Impact of COVID-19 on Telehealth vs. In-Person Utilization
Colorado All Payer Claims Database

Overview and Methodology, September 2021

The Telehealth vs. In-Person Analysis available at civhc.org provides important information regarding the utilization of high-volume telehealth-eligible services and payments made for telehealth-eligible services in Colorado. The analysis includes [all public and private health insurance payers submitting data](https://www.civhc.org/get-data/whats-in-the-co-apcd/) to the Colorado All Payer Claims Database (CO APCD), representing the majority of covered lives in the state (not including most self-insured employer covered lives and federal programs such as Tricare, Indian Health Services and the VA).

The intent of this analysis is to provide information about the impact of the COVID-19 pandemic and the subsequent increase in telehealth adoption on overall utilization of high-volume, telehealth-eligible services. Data in this analysis will be updated regularly to understand how telehealth use and overall utilization trends continue to evolve across the state.

This analysis helps answer several key questions about telehealth-eligible services pre- and post-onset of COVID-19:

* What percentage of services were delivered via telehealth or in-person?
* How has telehealth use changed as a result of the pandemic?
* How has telehealth use changed as a result of COVID-19 vaccines becoming readily available?
* How does utilization in 2020 compare to the utilization rates in 2019?

More detailed information on use of telehealth services by region, diagnosis, patient demographics, and provider type are available in the interactive [Telehealth Services Analysis](https://www.civhc.org/covid-19/telehealth-services-analysis/) at civhc.org.

**Tableau Interactive Reports**

The Telehealth vs. In Person Analysis is available at [www.civhc.org](http://www.civhc.org) in two interactive Tableau displays:

**In-Person vs. Telehealth Visits, 2020** – Provides trend information of utilization, spending, and the proportion of services delivered via telehealth for selected procedures in 2020. Users are able to evaluate in-person and telehealth utilization trends individually as well as the overall trend across both delivery methods. Data is available by payer type, procedure category, and provider type.

**2019 vs. 2020 Comparison** – Provides trend information and comparisons of overall utilization in 2019 and 2020. Filters are available to select the procedure category, payer type, and provider type.

**Definition of Telehealth Services and Inclusions**

This analysis tracks telehealth based largely on Governor Jared Polis’ expanded definition in Colorado statute C.R.S. § 10-16-123(4)(e)(I)).

**Telehealth Definition:** Telehealth is a mode of delivery of health care services through telecommunications systems, including information, electronic, and communication technologies, to facilitate the assessment, diagnosis, consultation, treatment, education, care management, or self-management of a covered person’s health care while the covered person is located at an originating site and the provider is located at a distant site.

**In this analysis, Telehealth Includes:**

* Synchronous interactions (both parties are present and interacting at the same time),
* Services provided through HIPAA-compliant interactive audio-visual communication or the use of a HIPAA compliant application via a cellular telephone, and
* Voice-only telephone communication (recently added with expansion of definition due to the COVID-19 pandemic.

**Telehealth does NOT include services delivered by:**

* Facsimile machine,
* E-mail, or
* Text messages.

**Method used to Identify Telehealth-Eligible Claims**

Telehealth-eligible services were identified in the CO ACPD by locating CPT-4 and HCPCS procedure codes for services that can be provided in-person or via telecommunications.

The service was then classified as telehealth if the place of service or a modifier 95 (synchronous telemedicine via real-time interactive audio and video telecommunication systems) or GT (interactive audio and video telecommunication systems) was used to specify it as a telehealth service. The 95 modifier is mostly used by private payers and GT by Medicare and Medicaid. **Both in-person and telehealth services are included in this report.**

This report **is limited to services that can be provided via telehealth and have significant claim volume; it does not include all telehealth-eligible services.** The following is a list of the CPT-4 and HCPCS procedure codes used to define each procedure category included in the report.

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| **Procedure Categories** |
| Office or Other Outpatient E&M Visits – New Patient | 99201 - 99205 |
| Office or Other Outpatient E&M Visits – Established Patient | 99211 - 99215 |
| Psychiatry Services and Procedures | 90785 - 90899, G0177, G0410, G0444, G8510 |
| Health and Behavior Assessment/Intervention Procedures | 96150 - 96171, 96127, G0445, H0032, H0004 |
| Physical Medicine and Rehabilitation | 97100 - 97799, G8978-80 |

**Method Used to Define Utilization and Spending**

Once telehealth-eligible claims were identified, spending and utilization associated with those claims were defined as follows:

**Spending**: Total allowed amount (health plan and patient responsibility) from all claim lines. This measure is displayed as a per member per month (PMPM) dollar amount.

**Utilization**: A service is defined as a unique combination of claim service line (whether facility or professional-based), member and service date. This measure is displayed as a rate of number of services per 1,000 average members.

**Method Used to Define Provider Type**

Service providers are classified to their National Plan & Provider Enumeration System (NPPES) taxonomy. The primary care and behavioral health categories were based largely on provider taxonomies in the definition of primary care that was established for the Colorado [Primary Care Payment Reform Collaborative](https://drive.google.com/file/d/1nX2gKA9Oxod0oWEGBI009_FXKsqy-BE-/view).

For more information or additional questions, feel free to contact us at ColoradoAPCD@civhc.org.