

Summary of MDH Data for the Telehealth Technical Advisory Group

Pamela Mink | Health Economics Program November 29, 2022

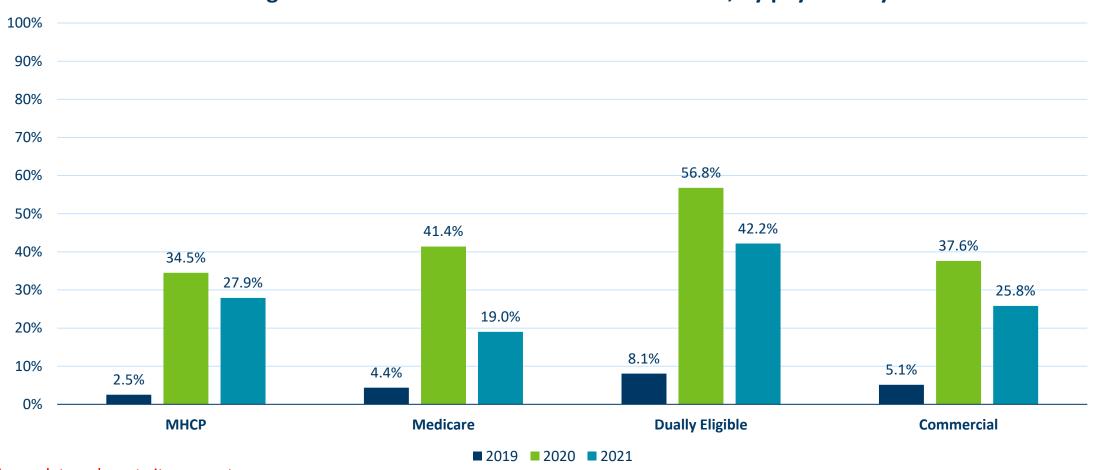
Overview of MDH Data for Preliminary Report to the MN Legislature

- Main MDH data sources used:
 - Minnesota All Payer Claims Database (MN APCD)
 - Commercial data for 2019, 2020, and first 6 months of 2021
 - Minnesota Health Access (MNHA) Survey
 - Population survey data collected late 2021 early 2022
 - Asked about telehealth use in previous 12 months
 - Minnesota Health Information Technology (HIT) Ambulatory Clinics Survey
 - Data collected late 2020
 - Asked about telehealth use before and during COVID-19 pandemic, and plans for future use
- NOTE: The data shown in this presentation should be considered preliminary and should not be cited or quoted. Once the data are published in the Preliminary Report to the Minnesota Legislature, they may be cited.

health.state.mn.us

Telehealth Use in Minnesota by Payer and Year, MN APCD: Jan 1, 2019 – June 30, 2021

Percentage of enrollees with at least 1 telehealth visit, by payer and year



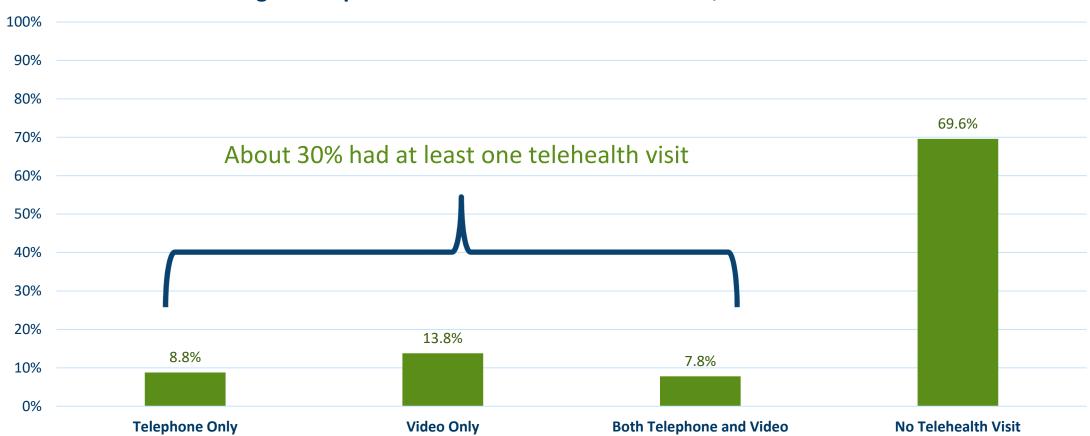
Preliminary data – do not cite or quote

Source: Minnesota All Payer Claims Database (MN APCD), Extract 24

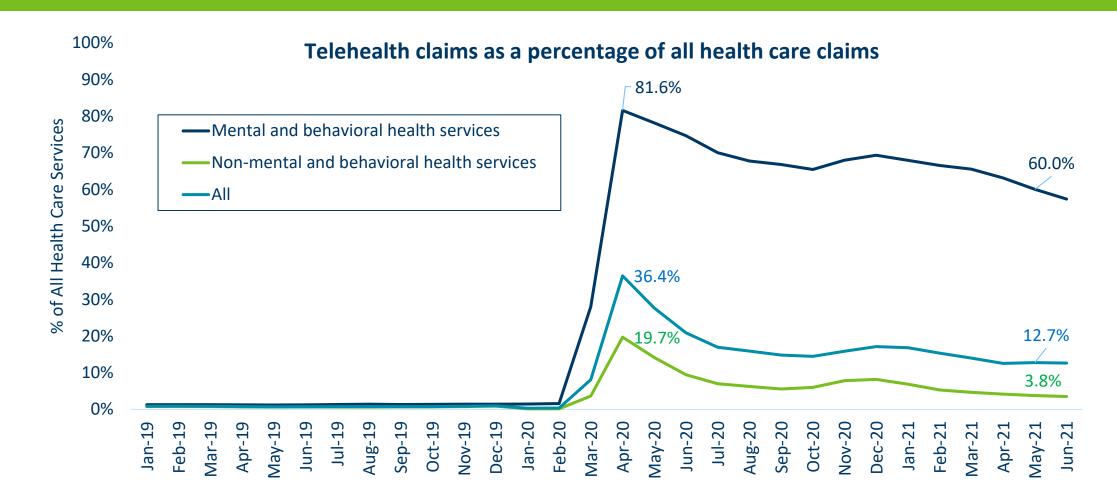
Note: MCHP - Minnesota Health Care Programs, which include Medical Assistance and MinnesotaCare

Telehealth Use in Minnesota by Type of Telehealth, MNHA Survey: Late 2020 – Late 2021

Percentage of respondents who had a telehealth visit, late 2020 – late 2021

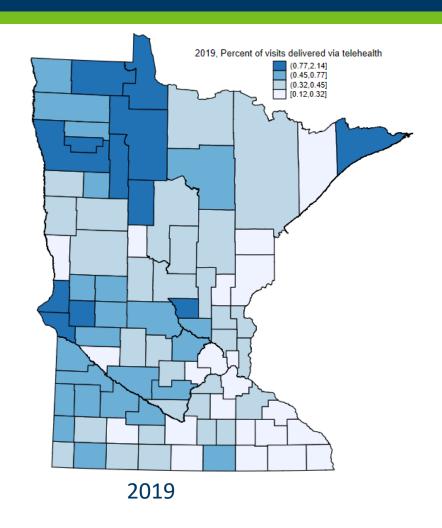


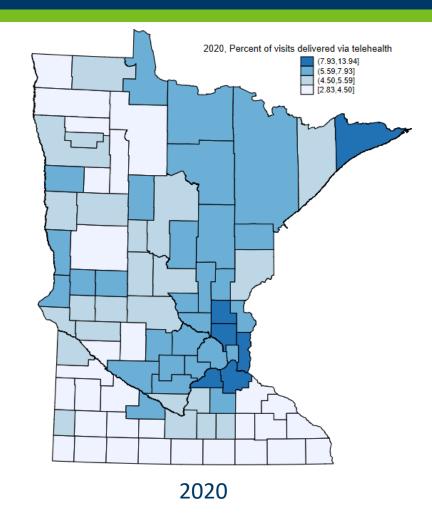
Telehealth Use for Minnesotans with Commercial Health Insurance, MN APCD: Jan 1, 2019 – June 30, 2021



Source: Minnesota All Payer Claims Database (MN APCD), Extract 24

Statewide Telehealth Use (Percentage of Health Care Visits Delivered via Telehealth), MN APCD: 2019 and 2020





Preliminary data – do not cite or quote

Source: Minnesota All Payer Claims Database (MN APCD), Extract 24

NOTE: Data in the maps are for all payers

Use/Provision of Telehealth by Minnesota Clinics, HIT Survey: 2020

Percentage of clinics that reported use of telehealth either before or during COVID-19 AND plans to continue using in the future:

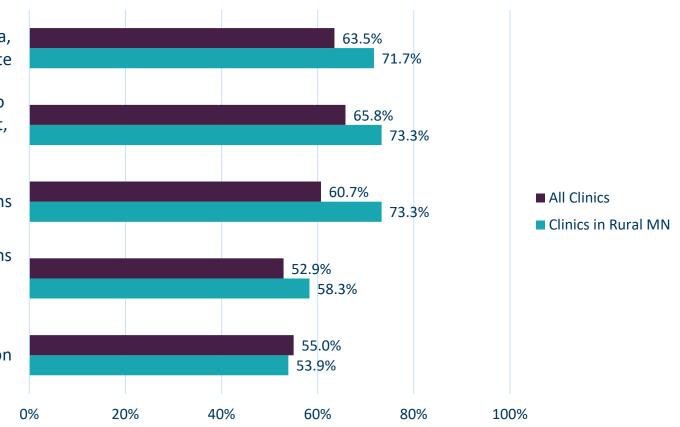
Screen patients who may have symptoms of influenza, COVID-19, or other condition, and refer as appropriate

Provide low-risk urgent care, identify those persons who may need additional medical consultation or assessment, and refer as appropriate

Access primary care providers and specialists, including mental and behavioral health, for chronic health conditions and medication management

Monitor clinical signs of certain chronic medical conditions (e.g., blood pressure, blood glucose, other remote assessments)

Follow up with patients after hospitalization



Preliminary data – do not cite or quote

Source: Minnesota Health Information Technology (HIT) Ambulatory Clinics Survey

NOTE: Data shown for activities reported by 50% or more of all clinics

5 Most Common Diagnoses for which Telehealth was Used (Commercial Payers), MN APCD: Jan 1, 2019 – Jun 30, 2021

2019 (Jan-Dec)

- Acute sinusitis, unspecified
- Other abnormal glucose
- 3. UTI, not specified
- 4. Conjunctivitis
- Generalized anxiety disorder

2020 (Jan-Dec)

- 1. Generalized anxiety disorder
- 2. Major depressive disorder, recurrent, moderate
- 3. Adjustment disorder with mixed anxiety and depressed mood
- 4. Anxiety disorder, unspecified
- 5. Encounter for exam/obs for unspecified reasons

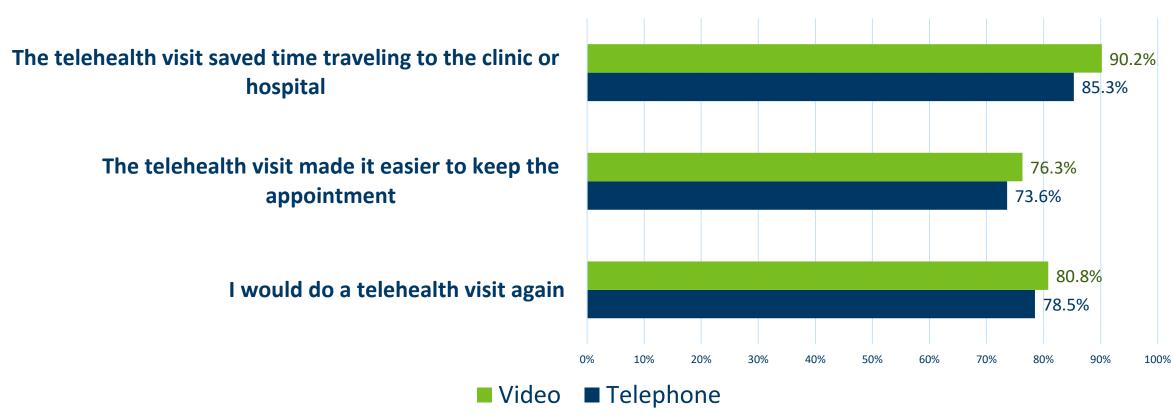
2021 (Jan-Jun)

- 1. Generalized anxiety disorder
- Major depressive disorder, recurrent, moderate
- Adjustment disorder with mixed anxiety and depressed mood
- 4. Anxiety disorder, unspecified
- 5. Encounter for exam/obs for unspecified reasons

Patient Experience with Telehealth, MNHA Survey: Late 2020 – Late 2021

Telehealth Experience

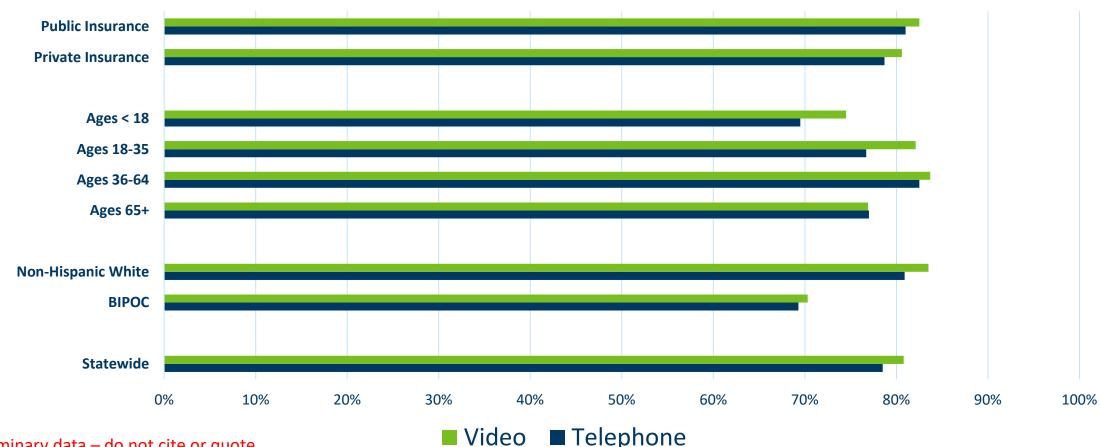
(percent responding agree or strongly agree)



Preliminary data – do not cite or quote

Variation in Patient Satisfaction with Telehealth, MNHA Survey: Late 2020 – Late 2021

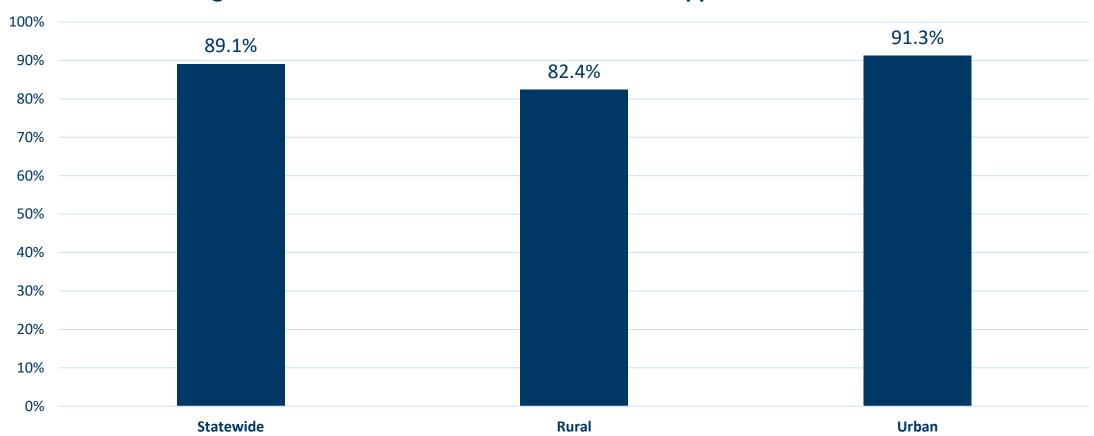




Preliminary data – do not cite or quote

Access to Internet for Telehealth, MNHA Survey: Late 2020 – Late 2021

Percentage with an internet connection sufficient to support a video telehealth visit



Looking ahead to 2023

- Minnesota All Payer Claims Database (MN APCD)
 - Data from 2021 and 2022 to be added
- Minnesota Health Access (MNHA) Survey
 - Next survey will be in the field in 2023, and results won't be available until after the report is due in January 2024
- Minnesota Health Information Technology (HIT) Ambulatory Clinics Survey
 - 2022 survey in the field now
- Other data and analyses are being planned

health.state.mn.us 12



Thank You!

Land Acknowledgement

Every community owes its existence and vitality to generations from around the world who contributed their hopes, dreams, and energy to making the history that led to this moment. Some were brought here against their will, some were drawn to leave their distant homes in hope of a better life, and some have lived on this land for more generations than can be counted. Truth and acknowledgment are critical to building mutual respect and connection across all barriers of heritage and difference.

We begin this effort to acknowledge what has been buried by honoring the truth. We are standing on the ancestral lands of the Dakota people. We want to acknowledge the Dakota, the Ojibwe, the Ho Chunk, and the other nations of people who also called this place home. We pay respects to their elders past and present. Please take a moment to consider the treaties made by the Tribal nations that entitle non-Native people to live and work on traditional Native lands. Consider the many legacies of violence, displacement, migration, and settlement that bring us together here today. Please join us in uncovering such truths at any and all public events.*

^{*}This is the acknowledgment given in the USDAC Honor Native Land Guide – edited to reflect this space by Shannon Geshick, MTAG, Executive Director Minnesota Indian Affairs Council