

Telehealth is booming, but who are the power users?

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Growth in telehealth is being fueled by nonhospital-based health care providers, with urban areas outpacing rural regions although explosive expansion of services was seen in both sectors, according to a recent analysis of insurance claims data on telehealth trends.

Guidance for physicians in this area can be found in the [AMA Digital Health Implementation Playbook](#), which covers key steps, best practices and resources to accelerate the adoption and scale of digital health solutions. [Download the Playbook now.](#)

The report, “A Multilayered Analysis of Telehealth, How This Emerging Venue of Care is Affecting the Healthcare Landscape,” uses data drawn from claim lines—the separate procedures listed within a claim—and was conducted by Fair Health, a New York nonprofit that operates a vast database of commercial and Medicare claims.

So, who’s using telehealth the most? Here’s what the Fair Health report shows.

Younger people. From 2014 to 2018, patients between 31 and 40 years old were most associated with telehealth overall, accounting for 21% of all telehealth claim lines.

Women. Nearly two-thirds of all telehealth claim lines (65%) were associated with female patients. But for telehealth visits related to a hospital discharge, women had only a slight majority, with 53% of such claim lines.

This is consistent with other research finding that women are more likely than men to visit physicians and use health care services. One category where the ratio was flipped was for patients having an in-person follow-up visit within 15 days of a telehealth diagnosis for an alcohol-related disorder. For this one, males were the majority, with 57%.

People coming home from the hospital in urban areas. Claim lines for discharge-related telehealth claim lines rose more in rural than urban areas between 2014 and 2018, seeing an

increase of 407%, though that still amounts to just 0.025% of all rural medical claim lines.

Patients with acute respiratory infections or mood disorders. Acute upper respiratory infections were the No. 1 reason individuals sought treatment from nonhospital-based telehealth in 2018, accounting for 16% of all such telehealth visits. Mood disorders were the No. 2 reason patients sought such telehealth treatment, account for 6% of these kinds of claims.

Overall, the Fair Health report breaks down telehealth into these four types:

- | Nonhospital-based telehealth, which accounted for 84% of telehealth claim lines in 2018, up from 52% in 2014.
- | Discharge telehealth visits, which accounted for 13% of telehealth claim lines in 2018, compared with 35% in 2014.
- | Telehealth consultations, which accounted for 3% of telehealth claim lines in 2018, down from 13% in 2014.
- | Emergency department or inpatient telehealth visits, which accounted for fewer than 1% of telehealth claim lines in both years—despite a 16% growth in use between 2017 and 2018.

Telemental health services snapshot

Meanwhile, a snapshot of psychiatrists who provide telemental care appears in a *JAMA Psychiatry* research letter.

Studying a random sample of 20% of the Medicare telemental fee-for-service claims generated between 2014 and 2016, researchers calculated that 5.4% of the psychiatrists who provided care were responsible for more than 377,000 telemental visits.

Just over 40% of that group provided 100 or more of these visits. And psychiatrists in rural states more likely to provide such services, with 24.2% doing so in North Dakota, compared with just 0.1% of psychiatrists in Massachusetts.

An AMA-led telehealth study published in *The New England Journal of Medicine* explores policy trends and key priorities in telehealth adoption, specifically on how physicians use telehealth and the benefits to patients.