

Key Findings: Telehealth Utilization in Traditional Medicare



Telehealth utilization in 2021 remained almost 40x higher than pre-pandemic levels.

- 44% of Medicare beneficiaries had a telehealth visit in 2020, compared to 1% in 2019, and 28% in 2021.
- Total telehealth spending in 2020 was \$4.25B versus \$52M in 2019.
- Total outpatient visits (in-person + telehealth) were lower in 2020 and 2021 than 2019.



Primary care made up the largest share of telehealth visits in Medicare.

- Primary care visits represented almost 40% of all telehealth visits.
- 95% of primary care visits were in the context of established patient-provider relationships.
- In 2019, tele-primary care services were reimbursed 72% of in-person services, for the same service.



44% of all behavioral health visits in 2021 occurred via telehealth.

- Behavioral health visits were 4% of outpatient visits, but 27% of telehealth visits in 2021.
- 65% of tele-BH services were delivered outside of established patient-provider relationships.
- In 2019, tele-behavioral health services were reimbursed 57% of in-person services, for the same service.



Almost 1 out of 5 telehealth visits were by phone in 2021.

- 10% of Medicare beneficiaries had at least one audioonly telehealth visit in 2021.
- Beneficiaries under 65 (eligible due to disability) and those over 75 were more likely to rely on telephonic services.



Telehealth utilization was higher in urban areas and for non-white beneficiaries.

- Telehealth visit rates were directly correlated with population density.
- White, non-Hispanic beneficiaries had lower telehealth visit rates across all races/ ethnicities by 2% on average.



Beneficiaries with disabilities and those eligible for Medicare and Medicaid were more likely to use telehealth in 2021.

- Telehealth visit rates increased the most for beneficiaries with 5-8 chronic conditions.
- Beneficiaries who qualified for Medicare based on disability or End Stage Renal Disease were more likely to use telehealth services.