

Insurance Type Is the Top Predictor of Telehealth Use as Adoption Levels Off Long-Term

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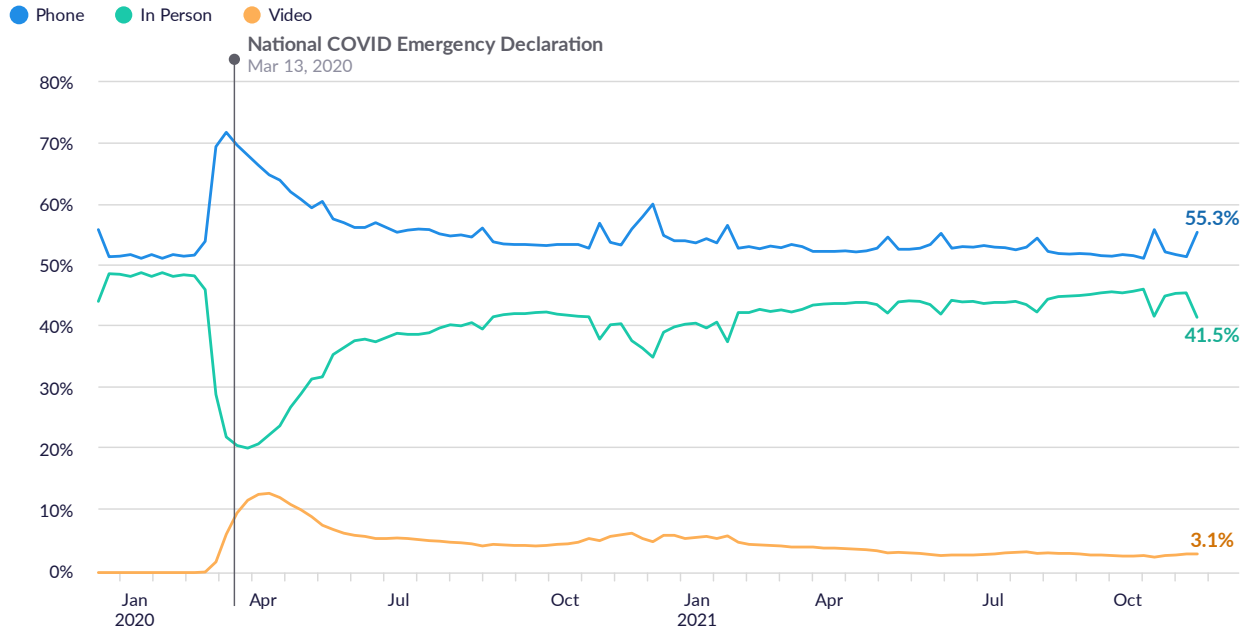
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Key Findings:

- Rates of outpatient telehealth use in urban and rural areas vary only slightly despite documented barriers like broadband access and a higher proportion of elderly residents in rural areas.
- Telehealth use is greatest in the Medicaid population compared to private insurance or Medicare. However, telehealth use remains higher than pre-pandemic for all insurers, suggesting continued insurance coverage for telehealth services is important for ongoing healthcare access.
- Efforts to support equitable access to telehealth may need to account for more than technology access and seek to address other barriers, such as insurance coverage for care delivered via telehealth.

While telehealth has been a key tool in the ability to continue to provide healthcare throughout the COVID-19 pandemic, many groups have raised concern about equitable access and use of telehealth services across urban and rural areas.¹ Early in the pandemic, telephone and video visits peaked at 72% and 13% of outpatient visits, respectively. As office visits returned to a greater proportion of all outpatient visits starting in late 2020, telephone and video visits leveled off, but video visits still accounted for 3% of total weekly outpatient encounters, 30 times greater than the pre-pandemic rate of 0.1%.

Weekly Outpatient Visit Volumes by Encounter Type

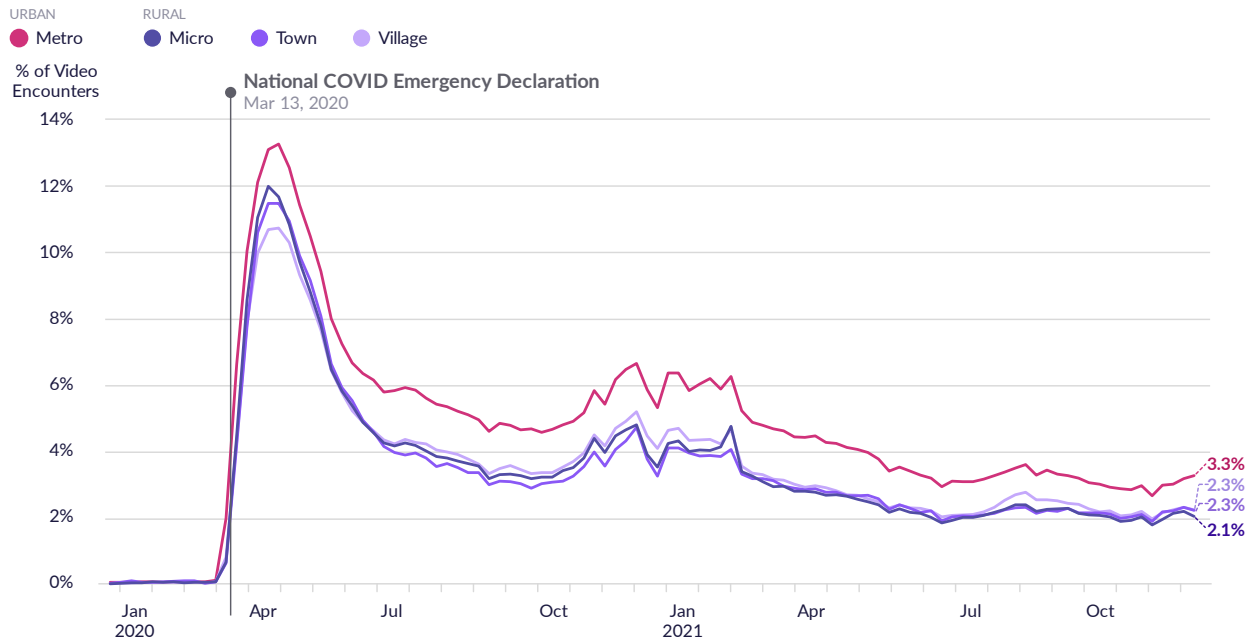


"Telehealth Volumes by Encounter Type," 2022. EpicResearch.org

Figure 1. Percentage of outpatient non-procedural visits each week by encounter type. In late 2021, video (telehealth) visits accounted for 3.1% of weekly visits.

We sought to better understand where patients receiving telehealth visits live to assess whether their location is associated with greater telehealth use. Rural areas often have limited broadband access and their populations often trend toward older ages, both of which can make engaging through telehealth more challenging.^{2,3} Telehealth accounts for 2.1-2.3% of visits in rural areas compared to 3.3% in urban areas. Because the rates follow similar trends over time, it may be that other factors beyond broadband access and patient age, such as insurance coverage and availability of services in the patient's primary language, are contributing to the lower rates of telehealth adoption.

Telehealth Video Encounters by Rurality



"Telehealth Encounters by Rurality," 2022. EpicResearch.org

Figure 2. Percentage of outpatient non-procedural visits each week conducted via video. Red represents urban areas, while the shades of purple represent the areas categorized as rural.

Insurance coverage for telehealth is a key factor in equitable access to care. Throughout the pandemic, insurers—including Medicare, Medicaid, and private plans—expanded coverage and reduced limitations on telehealth services.³ When comparing telehealth use by financial class, we found that those with Medicaid use telehealth more often (4.7% of visits) than those with private insurance (3.3%) or Medicare (1.9%). However, all groups had sustained telehealth use at greater rates than pre-pandemic. This highlights the benefits of expanded coverage and access options and the need to continue to support those policies and coverage beyond the pandemic period.

Telehealth Encounters by Insurance Type

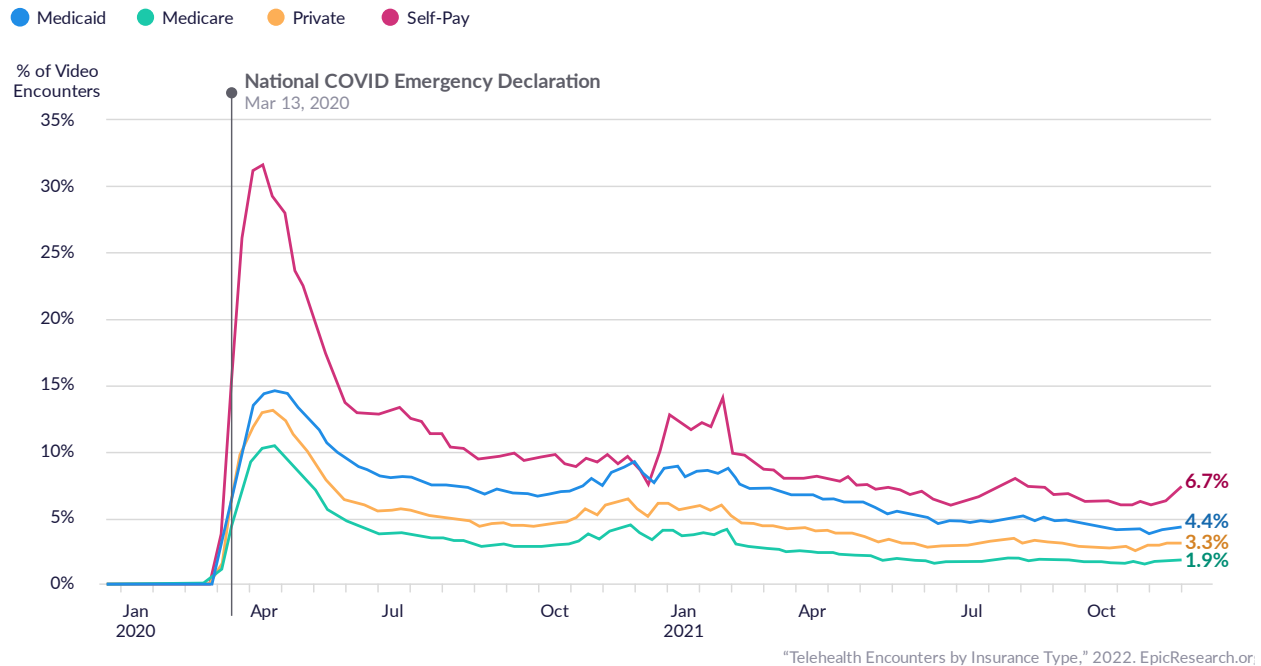


Figure 3. Percentage of encounters conducted by video by insurance type from January 2020 to December 2021.

These data come from Cosmos, a HIPAA-defined Limited Data Set of more than 138 million patients from 161 Epic organizations, including 960 hospitals and more than 20,000 clinics, serving patients in all 50 states. This study was completed by two teams, each comprised of a clinician and research scientists who worked independently. The two teams came to similar conclusions. This study was completed in collaboration with USDA Rural Development Innovation Center. The findings and conclusions in this brief are those of the author(s) and should not be construed to represent any official USDA or U.S. Government determination or policy.

References

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Data Definitions

Term	Definition
Outpatient non-procedural visit	An encounter that is not a hospital admission or an ED visit and is one of the following: Office Visit, Telephone, Refill, Telemedicine, Clinical Support, Treatment, Home Care Visit, Appointment, Nurse Triage, Nurse Only
Telephone visit	An encounter of type Telephone, Refill, or Nurse Triage
Video visit	An encounter of type Telemedicine
Metropolitan (Metro)	ZIP Codes that have an urban population over 50,000
Micropolitan (Micro)	ZIP Codes that are rural and have an urban center population of 10,000 to 49,999
Small towns	ZIP Codes that are rural and have an urban center population of 2,500 to 9,999
Villages and open country (Village)	ZIP Codes that are rural and have an urban center population less than 2,499
Financial Class	Primary coverage listed on the encounter; categorized as Medicaid, Medicare, Private, Self-Pay, or Other