

Telehealth More Common Among Urban and Established Patients

Published August 6, 2020

Chartis and Kythera Labs are continuing to monitor telehealth adoption and utilization across the US and post our weekly Telehealth Adoption Tracker to enable drill-down analysis of specific markets. We recently refreshed our data through the week of July 20th and examined the emerging and abating trends. Here are a few highlights reflecting the latest data-driven findings.



National telehealth utilization has stabilized.

Telehealth made up 18 percent of all physician visits during the week beginning July 20. This is the sixth straight week that telehealth utilization has remained between 18 and 20 percent of all visits — well down from a peak of 50 percent in mid-April — indicating that this range may represent a "new normal" during the COVID-19 period and under the current telehealth regulatory and reimbursement rules.



Meanwhile, telehealth adoption rates within COVID-19 "hot-spot" states rose.

Countering the national trend, telehealth rates increased in many states that experienced the biggest spikes in COVID-19 cases from mid-June through mid-July. Florida (21 percent telehealth adoption rate), Texas (23 percent) and Arizona (21 percent) saw telehealth utilization rates increase by 4 to 6 points since mid-June and each state now sits above the national telehealth average.



The urban and rural telehealth divide is pronounced and shows signs of widening.

Rates of telehealth use in urban areas have exceeded those in rural geographies since the beginning of the pandemic. The telehealth adoption rate for primary care visits was 28% higher in urban geographies than rural ones in the most recent week of data. While overall telehealth adoption has stabilized recently, the urban-rural telehealth divide has widened since the early weeks of the pandemic—up from an 18% differential during the peak telehealth adoption weeks in mid-April.



Telehealth has predominantly functioned as a modality to manage established patients.

New patients represent just 5 percent of overall telehealth visits, compared to 13 percent of in-person visits throughout the COVID period indicating that virtual care modalities to date have been primarily utilized as tools to manage care for established patients. Finding ways to leverage telehealth to expand access to new patients will be a key driver of telehealth's continued adoption and growth.

If you would like to learn more about work by The Chartis Group and Kythera Labs regarding telehealth and demand recovery across the healthcare ecosystem, please <u>contact us</u>.

Underlying data provided by Kythera Labs are sourced from clearinghouse claims vendors which comprise a national representation of submitted professional medical claims. These claims include self-insured and fully insured health plans across most major commercial payors and Medicare Advantage. The level of claims coverage varies by geography. Geographic and specialty utilization patterns may change over time based upon timing and mix of claims reporting by clearinghouse. Data is refreshed on a weekly basis, which includes data for the subsequent week, in addition to newly submitted claims from prior weeks.

Effective July 2020: Modified methodology has been implemented for geographic analysis, now defined based upon patient location.

Data excludes providers billing from US territories: Puerto Rico, Guam and the Virgin Islands. Telehealth adoption rates for multi-state CBSAs will aggregate into the respective telehealth adoption rate calculation, identified and assigned by the respective provider state. Physician specialties are determined based upon the specialty assigned to the rendering provider NPI. Certain physician specialties are combined or excluded to form the 20 specialties reported in the analysis. APP-defined practitioners have been excluded from this analysis. Percentage telehealth rate is calculated as the ratio of unique telehealth visits as a proportion of total physician visits.

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