

Minnesota Study of Telehealth Expansion and Payment Parity: Preliminary Report Findings

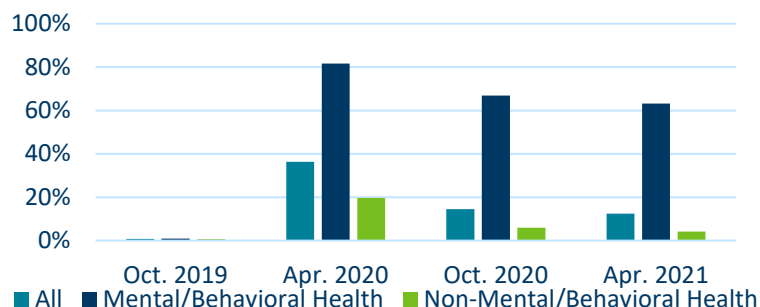
COVID-19 Transformed Telehealth’s Role in our Health Care System

Since the onset of the COVID-19 pandemic, telehealth has dramatically changed health care for people and providers across Minnesota and the country. One of the most common applications of telehealth delivers health care through real-time, two-way interactive communications, such as video or telephone calls.

The MDH telehealth study is focused on the private health insurance segment of the health care system. Some of the key findings from the study are:

- ***The use of telehealth has surged.*** Telehealth use increased rapidly during the pandemic, from less than 1% of all health care services in 2019, to nearly 40% in April 2020, and settling at 13% in April 2021.
- ***The types of care provided via telehealth have changed.*** Pre-pandemic, telehealth was used mostly for acute, non-emergency needs, such as urinary tract infections or sinusitis. Now, providers are also using telehealth to track and treat chronic conditions and provide access to specialty care. More uses are continuing to emerge.
- ***Telehealth facilitates access to mental health care services.*** Use of telehealth to deliver mental and behavioral health care services has been especially high since April 2020. By mid-2021 more than 60% of mental health care was delivered via telehealth.

Telehealth Claims as a Percentage of All Health Care Claims for Minnesotans with Commercial Insurance, January 2019 - June 2021



Source: Minnesota All Payer Claims Database (MN APCD): Jan. 1, 2019 – June 30, 2021

Telehealth's Dynamic Impact on Access, Satisfaction, Quality, and Equity

Early findings point to many positive aspects of telehealth, but more research is needed to better understand the populations, types of services, and circumstances for which it is most beneficial. Additionally, more research is needed to understand whether reimbursement for telehealth should align with in-person care and the impact of telehealth on the overall cost of health care.

- **Greater access:** MDH's preliminary research shows telehealth can improve health care access for many Minnesotans — especially those with limited access to transportation, childcare or broadband, people with on-site jobs, and those who live in Greater Minnesota.
- **Most patients satisfied:** Overall, about 80% of Minnesotans surveyed were satisfied with the telehealth services they received, regardless of whether it was a video or audio visit. Satisfaction was somewhat lower for Minnesotans who identify as Black, Indigenous, and People of Color (BIPOC).
- **Questions remain on quality:** Measuring quality is complex, but early results suggest telehealth can be effective in providing some primary and specialty care services, and for hospital-based telehealth programs. Telehealth is showing promise in enabling providers to find innovative ways to deliver care beyond brick-and-mortar clinic settings, but more research is needed to better understand the types of care telehealth is best suited for.
- **Effects on equity remain unclear:** Lived experiences — such as homelessness, limited English skills, and limited access to broadband — can limit access to telehealth. On the other hand, telehealth may be able to provide access to more equitable care experiences, including access to health care providers with shared racial or cultural identities, that may not be available to patients through their local, in-person provider network.



Audio-only Telehealth Serves a Small – but Crucial – Segment

Audio-only telehealth refers to visits by telephone (with no video component) and has only been available in Minnesota as a reimbursable service since 2020. As this study continues amidst increasing research and evolving practice, MDH makes the following recommendations:

- **Recommendation 1:** To continue to include audio-only telehealth as a type of telehealth service in statute.
- **Recommendation 2:** To extend payment parity for audio-only telehealth beyond the current June 30, 2023, sunset until more complete evidence becomes available.

For more information, including a link to the preliminary legislative report, please visit www.health.state.mn.us/health/economics email health.telehealthstudy@state.mn.us or call 651-201-4520.