

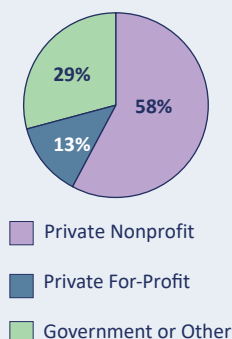


Annual Medicaid MCO Survey Telehealth

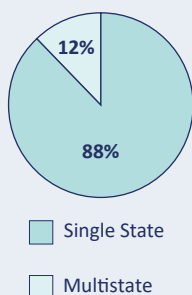
Demographics

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.

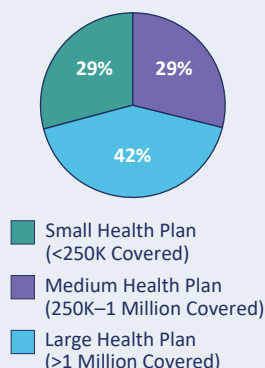
Health Plan Tax Status



Health Plan Markets



Health Plan Size



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

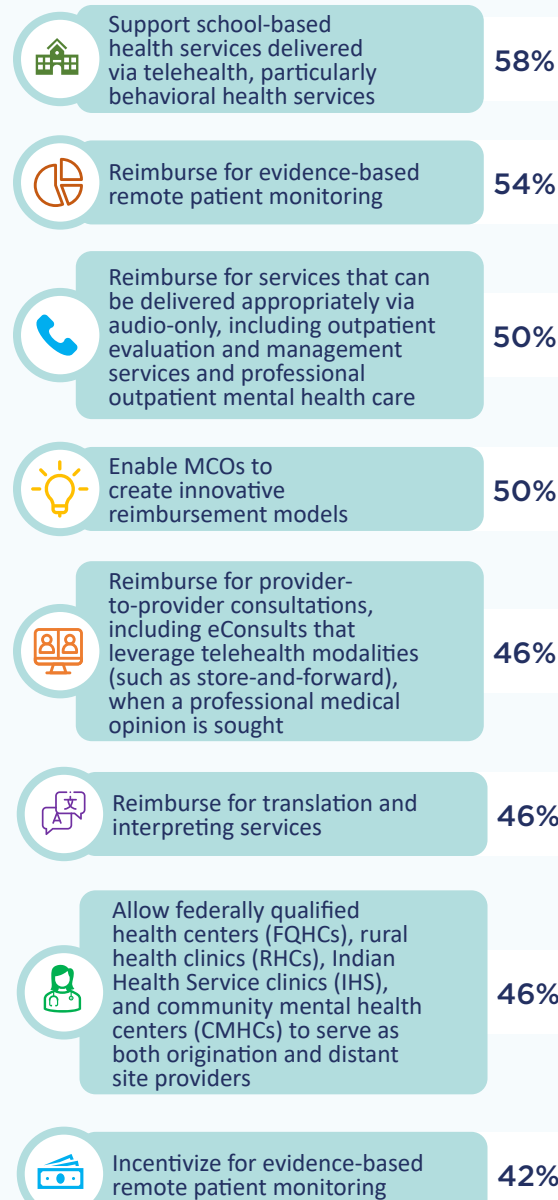
Actions Medicaid Health Plans Are Implementing to Create More Equitable Access to Telehealth

	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



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."

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%
Lack of awareness of or interest in telehealth as an option for accessing providers	71%
Lack of interpreter 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

	Increased patient access to services	75%
	Increased behavioral health care utilization	50%
	Increased member satisfaction	50%
	Decreased member no-shows	46%
	Improved patient compliance with care	46%
	Decreased emergency department utilization	33%
	Improved continuity of care	33%
	Increased provider satisfaction	33%
	Increased primary care utilization	25%
	Decreased urgent care utilization	13%
	Increased cost savings	13%
	Increased duplication of services	8%
	Increased fraud/abuse	8%
	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."