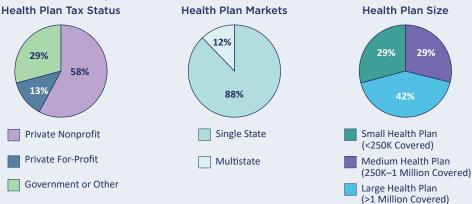


Annual Medicaid MCO Survey Telehealth

Demographics

In its sixth year, the 2023 survey findings represent health plan data from almost every state with Medicaid managed care. The annual survey collected information at the parent company/corporate levels and is intended to equip Medicaid stakeholders with the information needed to accurately articulate the national narrative about Medicaid managed care. The survey respondents are representative of the national demographics of all Medicaid health plans.



Source: Institute for Medicaid Innovation. "2023 Annual Medicaid Health Plan Survey."

Actions Medicaid Health Plans Are Implementing to Create More Equitable Access to Telehealth	All Health Plans
Connecting members to Community Based Organizations (CBOs) that support access to internet services	46%
Connecting members to CBOs that support access to technology/devices	46%
Leveraging/promoting the Federal Communications Commission (FCC)'s Lifeline Program	42%
Digital literacy/technology literacy education for members	38%
Leveraging/promoting the FCC's Affordable Connectivity Program	38%
None	29%
Digital literacy/technology literacy education for providers	25%
Supporting community hot spots for internet access	21%
Digital navigators for members	13%
Supplemental payments to members for in-home internet subscriptions	4%
Partnering with telecom companies to offer low-cost internet to members	4%

Notes: No health plans selected "supplemental payments to members for mobile devices or data packages." Source: Institute for Medicaid Innovation. "2023 Annual Medicaid Health Plan Survey." Changes to State Medicaid Policies or Requirements That Could Help Medicaid Health Plans Create More Equitable Access to Telehealth

Â	Support school-based health services delivered via telehealth, particularly behavioral health services	58%	
CP	Reimburse for evidence-based remote patient monitoring	54%	
	Reimburse for services that can		
C	be delivered appropriately via audio-only, including outpatient evaluation and management services and professional	50%	
	outpatient mental health care		
	Frable MCOsta		
-`Q́-	Enable MCOs to create innovative reimbursement models	50%	
	Reimburse for provider- to-provider consultations,		
ത	including eConsults that		
豐	leverage telehealth modalities (such as store-and-forward),	46%	
	when a professional medical		
	opinion is sought		
「茶」	Reimburse for translation and interpreting services	46%	
~	interpreting services		
	Allow federally qualified health centers (FQHCs), rural		
	health clinics (RHCs), Indian		
	Health Service clinics (IHS), and community mental health	46%	
	centers (CMHCs) to serve as		
	both origination and distant site providers		
	Incentivize for evidence-based remote patient monitoring	42%	
	remote patient monitoring		
Notes: Four percent (4%) of health plans selected none.			

Notes: Four percent (4%) of health plans selected none. Thirteen percent (13%) of health plans selected other. No common themes were identified for other.

Source: Institute for Medicaid Innovation. "2023 Annual Medicaid Health Plan Survey."

Robert Wood Johnson Foundation

Support for this project is provided by the Robert Wood Johnson Foundation. The views expressed here do not necessarily reflect the views of the Foundation.

Member Barriers Encountered by Medicaid Health Plans for Telehealth

Access to broadband or an internet subscription	96%
Limited data plans/insufficient data or minutes covered by smartphone plans	88%
Technology/communication devices (i.e., laptop, smartphone)	88%
Computer/technology literacy	88%
Health literacy 79%	6
Lack of awareness of or interest in tele- health as an option for accessing providers 71%	
Lack of inter- preter services 33%	

Source: Institute for Medicaid Innovation. "2023 Annual Medicaid Health Plan Survey."

Provider Barriers Encountered by Medicaid Health Plans for Telehealth

	Small Health Plans	Medium Health Plans	Large Health Plans	All Health Plans
Lack of technological resources	71%	70%	57%	67%
IT systems	29%	70%	86%	63%
Computer/technology literacy	57%	80%	43%	63%
Broadband access	43%	60%	43%	50%
State telehealth coverage policies influencing provider adoption	57%	30%	57%	46%
Provider disinterest	43%	30%	57%	42%
Integration into care models	14%	40%	43%	33%
Payment incentives	14%	40%	29%	29%
Other*	0%	30%	43%	25%
Lack of interpreter services	14%	30%	14%	21%
Quality concerns from the provider	0%	40%	14%	21%
Payment parity	14%	10%	14%	13%

Notes: Other* includes resources to support program implementation; ongoing regulatory clarifications of telehealth; inconsistency within provider network (e.g., a portion of the network lacks technological resources or broadband access, but the majority does not); and the time it takes to connect patients is not built into payment models, workflows, or productivity expectations.

Source: Institute for Medicaid Innovation. "2023 Annual Medicaid Health Plan Survey."

Outcomes Medicaid Health Plans Attribute to Telehealth

f	Increased patient access to services	75%
٩	Increased behavioral health care utilization	50%
(\vdots)	Increased member satisfaction	50%
\bigcirc	Decreased member no-shows	46%
\bigcirc	Improved patient compliance with care	46%
	Decreased emergency department utilization	33%
	Improved continuity of care	33%
\bigcirc	Increased provider satisfaction	33%
Ň	Increased primary care utilization	25%
¢	Decreased urgent care utilization	13%
•••	Increased cost savings	13%
	Increased duplication of services	8%
A	Increased fraud/abuse	8%
\bigcirc	Increased prescribing	4%

Notes: Four percent (4%) of health plans selected none. Four percent (4%) of health plans selected other. No common themes were identified for other.

Source: Institute for Medicaid Innovation. "2023 Annual Medicaid Health Plan Survey."

