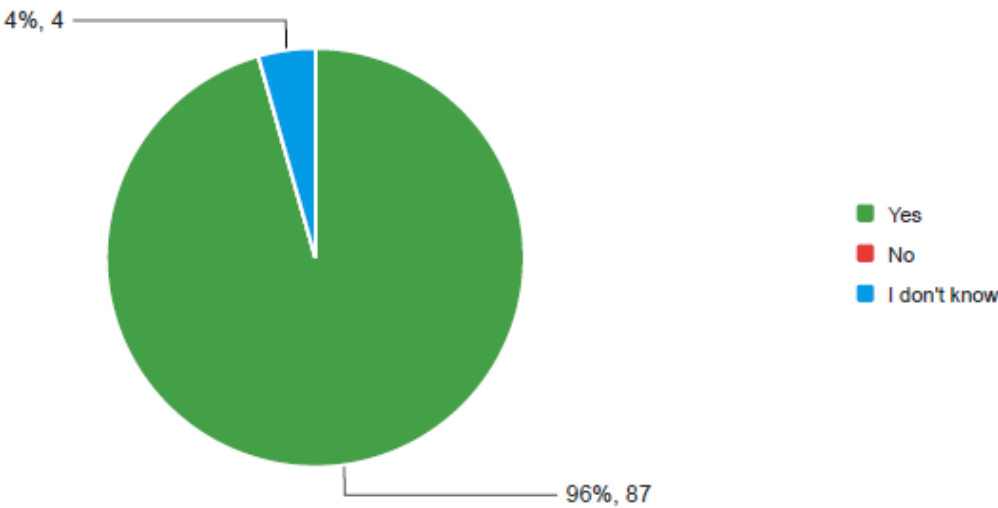
10. Do StationMD services improve the overall quality of life of your clients?

91 Responses



11. Were you able to understand the treatment or advice provided by StationMD doctors?

91 Responses



12. What else would you like to tell us about your StationMD visit?

[DSP] What else would you like to tell us about your StationMD visit?

Friendly staff and doctors. They never rush us

It is a much needed program and I want to continue using it. There are some individuals that have not used it yet but I would still want access to it for them because of what it could mean for them. They have not used it because they have not had the health issues that need addressed but that's not to say they won't in the future.

It was very remarkable

It was remarkable and very good

StationMD makes our job easier.

it has been and hopefully be a great resource for the DD population and maybe even home bound clients

Always easy to use

It saved us from needing to make a 911 call, eliminated an ER visit, preventing him from laying on a gurney for hours in agony.

We have not had to use it often, but the one time we did it was invaluable and it kept a med error from happening.

This has been very helpful to indiv, their families and our team overall. When I think back to the visits over the last 11months there isn't one time that it didn't in some way benefit the indiv. I wish this service had been available yrs ago:)

Thanks for creating this service for the individuals I serve.

I love that Station MD sends the person on file the outcome of the appointment as sometimes information is not passed on correctly

StationMD is a benefit to DSP when there clients need medical attention after hours or on weekends.

I absolutely love the program! I spread the word everywhere I go and tell all the nurses that I know in this field to use this program!

N/a

Doing a good job

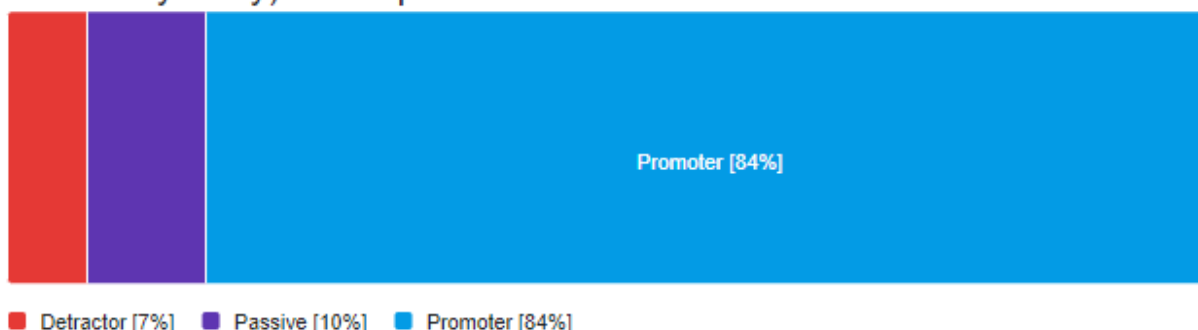
Keep doing good job

It has made the job of a DSP very easy when it comes to seeking treatment for the people we serve

Station MD has made it easier for individuals with IDD to access health care more quickly, particularly in multi-person homes where additional staff would be required to make a trip to urgent care, it has also helped with getting orders for medications needed after hours when the primary physician is not reachable.

This is by far the best support offered to providers in my 38 years of service in this field. It had made such a positive difference in the lives of the individuals as well as the staff. It is my sincere hope that this service continues and that it expands!

13. How likely are you to recommend StationMD? (0 = Not likely, 10 = Extremely likely) - Group



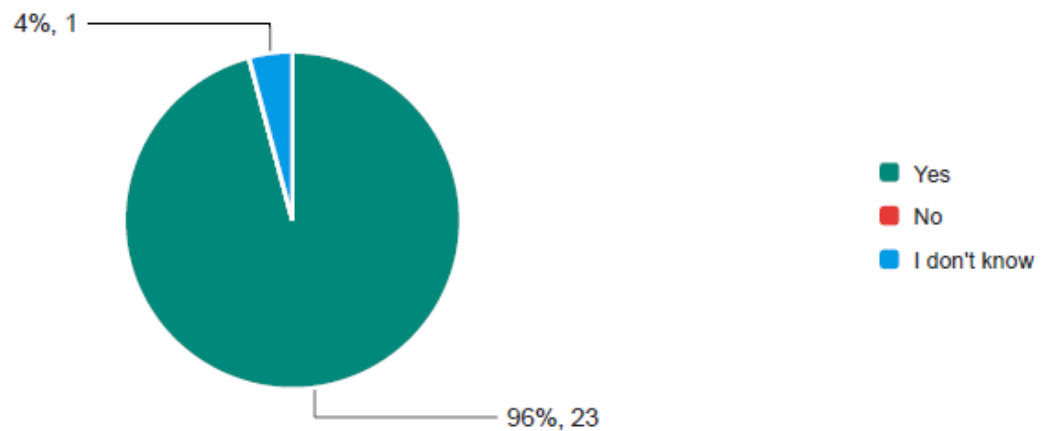
SPECIFIC QUESTIONS ANSWERED BY ICF STAFF MEMBERS

Of the 54 ICF staff members who took the StationMD online survey, 50 answered the question “*Have you used StationMD at least once?*”. 36 of 50 respondents said that they had used StationMD at least once. The remaining 14 (28%) of these ICF staff members responded that they, or the person they support, had not made any calls to StationMD services since their enrollment in the Ohio StationMD pilot program. A third of these respondents tapered off and 24 ICF staff members answered the remaining questions. Although this sample size is small, we have included responses to survey questions below.¹

¹ The ICF Staff Member survey question set should be interpreted with caution. 24 responses is too small to be representative of ICF staff who provide support services for StationMD enrollees.

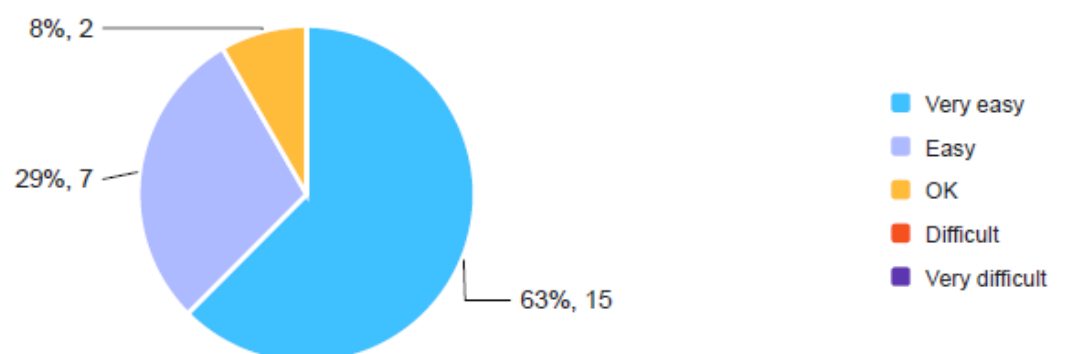
1. Do you feel the consultation with StationMD services improved overall health outcomes of the person using these services?

24 Responses



2. How easy/difficult was it to connect and speak with a StationMD doctor?

24 Responses

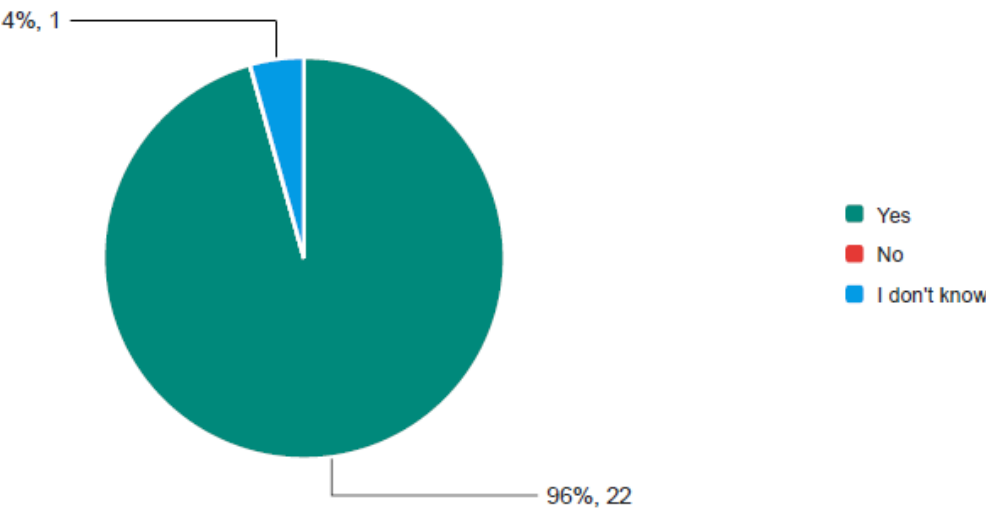


3. On average, how many, minutes in total was spent before you got to speak to a StationMD doctor?

Field	Min	Max	Mean	Standard Deviation	Variance	Responses	Sum
Minutes - Text	0.00	30.00	11.96	6.38	40.74	23	275.00

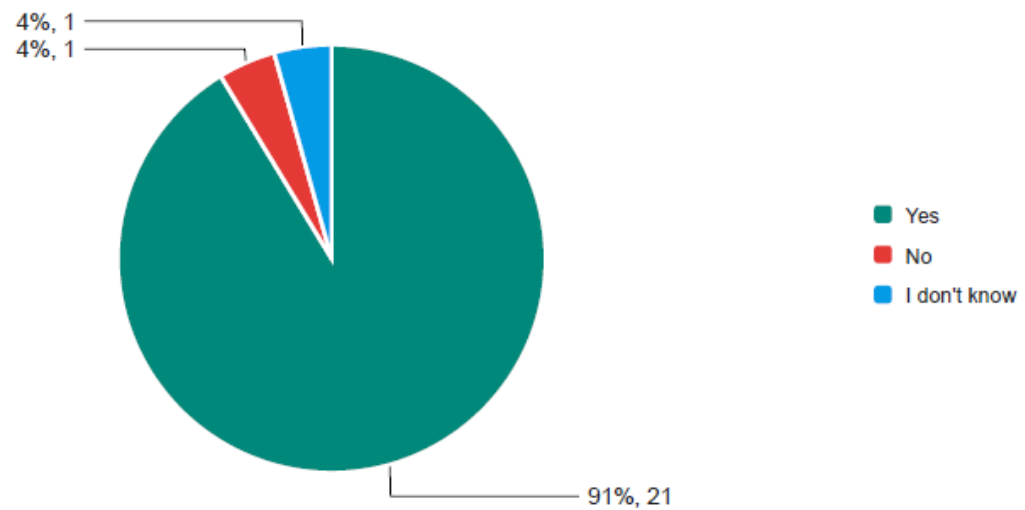
4. Did StationMD doctors demonstrate an understanding of the unique needs and experiences of people with developmental disabilities?

23 Responses



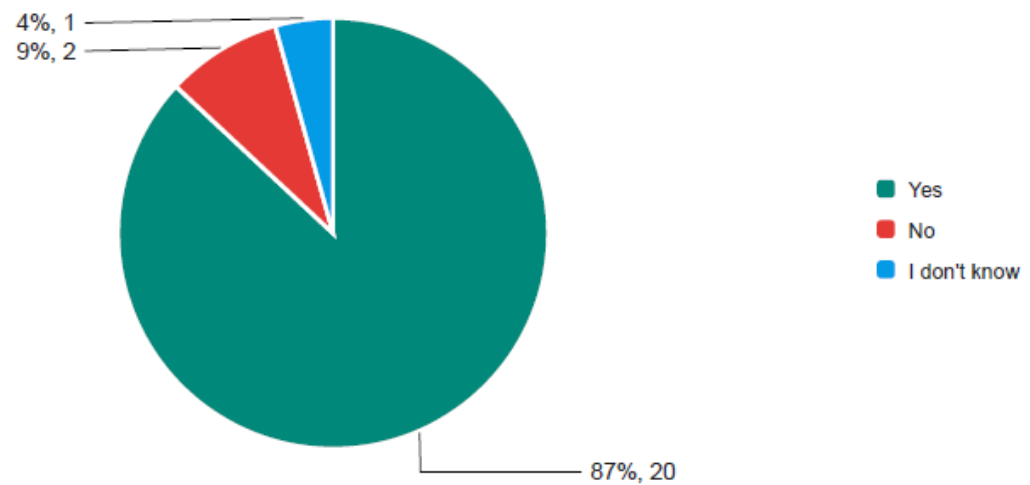
5. Does StationMD make your job less stressful?

23 Responses



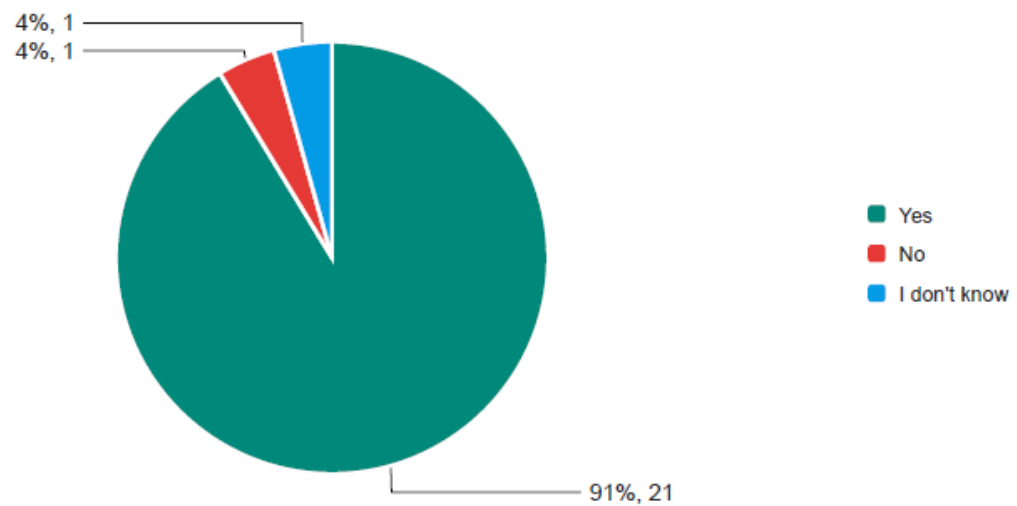
6. Does access to StationMD services improve your confidence/ability to provide quality care?

23 Responses



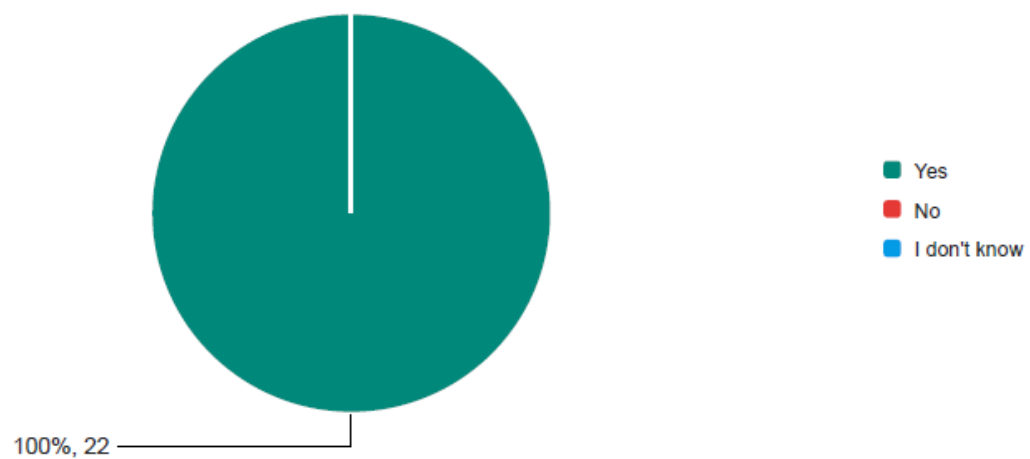
7. Does having access to StationMD improve your job satisfaction?

23 Responses



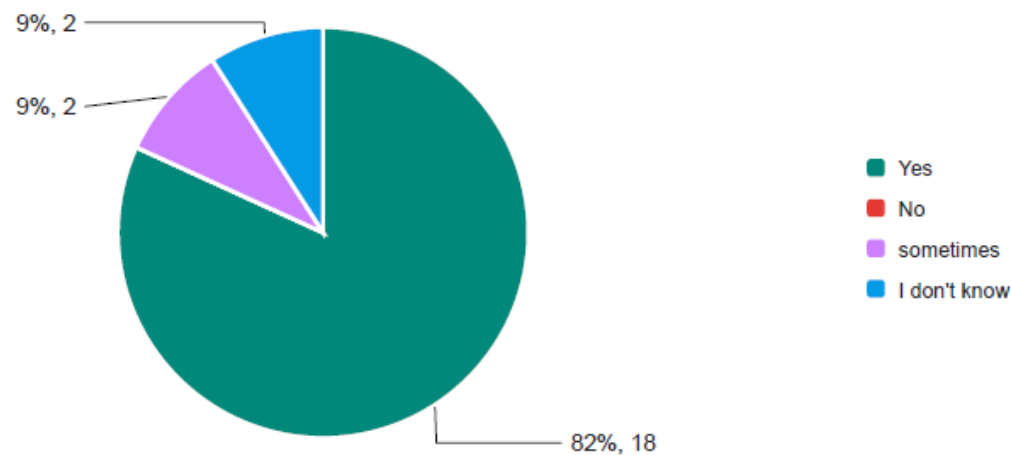
8. Do StationMD services help you meet the health care needs of the person(s) you support?

22 Responses



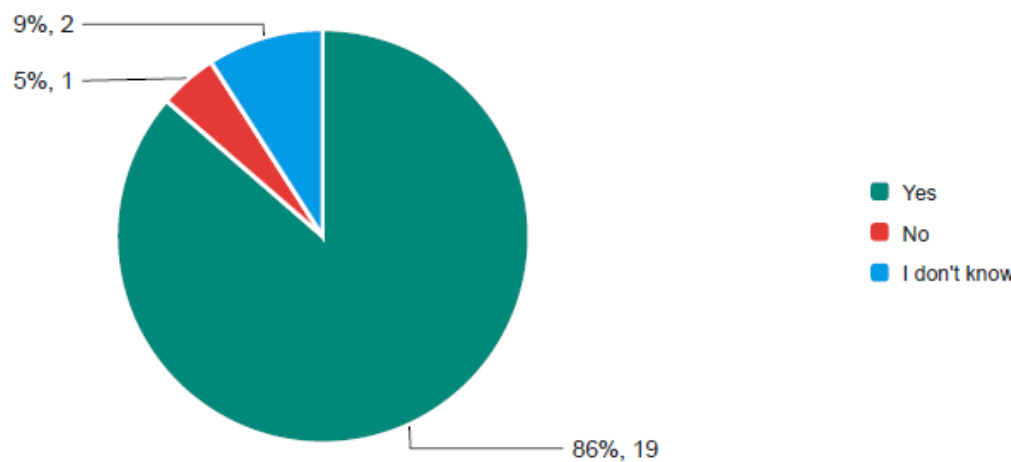
9. Do StationMD doctors use effective communication strategies with persons with disabilities/developmental disabilities?

22 Responses



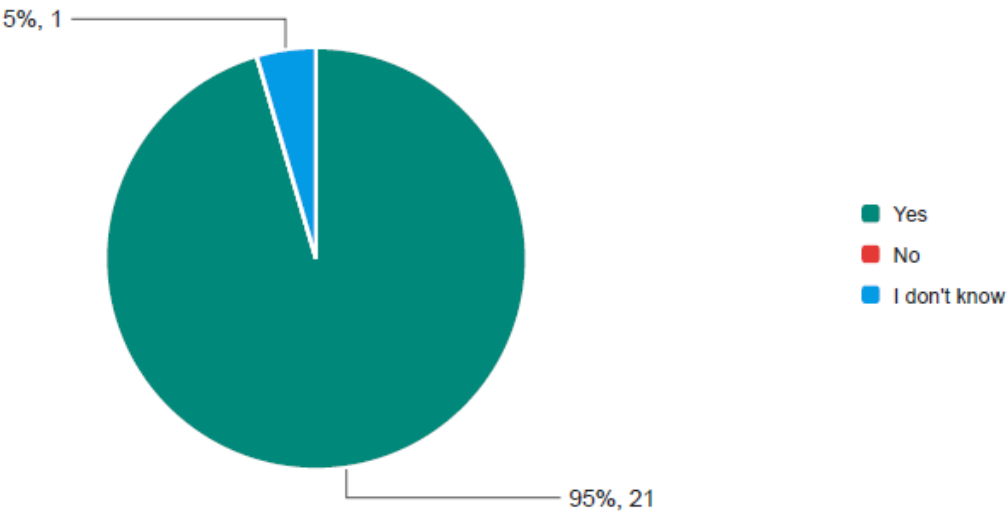
10. Do StationMD services improve the overall quality of life of your clients?

22 Responses



11. Were you able to understand the treatment or advice provided by StationMD doctors?

22 Responses



12. What else would you like to tell us about your StationMD visit?

[ICF] What else would you like to tell us about your StationMD visit?

It is very helpful to have convenient access to providers who are experienced and trained in working with our population.

Overall, typically a great experience. Sometimes the long waits agitate our population

Our agency used the service frequently and found it to be very positive. Working on getting the waiver service to cover the cost for as many clients as possible.

I think I could benefit from a discussion about the service in order to increase utilization. I think this service is a great one and want it to continue.

It is a wonderful program

I do not utilize StationMD directly, but manage the oversight of its use by HCDDS providers. My answers are based on input I have received from said providers over time.

Efficient

This is a great service to this population! We appreciate having the opportunity to use it!

This has been an incredible service offered to our consumers. It has actually helped with staff retention and our efforts of decreasing burnout.

Love it!

Very convenient and easy to use. Many of the clients we serve do not tolerate waiting or being in the ER or doctor's office. This helps both the client and the staff feel at ease and the information and guidance has been very effective.

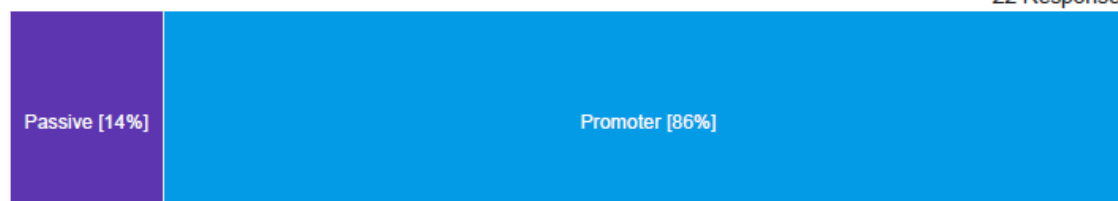
I think it is a very positive tool

I like the convenience

It has been a wonderful experience. I am a director of nursing and it is helpful that the paperwork is sent right away to email. Scripts are sent timely as well

13. How likely are you to recommend StationMD? (0 = Not likely, 10 = Extremely likely) - Group

22 Responses



■ Detractor ■ Passive [3] ■ Promoter [19]

DISCUSSION

Overall, the responses received from family members and DSPs who had made at least one StationMD call were overwhelmingly positive about this experience and the benefits for the person they support who needed a medical consultation. Among all respondents, almost 44% of the respondents to our survey (120 of 271) had accessed the StationMD services 3+ times since their StationMD enrollment. Of the 196 family members and DSPs who responded to the question *“Do you feel the consultation with StationMD improved the overall health outcomes of the enrollee?”* there were not any respondents who answered “No”. The family members and DSP respondents were overwhelmingly positive when asked about the *“StationMD physicians demonstrated an understanding of the unique needs and experiences of people with ID/DD”*. Overall, 90% (112 of 124) of family members and DSPs responded “Yes” (28 fam, 84 dsp) to this question; 10 (8%) responded that they were “*unsure*”, and only 2 of 124 respondent (<2%) responded “No” to this question.

In terms of *“Ease of use of StationMD,”* 88% or 84/96 of the DSPs who responded to this question reported that it was “easy” or “very easy” to connect to StationMD. Additionally, 92% (85 of 92) of DSPs responded that having access to the StationMD services contributed to a reduction in the stress level of their job supporting persons with ID/DD.

We also included an overall rating of the satisfaction level with the StationMD services in all surveys. Here, we asked what is commonly referred to as a “**Net Promoter**” question, asking respondents to rate on a scale of **0** (“not likely”) to **10** (“very likely”) *“How likely they would recommend StationMD.”* A net promoter score is considered by some as

the gold standard of customer experience metrics. The results from a net promoter score can tell us a lot about the user's perception of the service (e.g., StationMD), how they feel, and if their experience with StationMD met their needs/expectations. The net promoter range is broken down as follows: a net promoter score of 0 to 5 = **detractors**; 7 to 8 = **passives**; and 9 to 10 = **promoters**. Based on the results from this question, we are able to calculate a "net promoter score" (NPS) from the responses entered by the 122 family members (31) and DSPs (91) who answered this question. The NPS is calculated by subtracting the % number of detractors from the % number of promoters: 78.7% (promoters) – 8.2% (detractors) = NPS of 71/100. Again, the NPS is a good benchmarking tool. In looking at interpreting a NPS = 71 for StationMD, one site that provides some metrics is: <https://www.retently.com/blog/good-net-promoter-score/>. They provide the following rule of thumb to interpret the NPS: (1) a NPS higher than 30 is "good" and indicates that your service is doing great and has far more delighted customers than unhappy ones. **A NPS of >70 means your customers love you and your service is generating a lot of consumer satisfaction and recommendations of your service to others.**

Also of note is that among the 271 respondents who completed the online surveys (a combination of all adults with lived ID/DD experience, family members, DSPs, and ICF staff) and who responded to the survey question "*Did you, or the person you support, access StationMD?*" 75 (40%) respondents reported never having made a single call to StationMD service during the Ohio StationMD pilot program. When these n=75 participants were asked a follow-up question about the reason(s) for their absence of engagement with StationMD, almost 50% (38 of 75) responded either that they did not know that they were

enrolled in StationMD or that they had not received any training to use StationMD. Another 25 respondents (42%) had a valid reason, having responded that they had not called StationMD because they had not experienced a medical situation warranting a medical consultation.

One takeaway here is that there is room for improvement in terms of messaging the availability of the StationMD service among the enrollees. In light of the high rate of staff turnover, an iterative stream of reminders and tips on using StationMD might be beneficial in enhancing its uptake and usage by a greater number of enrollees.

Some final comments written into the online survey's "general comments" section are presented below.

Family Members & DSPs:

"It helps keep emergency room visits to a minimum."

"The service provided saves us precious time. It provides everyone with peace of mind and the ability to keep everyone home safe."

"StationMD has made getting out individuals seen much more efficiently."

"Wonderful program."

"It's very convenient and efficient."

"It has made the client's lives a lot easier and help get them the care they need."

"It is very valuable tool that (a) relaxes the individual by allowing it to occur in their environment, (b) reduces the overall time for the care to be completed... (c) Allows the individual to get treatments quicker by having scripts ordered at time of appointment, if they

need next steps, calling ahead to the ER... so when the individual arrives, the ER is prepared to treat the individual quickly."

FOCUS GROUPS

CHARACTERISTICS OF FOCUS GROUP PARTICIPANTS

A total of 23 professionals participated across five separate focus groups and two individual interviews. Focus groups included participants from County Boards of Developmental Disabilities and Provider Agencies. The job titles of the focus group participants included mostly management level personnel such as executive director of an agency/provider, service director, or county board program director. The 11 out of 23 focus group participants who engaged in a demographics survey consisted of professionals across 8 different Ohio counties with 82% of participants identifying as women and 18% identifying as men. Counties noted are Allen, Champaign, Cuyahoga, Franklin, Lucas, Miami, Montgomery, and Summit County.

THEMES OF PARTICIPANT RESPONSES

Although less than half of the participants had *personally* been present during a StationMD, all felt that they had read several StationMD reports, had heard sufficient feedback, and obtained information from their direct reports to contribute insights from an administrator-level perspective into their agency's experience with StationMD. This feedback included, but was not limited to, the impact of StationMD on staffing and operations at their respective agencies (see Appendix D & E for focus group questions).

Work/life balance was described as enhanced for provider agency staff. One participant attributed having access to StationMD services to a **reduction in the workforce turnover rate** of their nursing staff. Prior to incorporation of StationMD, registered nurses were leaving their positions because of the demands required that they work from home after hours and that the demands to be “on call” 24/7 were too great. However, after StationMD was introduced, after hours calls were reduced substantially to these nurses because more health-related questions were being more effectively handled by StationMD; and, therefore, the nurses were called less often in evenings, weekends, and while they were on vacation.

Participants said that when StationMD was available, an added benefit was that they were **better able to ensure DSP availability** in their own agency. When someone was able to resolve the person with ID/DD’s health concern without them leaving their home/setting (i.e., not needed a trip to the ED), backup staffing was not needed, additional staff was not called upon to take over for staff who would need to transport someone to the ED, etc. In the experience of one focus group participant staff would sometimes call “off” on days that they know a medical appointment was scheduled with a doctor for the person with ID/DD because they wanted to avoid the “hassle” of these visits/days. Because gaps in care can often be handled at the home by StationMD, there are less appointments that involve transportation to a doctor’s office and as a result, there are less “call-off” situations among the DSP and a greater availability of back-up personnel who can go to the homes where they are most needed. Participants also mentioned that, as a result of the ever-present DSP workforce crisis, their agencies can now hire staff who do *not* have drivers’ licenses. In these situations, staff are not able to drive someone to a hospital if needed. If

someone has an ambiguous health crisis, taking a trip to the ED is not an option unless emergency transportation is arranged, such as use of an ambulance or calling backup staff. StationMD ensures that these staff are still able to respond appropriately if presented with a situation where they need to decide whether or not to call emergency personnel.

Besides avoiding the ED or reducing time spent at the ED, quality of healthcare for the adult with ID/DD is greatly enhanced by the availability of StationMD. One other example given by several focus group participants includes the ability to get prescription medication issues resolved without necessitating having the person with ID/DD leaving their home. Other participants mentioned being able to get prescription refills without needing to have the individual with them.

Limited staffing and transportation options impact the person with developmental disabilities. Although not explicitly mentioned in the previous example, it is implied that reduced access to a hospital is also a health and safety concern. The person's health and safety was enhanced with StationMD because, even when access to a hospital was limited, someone was available to resolve health concerns. Another example given described a time that healthy roommates, who did not need care at the time, were required to accompany their roommate in transportation to the hospital because a backup staff was unavailable. For the duration of the hospital visit, everyone had to relegate their own plans and instead spend their time on the visit to the ED.

Having to go to the ED is associated with elevated levels of overall stress levels for everyone starting with the person with ID/DD but also for the worker accompanying and supporting the individual with ID/DD who needs to go to the ED. In the previous example,

instead of a staff member transporting and supporting one individual in crisis, they were responsible for supporting one individual in crisis AND all the person's roommates.

Two focus group participants endorsed "*peace of mind*" and others described **enhanced levels of confidence at work for their staff**. One respondent said "*It... gives [DSPs] the assurance that they have provided the best care that they can and that they've done something. Otherwise, they would've been like 'Oh should I have called? Should I have taken them to the ER?'*"

The experience of going to the ED was described as involving long periods of time spent at the hospital. The length of the time periods mentioned ranged from 3 to 16 hours spent at the ED. Experiences varied but several focus group participants mentioned it was common to spend 3 to 4 hours at the ED and several other participants endorsed some visits at the ED lasting as long as 12+ hours. Since the implementation of StationMD, even when they do go to the ED, that experience is quantitatively and qualitatively different than prior to having access to StationMD. This portion of the discussion was illustrated by examples from several focus group participants who described a situation when one of their consumers went to the ED following a StationMD consultation. StationMD physician calls the ED team and prepares them in advance for the arrival of the adult with ID/DD. They can often **skip the waiting room** because StationMD physician's call has explained the situation to the ED team and answered their initial questions. The overall length of time spent at the ED was less. One participant said: "*Maybe it's an hour at the ED, instead of 12 hours.*" This overall experience was endorsed by nearly every other participant in the different focus groups.

When asked whether there were any downsides to StationMD use, participants did not mention anything negative about the service itself. One focus group participant summarized their comments about having access to StationMD as follows: *“There are no down sides to it, it is a win-win for everybody who is using it.”*

Some focus group also suggested improvements related to making available the use of some Bluetooth medical tools (e.g., stethoscope, blood pressure cuff), IT support services when encountering trouble logging onto StationMD service, and providing a more streamlined process of providing updated StationMD account information on engaged users.

GENERAL DISCUSSION

Overall, the information obtained from the focus group participants provided anecdotal data that further supported the findings from the Medicaid claims data and online survey responses. Generally, the focus group participants had only high praises for the benefits of the Ohio StationMD pilot program and its resulting benefits for both the individuals with ID/DD, DSPs as well as reducing some personnel complications for agencies/providers (e.g., less overtime, greater job satisfaction, lower absenteeism associated to medical appointments, reducing the burden on nursing staff, etc.).

These preliminary outcome results of the Ohio StationMD pilot program seem to indicate an overall positive gain with respect to increasing access to health care, reducing barriers to obtaining a rapid medical response to medical situations that might otherwise necessitate a visit to an urgent care or ED. Also of note, are the benefits reported around care coordination in the event that the individual is directed to go to the ED following a

StationMD consultation. The staff highlighted the benefits of having the StationMD physicians call ahead to the emergency department team and provide critical triage information that often resulted in substantially shorter wait periods at the emergency department, reduced frustration on the part of everyone involved, and likely a more positive medical outcome for the adult with ID/DD.

Perhaps one of the surprises from the Medicaid claims analyses was the lack of difference between time 1 and time 2 regarding hospital transfers. Some of these absences of large measurable changes in Medicaid claims data may be in part explained by implementation miscues. Of the 4,343 StationMD enrollees, only 398 had actually used even only once the StationMD service. A surprising 91% of all StationMD enrollees never accessed, not even once with StationMD. In some instances this may have been because there had been no medical reason to access the telehealth service; however, a number of family members and DSPs reported either (1) they did not know that they/the person they support were enrolled in StationMD and that this telehealth service was available to them or (2) they knew they were enrolled but had not been trained and/or did not know how to access the service. One remedy might include a more robust and coordinated communication and engagement plan for StationMD enrollees where they are periodically reminded of the availability of the service along with easy-to-use (e.g., clear language, video demonstrations) resources are pushed out to the individuals with ID/DD, their family members, and the staff who provide their supports.

The analyses of the Medicaid claims data may require more in-depth analyses and consideration. For example, since at least 19% of the StationMD engaged users resided in

an ICF-type facility, billing of health care procedures (e.g., visit with doctor or nurse) may be handled differently than for individuals living on their own or with a family member in the community.

These results also differ from similar data collected by StationMD regarding use of their platform/service. Some of these discrepancies may be explained by the StationMD enrollee. A number of StationMD enrollees were already enrolled and using StationMD prior to the start of the Ohio StationMD pilot program and were included in the number of StationMD enrollees for these analyzes during the same time periods described.

One limitation of the time 1 and time 2 analyses is that StationMD enrollees were enrolled into StationMD services on different dates during that time period (e.g., July 15th versus December 15th). Therefore, Medicaid claims data interpretations may be impacted because some StationMD enrollees accessed the service over a period of several months while others' access was for a much shorter time period during time 2.

Further analyses may be warranted to gain more insights into the measurable outcomes of the Ohio StationMD pilot program. Additional analyses might focus on a subset of the StationMD engaged users and examining more individual case illustrations of usage of StationMD and their resulting changes in Medicaid claims data and health care utilization. Of particular interest here might be to examine some specific cases of individuals living in the community on a HCBS waiver but whose level of care may be higher because they may need more intense health, and behavioral health supports than the mean or median waiver participants.

Lastly, more data and more refined analyses of outcomes across a clearer period of time following the date of the first call made to StationMD (i.e., focusing on StationMD engaged users) and capturing outcome data 6 months following the actual 1st call made to StationMD versus a date of enrollment. This slight change might provide a more refined data capture on the outcomes at an individual level, albeit analyzed in the aggregate. It should be noted that among the StationMD engaged users, almost a third of them (25%) made 6 or more calls to StationMD, indicating a high need for healthcare services. This subgroup may be worth examining more closely in terms of benefits and impact. Perhaps identifying profiles of users who may benefit most from a service like StationMD might be a cost-effective way of implementing such a service.

Finally, we close with the net promoter score, a common metric of consumer satisfaction with a service. Of the 122 family members and DSPs who were StationMD engaged users, and who provided a rating between 0 and 10, to the question “Would you recommend StationMD?”, a large majority were highly satisfied; including 79% (96) of all respondents, 84% of DSPs, 65% of family members who indicated a rating of 9 or 10 (promoter) when asked if they would recommend StationMD.

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APPENDIX A:

Top 50 Medical Diagnoses – StationMD Calls

Top 50 Diagnoses – StationMD Calls

First ICD-10 Name	Outcome		
	Observation	Transfer	Grand Total
Acute upper respiratory infection, unspecified	62	1	63
Cough, unspecified	52	1	53
Urinary tract infection, site not specified	38		38
Unspecified conjunctivitis	37		37
Disorder of the skin and subcutaneous tissue, unspecified	30		30
Rash and other nonspecific skin eruption	30		30
Unspecified abdominal pain	16	8	24
Vomiting, unspecified	19	4	23
Unspecified intellectual disabilities	23		23
Cellulitis, unspecified	21	1	22
Unspecified injury of head, initial encounter	14	6	20
Other injury of unspecified body region, initial encounter	18	1	19
Nausea	15	4	19
Fever, unspecified	13	5	18
Edema, unspecified	13	3	16
COVID-19	15		15
Other fatigue	13	1	14
Headache, unspecified	9	4	13
Nasal congestion	13		13
Other seizures	11	1	12
Acute cough	11		11
Essential (primary) hypertension	11		11
Pain in unspecified limb	8	1	9
Hypoxemia		8	8
Type 2 diabetes mellitus without complications	8		8
Dorsalgia, unspecified	5	2	7
Otalgia, unspecified ear	7		7
Other constipation	7		7
Localized swelling, mass, and lump, left lower limb	5	1	6
Dizziness and giddiness	4	2	6
Unspecified disorder of eye and adnexa	4	2	6
Chest pain, unspecified		6	6
Constipation, unspecified	6		6
Diarrhea, unspecified	6		6
Other specified dermatitis	6		6
Other specified noninfective gastroenteritis and colitis	6		6

Poisoning by unspecified drugs, medicaments, and biological substances, accidental (unintentional), initial encounter	6		6
Other hypotension	2	3	5
Gastrointestinal hemorrhage, unspecified	1	4	5
Acute gastritis without bleeding	5		5
Acute vaginitis	5		5
Bronchitis, not specified as acute or chronic	5		5
Elevated blood-pressure reading, without diagnosis of hypertension	5		5
Hematuria, unspecified	5		5
Other conjunctivitis	5		5
Viral intestinal infection, unspecified	5		5
Conjunctival hemorrhage, right eye	4		4
Contusion of left hand, initial encounter	4		4
Cutaneous abscess, unspecified	4		4
Acute sinusitis, unspecified	3		3

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APPENDIX B:

StationMD Enrollees by County

StationMD Enrollees by County

Reporting County	TOTAL ENROLLED
Belmont	0
Carroll	0
Fayette	0
Geauga	0
Hardin	0
Harrison	0
Highland	0
Monroe	0
Perry	0
Putnam	0
Scioto	0
Vinton	0
Wayne	0
Adams	1
Columbiana	1
Meigs	1
Miami	2
Defiance	3
Morgan	3
Noble	3
Union	4
Crawford	6
Pike	7
Wyandot	7
Pickaway	8
Henry	9
Lawrence	9
Auglaize	10
Clinton	10
Darke	11
Brown	12
Clark	12
Ottawa	12
Paulding	12
Shelby	12
Williams	14
Ashland	16
Logan	16

Preble	16
Ashtabula	17
Morrow	17
Erie	18
Madison	18
Fulton	19
Licking	19
Gallia	20
Huron	20
Hocking	23
Holmes	23
Richland	24
Delaware	26
Jackson	28
Van Wert	29
Mercer	31
Lake	32
Washington	32
Sandusky	35
Muskingum	37
Fairfield	38
Champaign	40
Ross	40
Warren	41
Trumbull	42
Jefferson	43
Hancock	45
Marion	49
Coshocton	57
Guernsey	67
Allen	68
Athens	73
Mahoning	74
Greene	79
Medina	81
Tuscarawas	81
Clermont	87
Butler	89
Lorain	120
Stark	129
Wood	168
Knox	184
Hamilton	226

Portage	226
Lucas	229
Seneca	232
Montgomery	252
Summit	258
Franklin	556
Cuyahoga	870
Grand total	5,229

APPENDIX C:

StationMD Surveys

StationMD Surveys

Landing Page

Your time and input are very valuable to us. The Ohio State University Nisonger Center in partnership with the Ohio Department of Developmental Disabilities is seeking your input about StationMD. We are interested in your input whether you have used StationMD or not.

Information gathered through this survey, along with other information gathered from in-person group discussions will help evaluate the benefits of the StationMD services. If you have a disability or provide care for a person with a disability, please respond to the survey questions that follow. If you provide care for a person with a disability, you can assist that person in completing this survey (for example reading the questions aloud) and recording their responses. Keep in mind, you may also provide your own separate responses regarding your experiences and opinions about the StationMD services.

1. This online survey will take on average 10 minutes to complete.
2. Your participation is entirely voluntary.
3. Your responses and feedback will be confidential.
4. Although your responses will be summarized with others in a report, no identifying information, or any responses specific to you or any other person with a disability for whom you provide care will appear in the report.
5. You must be 18 years or older to participate in this survey.

StationMD Surveys

1. Are you answering the StationMD Online Survey as:

- ☐ Person with a disability/developmental disability who uses StationMD or is enrolled in StationMD
- ☐ Family member/caregiver of a person with a disability/developmental disability who uses StationMD or is enrolled in StationMD
- ☐ Direct support professional who works with a person(s) with a disability/developmental disability who uses StationMD or is enrolled in StationMD
- ☐ Staff from Intermediate Care Facility (ICF) or Developmental Center (DC) who works with a person(s) with a disability/developmental disability who uses StationMD or is enrolled in StationMD

2. Are you enrolled in StationMD?

- ☐ Yes
- ☐ No

3. Have you or the person you support used StationMD at least once?

- ☐ Yes
- ☐ No

4. Why have you not used StationMD? (Check all that apply)

- ☐ Technology problems
- ☐ Never trained on how to use StationMD
- ☐ Haven't had a medical need to use
- ☐ I didn't know I was signed up to use StationMD
- ☐ Prefer not to say
- ☐ Other (specify)

5. How many times have you used StationMD?

- ☐ 3-4 times
- ☐ 4-5 times
- ☐ 6 or more
- ☐ I don't know

6. How long have you been using StationMD?

- ☐ ____ Years
- ☐ ____ Months

StationMD Survey

Person with Lived ID/DD Experience

1. Were you happy with your StationMD visits?

- ☐ Yes
- ☐ No
- ☐ Sometimes

1a. Please explain your answer to the question above.

2. Did the StationMD doctor understand what you were telling them?

- ☐ Yes
- ☐ No
- ☐ I don't know

2a. Please explain your answer to the question above.

3. Did the StationMD doctor explain things to you in a way that you could understand?

- ☐ Yes
- ☐ No
- ☐ Sometimes

3a. Please explain your answer to the question above.

4. Did the StationMD doctor help you?

- ☐ Yes
- ☐ No
- ☐ Sometimes

4a. Please explain your answer to the question above.

5. Did you understand what to do after talking with a StationMD doctor?

- ☐ Yes
- ☐ No
- ☐ Sometimes

5a. Please explain your answer to the question above.

6. Was it easy to connect with a StationMD doctor?

- ☐ Yes
- ☐ No
- ☐ I don't know

6a. Please explain your answer to the question above.

7. Do you prefer to stay home to talk with a StationMD doctor instead of going to your doctor's office or emergency room?

- ☐ Yes
- ☐ No
- ☐ Sometimes

7a. Please explain your answer to the question above.

8. Did someone help you complete this survey?

- ☐ Yes
- ☐ No

8a. Who helped you complete this survey?

- ☐ Parent / Family member / Guardian
- ☐ Staff
- ☐ SSA
- ☐ Other (please specify)

9. What else would you like to tell us about your StationMD visit?

10. How likely are you to recommend StationMD (0 = Not likely, 10 = Extremely likely)

- ☐ 1 - 10

StationMD Survey

Family member/Caregiver

1. Do you feel the consultation with StationMD services improved the overall health outcomes of the person with developmental disabilities who is using these services?

- ☐ Yes
- ☐ No
- ☐ I don't know

1a. Please explain your answer to the question above.

2. How easy/difficult was it to connect and speak with a StationMD doctor?

- ☐ Very easy
- ☐ Easy
- ☐ OK
- ☐ Difficult
- ☐ Very difficult

2a. Please explain your answer to the question above.

3. On average, how many minutes in total was spent before you got to speak to the StationMD doctor?

- ☐ ____ Minutes

4. Did StationMD doctors demonstrate an understanding of the unique needs and experiences of people with developmental disabilities?

- ☐ Yes
- ☐ No
- ☐ I don't know

4a. Please explain your answer to the question above.

5. Does StationMD make your daily life as a family member/caregiver less stressful?

- ☐ Yes
- ☐ No
- ☐ I don't know

5a. Please explain your answer to the question above.

6. Does access to StationMD services improve your confidence in the access to health care services being provided to your loved one?

- ☐ Yes
- ☐ No
- ☐ I don't know

6a. Please explain your answer to the question above.

7. Do StationMD services help answer health care needs for your loved one?

- ☐ Yes
- ☐ No
- ☐ I don't know

7a. Please explain your answer to the question above.

8. Do StationMD doctors use effective communication strategies with persons with disabilities/developmental disabilities?

- ☐ Yes
- ☐ No
- ☐ Sometimes
- ☐ I don't know

8a. Please explain your answer to the question above.

9. Does access to StationMD give you more time to help/care for your loved one?

- ☐ Yes
- ☐ No
- ☐ I don't know

9a. Please explain your answer to the question above.

10. Do StationMD services improve the overall quality of life of your loved one?

- ☐ Yes
- ☐ No
- ☐ I don't know

10a. Please explain your answer to the question above.

11. Were you able to understand the treatment or advice provided by StationMD doctors?

- ☐ Yes
- ☐ No
- ☐ I don't know

11a. Please explain your answers to the question above.

12. What else would you like to tell us about your StationMD visit?

- ☐ _____

13. How likely are you to recommend StationMD (0 = Not likely, 10 = Extremely likely)

- ☐ 1 - 10

StationMD Survey

Direct Support Professional (DSP)

1. Do you feel the consultation with StationMD services improved the overall health outcomes of the person using these services?

- ☐ Yes
- ☐ No
- ☐ I don't know

1a. Please explain your answer to the question above.

2. How easy/difficult was it to connect and speak with a StationMD doctor?

- ☐ Very easy
- ☐ Easy
- ☐ OK
- ☐ Difficult
- ☐ Very difficult

2a. Please explain your answer to the question above.

3. On average, how many minutes in total was spent before you got to speak to the StationMD doctor?

- ☐ ____ Minutes

4. Did StationMD doctors demonstrate an understanding of the unique needs and experiences of people with developmental disabilities?

- ☐ Yes
- ☐ No
- ☐ I don't know

4a. Please explain your answer to the question above.

5. Does StationMD make your job less stressful?

- ☐ Yes
- ☐ No
- ☐ I don't know

5a. Please explain your answer to the question above.

6. Does access to StationMD services improve your confidence/ability to provide quality care?

- ☐ Yes
- ☐ No
- ☐ I don't know

6a. Please explain your answer to the question above.

7. Does having access to StationMD improve your job satisfaction?

- ☐ Yes
- ☐ No
- ☐ I don't know

7a. Please explain your answer to the question above.

8. Do StationMD services help you meet the healthcare needs of the person(s) you support?

- ☐ Yes
- ☐ No
- ☐ I don't know

8a. Please explain your answer to the question above.

9. Do StationMD doctors use effective communication strategies with persons with disabilities/developmental disabilities?

- ☐ Yes
- ☐ No
- ☐ Sometimes
- ☐ I don't know

9a. Please explain your answer to the question above.

10. Do StationMD services improve the overall quality of life of your clients?

- ☐ Yes
- ☐ No
- ☐ I don't know

10a. Please explain your answer to the question above.

11. Were you able to understand the treatment or advice provided by StationMD doctors?

- ☐ Yes
- ☐ No
- ☐ I don't know

11a. Please explain your answers to the question above.

12. What else would you like to tell us about your StationMD visit?

- ☐ _____

13. How likely are you to recommend StationMD (0 = Not likely, 10 = Extremely likely)

- ☐ 1 - 10

StationMD Survey

Intermediate Care Facility (ICF) Staff Members

1. Do you feel the consultation with StationMD services improved the overall health outcomes of the person using these services?

- ☐ Yes
- ☐ No
- ☐ I don't know

1a. Please explain your answer to the question above.

2. How easy/difficult was it to connect and speak with a StationMD doctor?

- ☐ Very easy
- ☐ Easy
- ☐ OK
- ☐ Difficult
- ☐ Very difficult

2a. Please explain your answer to the question above.

3. On average, how many minutes in total was spent before you got to speak to the StationMD doctor?

- ☐ ____ Minutes

4. Did StationMD doctors demonstrate an understanding of the unique needs and experiences of people with developmental disabilities?

- ☐ Yes
- ☐ No
- ☐ I don't know

4a. Please explain your answer to the question above.

5. Does StationMD make your job less stressful?

- ☐ Yes
- ☐ No
- ☐ I don't know

5a. Please explain your answer to the question above.

6. Does access to StationMD services improve your confidence/ability to provide quality care?

- ☐ Yes
- ☐ No
- ☐ I don't know

6a. Please explain your answer to the question above.

7. Does having access to StationMD improve your job satisfaction?

- ☐ Yes
- ☐ No
- ☐ I don't know

7a. Please explain your answer to the question above.

8. Do StationMD services help you meet the healthcare needs of the person(s) you support?

- ☐ Yes
- ☐ No
- ☐ I don't know

8a. Please explain your answer to the question above.

9. Do StationMD doctors use effective communication strategies with persons with disabilities/developmental disabilities?

- ☐ Yes
- ☐ No
- ☐ Sometimes
- ☐ I don't know

9a. Please explain your answer to the question above.

10. Do StationMD services improve the overall quality of life of your clients?

- ☐ Yes
- ☐ No
- ☐ I don't know

10a. Please explain your answer to the question above.

11. Were you able to understand the treatment or advice provided by StationMD doctors?

- ☐ Yes
- ☐ No
- ☐ I don't know

11a. Please explain your answers to the question above.

12. What else would you like to tell us about your StationMD visit?

- ☐ _____

13. How likely are you to recommend StationMD (0 = Not likely, 10 = Extremely likely)

- ☐ 1 - 10

APPENDIX D:

StationMD Focus Group Questions

Focus Group Questions

Director Support Professionals/Managers/Supervisors

1. Please tell us your first name, your job title, and what agency you work for.
2. Tell us for approximately how long you have been working with/using StationMD services.
3. Did you receive any formal training, and when, to use the StationMD services? Who else was trained at your agency?
4. Have you ever been present when StationMD has been used by a person with developmental disabilities – with your help or the help of another staff member?
 - If yes:
 - How many times?
 - Describe your experience of the StationMD services:
 - Has there been a staff member who has been informally identified within your agency as the StationMD liaison for clients?
 - Why the consultation with StationMD was initiated/what was the medical concern?
 - Did the individual go to the emergency room following the StationMD consultation?
 - If yes, did the individual need to be hospitalized as a result of going to the emergency room?
 - Did the StationMD doctor recommend that the individual make an appointment to see his regular primary care doctor?
5. What are the benefits to using the StationMD services for the person with developmental disabilities?
6. What are the benefits to using the StationMD services for the staff or agency supporting the individual with developmental disabilities?
7. Are there any disadvantages/down-sides to having StationMD service?
8. Had it even been necessary for you to take a client to the hospital or emergency room/urgent care clinic before StationMD was available?
 - If yes:
 - What for?
 - How long were you there for?
 - What was that experience like?
 - Rate your anxiety level 1-10 when dealing with the situation.
 - Rate the client's anxiety level when visiting the ER
 - Were you prepared for the medical questions asked in the ER (ex. have an emergency file with medications and medical history)?
 - How did the doctors and hospital staff interact with the individual?

- If not: Has anyone at work had an urgent health need that you've needed to respond to at work?
 - If so, what was that like?
- 9. How often do you think someone served by your agency needs to see a doctor for an urgent/emergency a routine health concern/need?
 - How does that affect the staff/staffing when a staff member needs to accompany the person to that appointment?
- 10. How has having StationMD affected your work responsibilities or staffing needs?
- 11. How likely are you to recommend StationMD?

0..... 1..... 2..... 3..... 4..... 5..... 6..... 7..... 8..... 9..... 10

not likely

extremely likely

And why?

- 12. Any other last comments about your experience with StationMD services?

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APPENDIX E:

StationMD Focus Group: Demographic Questions

StationMD Focus Group

DEMOGRAPHIC QUESTIONS

Have this available on iPad/Qualtrics survey to be completed by all **Focus Group Participants** BEFORE the start of focus group Meeting.

- A. Are you a? [check ONE]
- a. Person with a developmental disability
 - b. Parent/Grandparent
 - c. Sibling
 - d. Direct support professional (DSP)
 - e. Supervisor/Manager
 - f. Provider agency administrative staff
 - g. Nurse/RN
 - h. Service and Support Administrator (SSA)
 - i. Other, please specify: [text box]
- B. How would you describe your gender? [check one]
- a. Man
 - b. Woman
 - c. Prefer not to say
 - d. Other, please specify: [text box]
- C. Are you Hispanic, Latino, or of Spanish origin? [check one]
- a. Yes
 - b. No
 - c. Prefer not to say
- D. How would you describe yourself? [check all that apply]
- a. American Indian or Alaska Native
 - b. Asian Indian
 - c. Other Asian
 - d. Black or African American
 - e. Native Hawaiian or Other Pacific Islander
 - f. White
 - g. Prefer not to say
 - h. Other, please specify: [text box]
- E. Do you consider yourself to have a disability?
- a. Yes
Please specify: [text box]
 - b. No

- c. Prefer not to say
- F. How long have you been using StationMD?
[text box] Years [text box] Months
- G. Approximately how often have you used/accessed StationMD?
[text box]
- H. Type of setting which StationMD was used: [check one]
 - a. Parent/family home
 - b. Own home/apartment
 - c. Group Home
Please specify the number of people living in your group home: [text box]
 - d. Intermediate Care Facility (ICF)
 - e. Nursing facility
 - f. Developmental center
 - g. Other, please specify: [text box]
- I. In what county have you been using StationMD? [drop down menu of 88 Ohio Counties]