

Medicare Telemedicine Snapshot

Medicare Claims and Encounter Data: March 1, 2020 to February 28, 2021, Received by September 9, 2021

Medicare Telemedicine Data Snapshot Overview

Our Medicare Telemedicine Data Snapshot is about people with Medicare who utilized telemedicine services between March 1, 2020 and February 28, 2021. The data for the Snapshot comes from Medicare Fee-for-Service (FFS) claims data, Medicare Advantage (MA) encounter data, and Medicare enrollment information.

Telemedicine is the exchange of medical information from one site to another through electronic communication to improve a patient's health. Prior to March 2020, Medicare paid for these services under limited circumstances, with telemedicine services restricted to rural or health professional shortage areas, established patients, or certain types of providers.

In response to the COVID-19 public health emergency, telemedicine services have been expanded to increase access to care including: lifting of geographic area restrictions with services allowed to be delivered from patients' home; allowing for both new and established patients; expanding eligible services and the types of providers; and allowing for a select set of audio-only telehealth services. We observed large increases in telemedicine use with variation across geographic and demographic groups. These differences may be driven by a number of factors, including access to broadband internet, varying state-level policies on the delivery of telemedicine across state lines and the timing and degree to which the pandemic affected geographic areas differently.

For additional details on Medicare telemedicine expansions, please visit <https://telehealth.hhs.gov>.

Medicare Telemedicine Snapshot

Medicare Claims and Encounter Data: March 1, 2020 to February 28, 2021, Received by September 9, 2021

Key Terms: Types of Telemedicine

There are three main types of telemedicine services that are summarized in this snapshot: Medicare telehealth visits (including audio-only telehealth), virtual check-ins, and e-visits (See the methodology for more detailed specifications).

Telehealth Visits: Routine office visits provided via video (requires synchronous, real-time audio and/or video communication) with new or established patients. In this snapshot, we group audio-only telehealth in this service category.

Virtual Check-ins: Short patient-initiated communications with a healthcare practitioner via telephone or other telecommunications device to decide whether an office visit or other service is needed.

E-visits: Non-face-to-face patient-initiated communications with a healthcare practitioner through an online patient portal.

Key Terms: Medicare Utilization

Telemedicine Users: Number of unique Medicare beneficiaries who received at least one telemedicine service (defined as E-visit, Virtual Check-in, or telehealth, including audio-only telehealth).

Telemedicine Eligible Users: Number of unique beneficiaries who received telemedicine eligible services (via Telemedicine or non-telemedicine). We define telemedicine eligible as any E-Visit, virtual check-in, or telehealth eligible code identified from the CMS list of covered telehealth services, effective August 2021.

Percentage of Medicare Users with a Telemedicine Service: **Telemedicine Users** divided by **Telemedicine Eligible Users**

Medicare Telemedicine Snapshot

Medicare Claims and Encounter Data: March 1, 2020 to February 28, 2021, Received by September 9, 2021

Key Terms: Beneficiary Characteristics

Medicare Entitlement: Medicare entitlement is available to three basic groups of "insured individuals" - the **Aged**, the **Disabled**, and those with **end stage renal disease (ESRD)**. Medicare entitlement can change over time for beneficiaries that were initially entitled to Medicare because of disability or ESRD before the age of 65. For purposes of this reporting, beneficiaries who at any time during the snapshot time period had ESRD, were Aged with ESRD or were Disabled with ESRD are classified as ESRD; otherwise beneficiaries are classified as Disabled or Aged.

Medicaid Eligibility Status: A beneficiary can be eligible for Medicare and/or Medicaid. Beneficiaries dually enrolled in both Medicare and Medicaid at any time during the snapshot time period are considered **Dual Medicare and Medicaid** enrollees. A beneficiary enrolled in Medicare alone is **Medicare Only**. Please note that for beneficiaries enrolled in both Medicare and Medicaid, only claims and encounters covered by Medicare are included in this reporting.

Race/ Ethnicity: In the snapshot, a beneficiary's race/ethnicity is created by taking the beneficiary race code that has historically been used by the Social Security Administration (and is in turn used in CMS's enrollment database) and applying an algorithm that improves the race/ethnicity classification, particularly for those who are Hispanic or Asian/Pacific Islander. This algorithm, developed by the Research Triangle Institute (RTI) and is thus often referred to as the "RTI race code", uses Census surname lists for Hispanic and Asian/Pacific Islander origin as well as geography. The race/ethnicity classifications are: **American Indian/Alaska Native (AI/AN), White, Black/African American, Asian/Pacific Islander, Hispanic, and Other/Unknown**. For more information on the RTI race algorithm, see <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4195038/>.

Rural/ Urban: Rural/Urban status is defined using the beneficiary's mailing ZIP code and the Rural Urban Commuting Area Crosswalk (RUCA). The RUCA crosswalk relies on commuting data from the US Census, as well as ZIP Codes to define **Rural** and **Urban** locations.

For additional details on our methodology and data limitations, please see the disclaimer on the next page and view the methodology document available [here](#).

Please note that this snapshot includes a subset of the data that is available in the accompanying data file; for example, a user can analyze telemedicine trends by state, month, and race using the data file.

Medicare Telemedicine Snapshot

Medicare Claims and Encounter Data: March 1, 2020 to February 28, 2021, Received by September 9, 2021

What You Should Know When Using Our Data (Disclaimer)

You should use caution when interpreting our data. We collect Medicare claims and encounter data for payment and other program purposes, but not for public health surveillance. There will always be a delay or “claims lag” between when a service occurs and when the claim or encounter for that service is in our database. The length of the lag depends on the service type and program. There may also be longer claims lag due to the pandemic, but we’re not sure of the impact.

Historically, 90% of FFS claims across all claim types are submitted within 3 months, while 90% of MA encounters across all claim types are submitted within 12 months. We expect timely FFS claims submissions because providers submit claims directly to us for payment. A longer claims lag is expected for Medicare Advantage encounters because Medicare Advantage Organizations: (1) collect encounters before submitting them to us and (2) have more time to submit encounters because there are different programmatic uses for the data, like risk adjustment.

Percent of Medicare FFS Claims Received by Time after Date of Service

Claim Type	1 Month†	2 Months	3 Months	6 Months	9 Months	12 Months
Inpatient	43%	91%	96%	99%	99%	100%
SNF	2%	81%	94%	98%	99%	100%
Hospice	3%	81%	92%	98%	99%	100%
Home Health	22%	74%	90%	97%	99%	100%
Outpatient	37%	90%	95%	98%	99%	100%
Carrier	43%	87%	93%	98%	99%	100%
DME	57%	84%	90%	96%	98%	100%

Percent of Medicare Advantage Claims Received by Time after Date of Service

Claim Type	1 Month	2 Months	3 Months	6 Months	9 Months	12 Months
Inpatient	11%	52%	61%	80%	88%	92%
SNF	5%	46%	66%	81%	87%	92%
Home Health	11%	52%	65%	83%	89%	93%
Outpatient	17%	63%	73%	87%	92%	95%
Professional	21%	62%	73%	87%	93%	95%
DME	23%	61%	72%	86%	91%	94%

Month 1 is the service month (i.e., month for the claim through date); FFS claims analysis based on data for July 2016; MA encounter data shows the % of encounters reported to us by 30 day increments from the through date of the service for January 2018. The data in this table is meant to be descriptive, but shouldn't be used to adjust data presented in this update due to pandemic-related claims submission uncertainties.

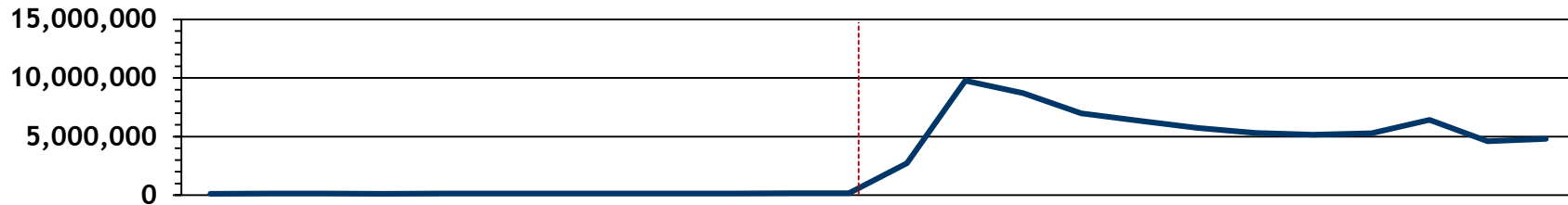
Medicare Telemedicine Snapshot

Medicare Claims and Encounter Data: March 1, 2019 to February 28, 2021, Received by September 9, 2021

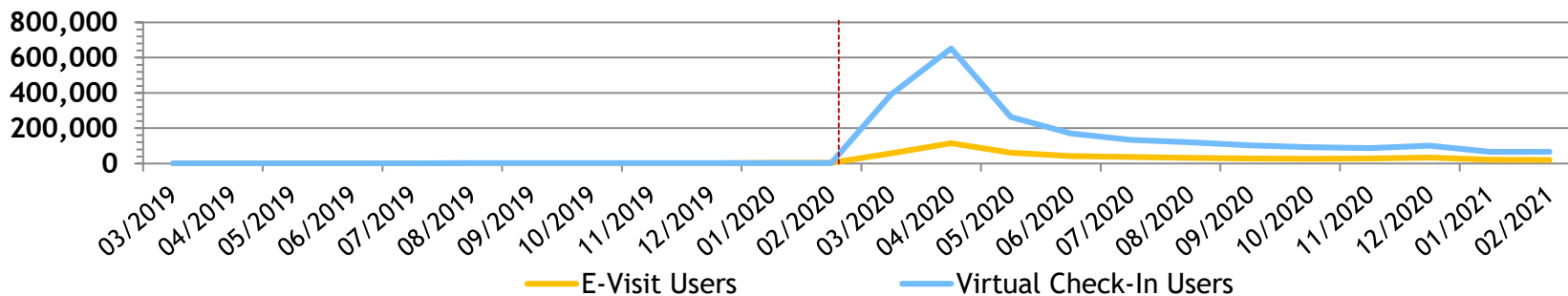
Telemedicine Users: Pre-Pandemic and Pandemic Period

	Total	Telehealth	E-visit ¹	Virtual Check-In
Pre-pandemic (March 1, 2019 - Feb 29, 2020)	910,490	892,121	5,220	14,088
Pandemic (March 1, 2020 - Feb 28, 2021)	28,255,180	27,691,878	367,467	1,601,033

Two Year Trend - Telehealth



Two Year Trend - E-Visits and Virtual Check-Ins



Disclaimer: All data presented in this update are preliminary and will continue to change as CMS processes additional claims and encounters for the reporting period. Please see page 4 and view the methodology document available [here](#).

¹Medicare coverage for E-Visits started on January 1, 2020.

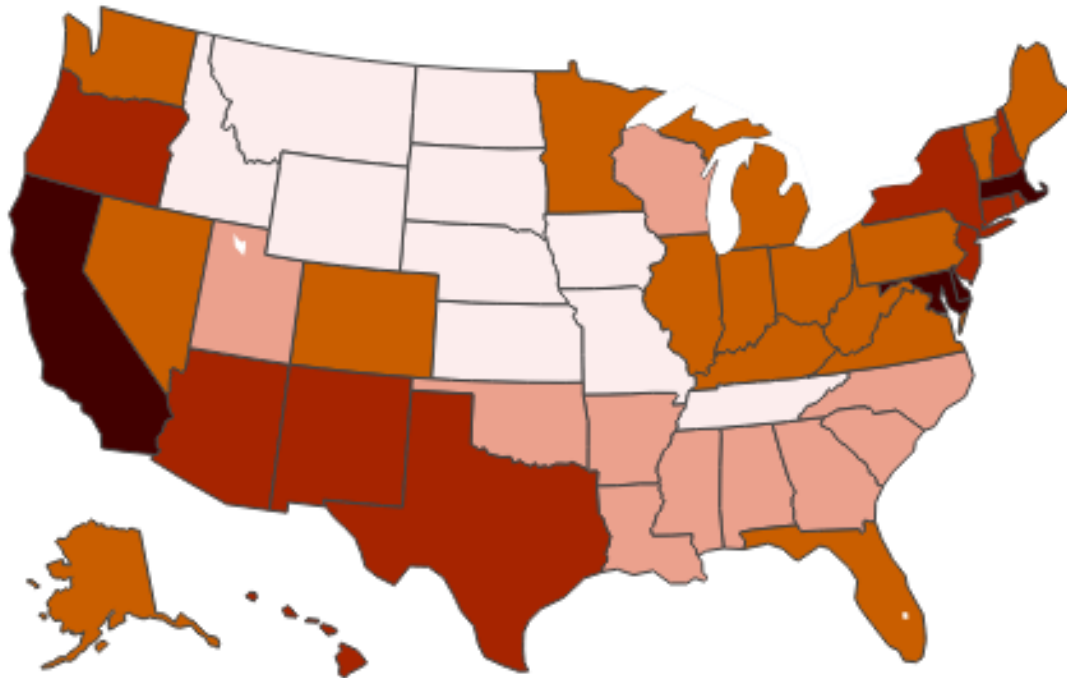
Medicare Telemedicine Snapshot

Medicare Claims and Encounter Data: March 1, 2020 to February 28, 2021, Received by September 9, 2021

28,255,180 Unique Telemedicine Users

53% of Medicare Users

Percentage of Medicare Users with a Telemedicine Service¹ by Geography



Rural Areas: **44%**

Urban Areas: **55%**

Map Scale: Percentage (%)



Disclaimer: All data presented in this update are preliminary and will continue to change as CMS processes additional claims and encounters for the reporting period. Please see page 4 and view the methodology document available [here](#).

¹Only beneficiaries with at least one telemedicine-eligible service are included in the denominator.

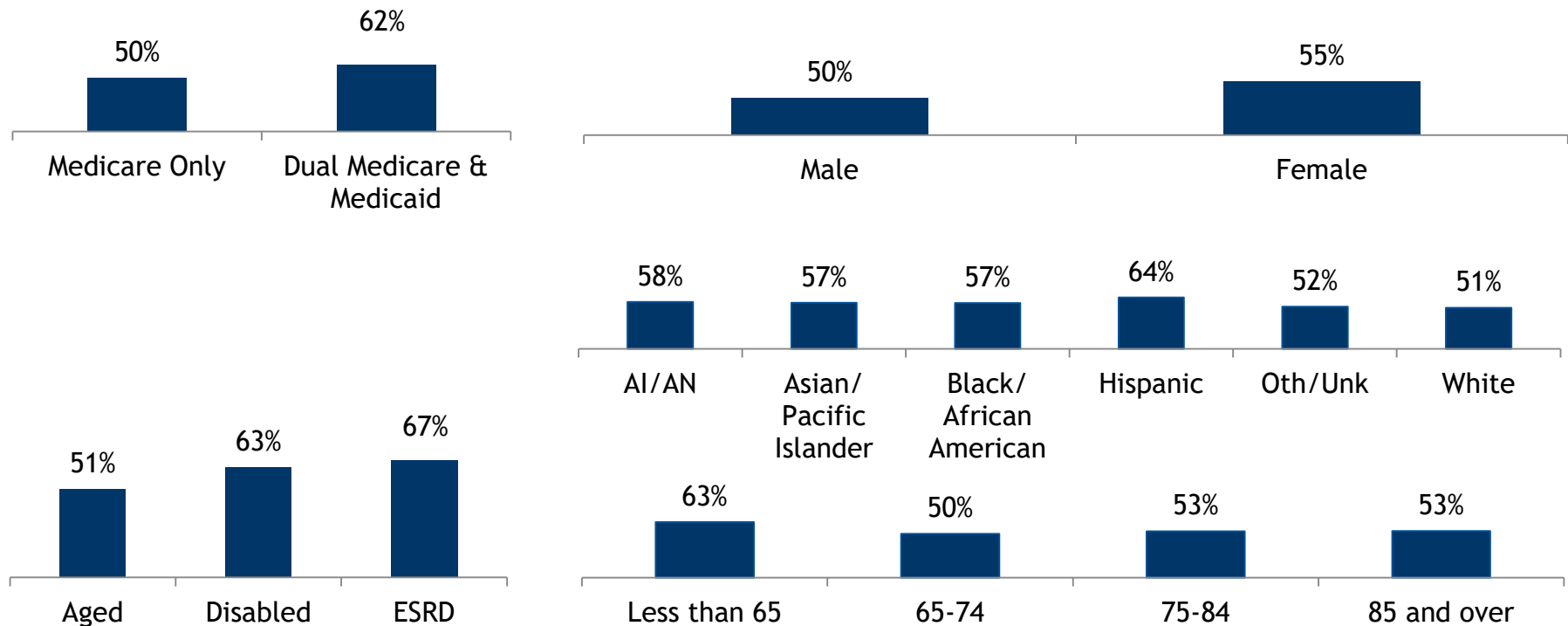
Medicare Telemedicine Snapshot

Medicare Claims and Encounter Data: March 1, 2020 to February 28, 2021, Received by September 9, 2021

28,255,180 Unique Telemedicine Users

53% of Medicare Users

Percentage of Medicare Users with a Telemedicine Service¹ by Beneficiary Characteristics



Note: AI/AN = American Indian/Alaska Native

Disclaimer: All data presented in this update are preliminary and will continue to change as CMS processes additional claims and encounters for the reporting period. Please see page 4 and view the methodology document available [here](#).

¹Only beneficiaries with at least one telemedicine-eligible service are included in the denominator.



Medicare Telemedicine Snapshot

Medicare Claims and Encounter Data: March 1, 2020 to February 28, 2021, Received by September 9, 2021

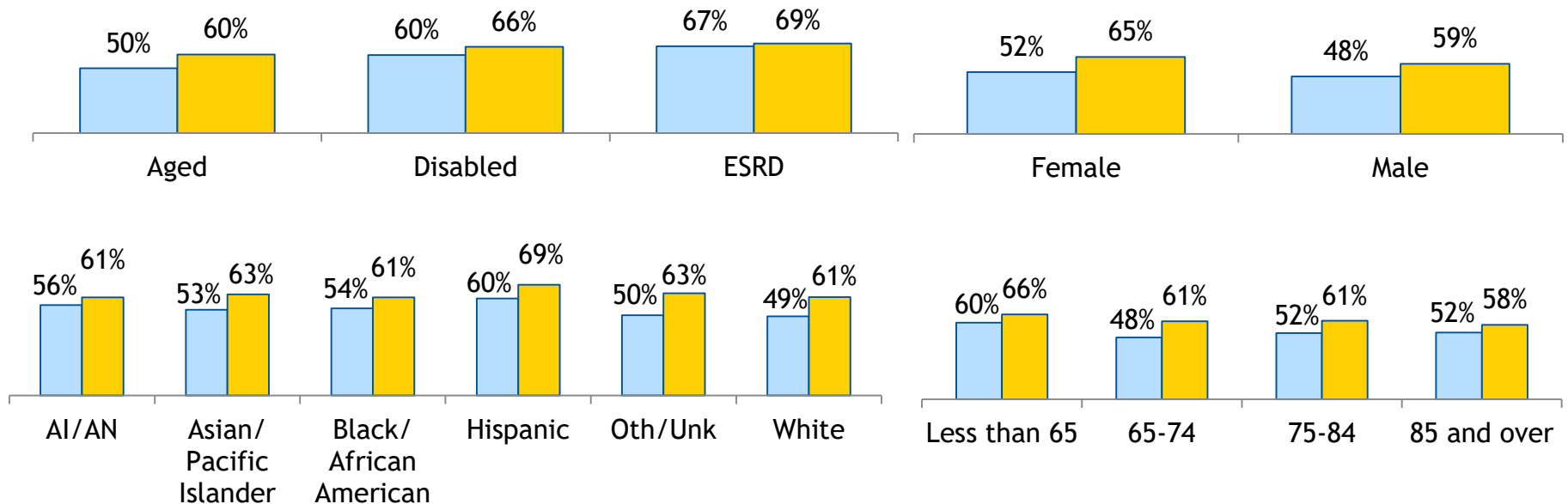
28,255,180 Unique Telemedicine Users

53% of Medicare Users

Percentage of Medicare Users with a Telemedicine Service¹ by Beneficiary Characteristics

-Medicare Only vs. Dual Medicare and Medicaid Eligibility-

□ Medicare Only ■ Dual Medicare and Medicaid



Note: AI/AN = American Indian/Alaska Native

Disclaimer: All data presented in this update are preliminary and will continue to change as CMS processes additional claims and encounters for the reporting period. Please see page 4 and view the methodology document available [here](#).

¹Only beneficiaries with at least one telemedicine-eligible service are included in the denominator.



Medicare Telemedicine Snapshot

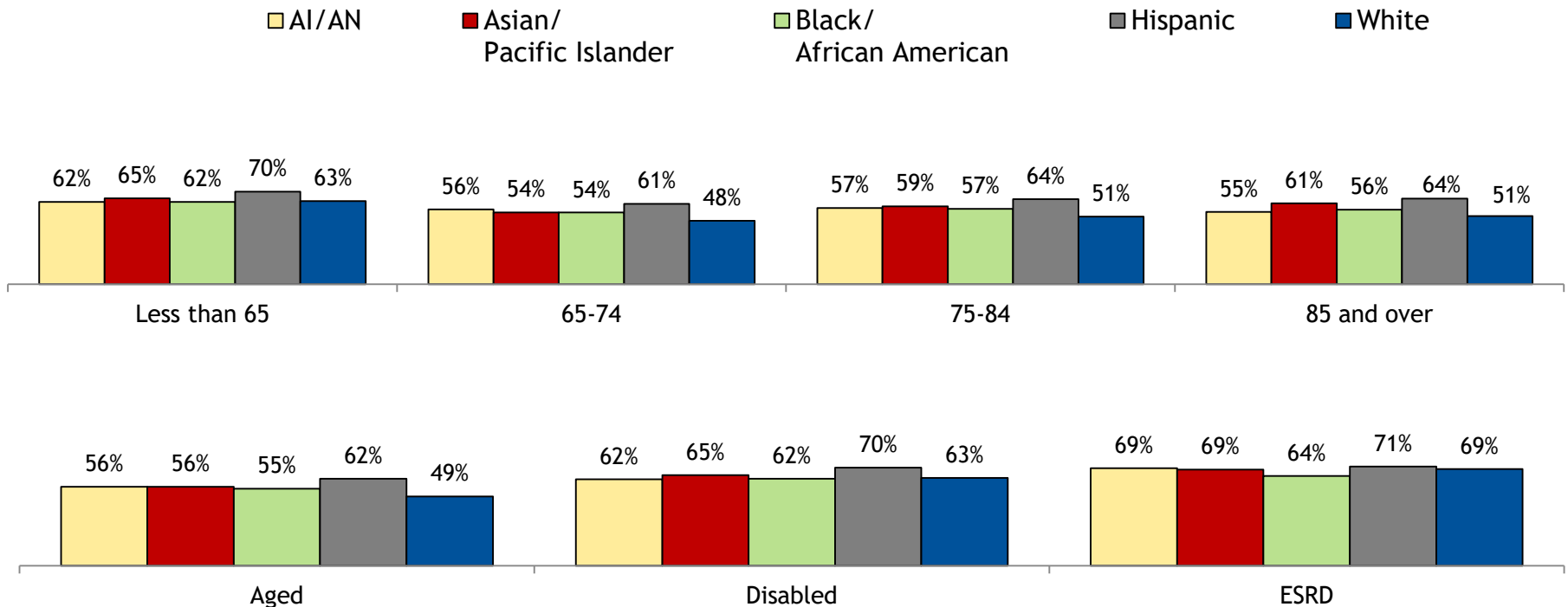
Medicare Claims and Encounter Data: March 1, 2020 to February 28, 2021, Received by September 9, 2021

28,255,180 Unique Telemedicine Users

53% of Medicare Users

Percentage of Medicare Users with a Telemedicine Service¹ by Beneficiary Characteristics

- By Race/Ethnicity -



Note: AI/AN = American Indian/Alaska Native

Disclaimer: All data presented in this update are preliminary and will continue to change as CMS processes additional claims and encounters for the reporting period. Please see page 4 and view the methodology document available [here](#).

¹Only beneficiaries with at least one telemedicine-eligible service are included in the denominator.



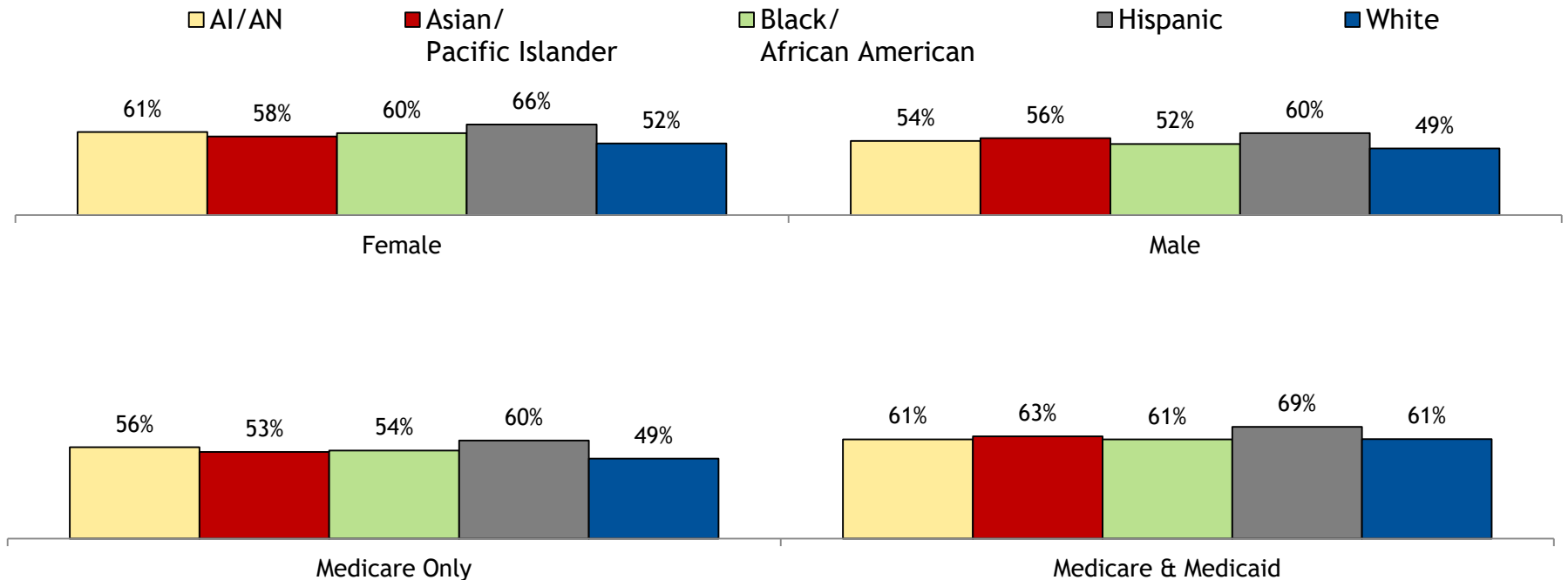
Medicare Telemedicine Snapshot

Medicare Claims and Encounter Data: March 1, 2020 to February 28, 2021, Received by September 9, 2021

28,255,180 Unique Telemedicine Users

53% of Medicare Users

Percentage of Medicare Users with a Telemedicine Service¹ by Beneficiary Characteristics - By Race/Ethnicity -



Note: AI/AN = American Indian/Alaska Native

Disclaimer: All data presented in this update are preliminary and will continue to change as CMS processes additional claims and encounters for the reporting period. Please see page 4 and view the methodology document available [here](#).

¹Only beneficiaries with at least one telemedicine-eligible service are included in the denominator.



Medicare Telemedicine Snapshot

Medicare Claims and Encounter Data: March 1, 2020 to February 28, 2021, Received by September 9, 2021

Medicare Telemedicine Snapshot Data File

A Medicare Telemedicine Snapshot data file is available at the following link:

<https://www.cms.gov/files/zip/medicare-telemedicine-snapshot-data-file.zip>

The data file includes all data points from the preceding charts. The data file also includes additional levels of detail, presenting Medicare Telemedicine utilization by:

- Month and State
- Month, State and Medicaid Eligibility Status
- Month, State and Race/Ethnicity
- Month, State and Medicare Status
- Month, State and Beneficiary Sex
- Month, State and Age Group
- Month, State and Rural/Urban Status
- Month, Medicaid Eligibility Status and Race/Ethnicity
- Month, Medicaid Eligibility Status and Medicare Status
- Month, Medicaid Eligibility Status and Beneficiary Sex
- Month, Medicaid Eligibility Status and Age Group
- Month, Medicaid Eligibility Status and Rural/Urban Status
- Month, Race/Ethnicity and Medicare Status
- Month, Race/Ethnicity and Beneficiary Sex
- Month, Race/Ethnicity and Age Group
- Month, Race/Ethnicity and Rural/Urban Status

Please see the [methodology document](#) for more details.