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## Audio and Video Visits Important in Meeting Mental Health Needs at Academic Health Systems

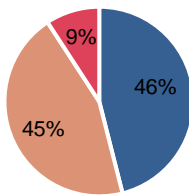
For mental and behavioral health (M/BH), audio and video visits provide an opportunity to increase access for patients, particularly those in rural, under-resourced, and medically underserved communities. Understanding telehealth’s key role in providing access to M/BH care can help ensure health systems meet the needs of patients through improved care-delivery strategies. The AAMC analyzed all-payer 2020 data from the Clinical Practice Solutions Center (CPSC),<sup>1</sup> consisting of 82 faculty practice plans’ ambulatory-visit claims for the six most common M/BH diagnosis codes<sup>2</sup> by the mode of care delivery — in person, video, or audio. For M/BH visits, audio and video visits dramatically increased with the onset of COVID-19 and continued to be a key method of care delivery throughout the year, accounting for 55% of annual evaluation and management (E/M) visits.<sup>3</sup>

**In 2020, telehealth was the mode of care delivery for nearly 55% of visits for the most common M/BH conditions.**

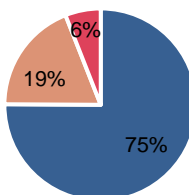
### Top Six M/BH Diagnoses<sup>2</sup>

- Depressive Disorders
- Bipolar Disorders
- Trauma- and Stressor-Related Disorders
- Schizophrenia and Other Psychotic Disorders
- Attention-Deficit/Hyperactivity Disorder
- Anxiety Disorders

### Mental Health Ambulatory E/M Visits by Mode, 2020

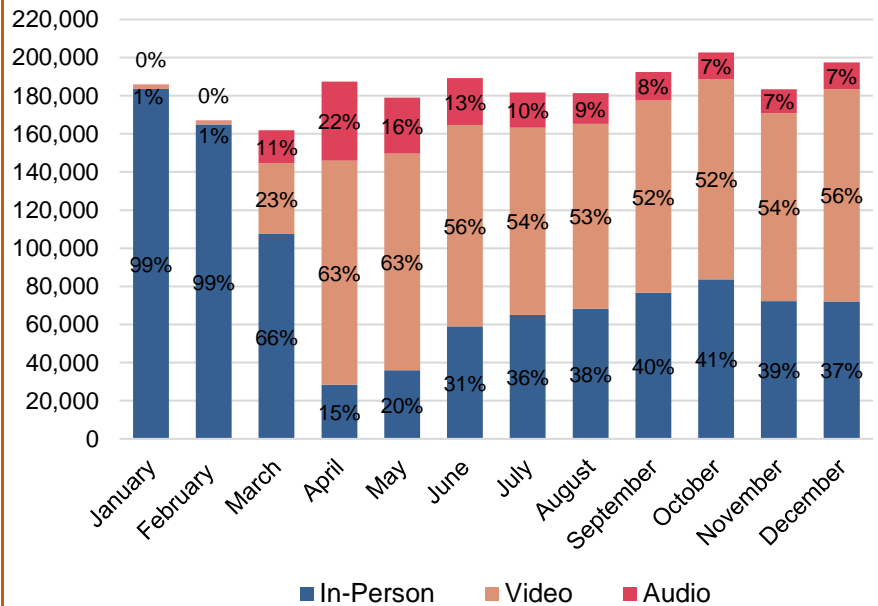


### All-Diagnoses Ambulatory E/M Visits by Mode, 2020



■ In-Person ■ Video ■ Audio

### Ambulatory E/M Mental Health Visits by Mode, 2020

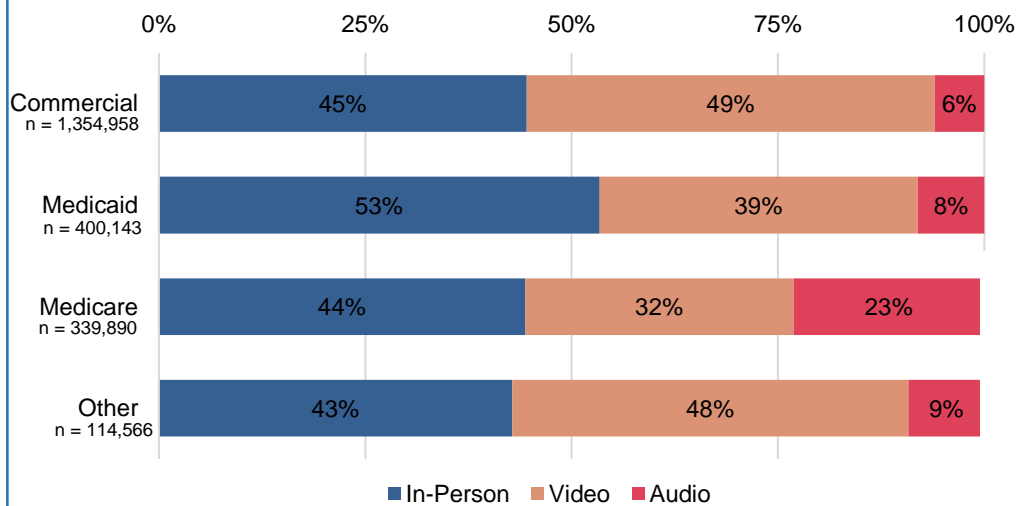


### Key Findings

- In 2020, 54% of E/M visits occurred via audio or video for those with a common M/BH primary diagnosis compared with 25% of visits for all diagnoses.
- Audio and video E/M visits for M/BH diagnoses peaked in April 2020, with 85% of visits occurring via telehealth. Over the course of 2020, the mean for video visits was 44%, and the mean for audio visits was 9%.
- Overall, the volume of E/M visits for the most common M/BH care conditions remained relatively stable over the course of 2020. For 2020, the monthly mean was 184,130 visits (range: 161,885 (March) - 202,661 (October)).

**Video visits were the most-used mode for mental health care in 2020 for Commercial and Other payer groups. Medicaid is the only group with a higher percentage of in-person than telehealth mental health visits.**

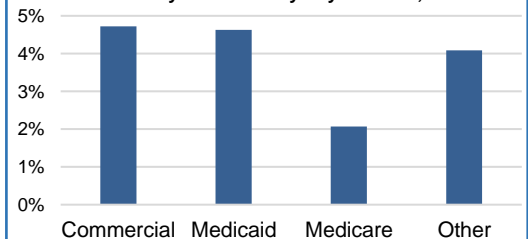
**Ambulatory E/M Mental Health Visits by Payer Status, 2020**



### Key Findings

- Rate of audio usage varied by payer, with 23% of Medicare visits occurring as audio, compared with only 6% for Commercial.
- High rates of audio-only for Medicare patients may speak to the digital barriers many patients face, such as a lack of comfort with video technology, lack of video-enabled devices, and lack of connectivity and broadband capabilities.

**Mental Health Visits as a Percentage of All-Diagnoses Ambulatory E/M Visits by Payer Status, 2020**



### Summary

During 2020, both audio and video visits were substantial components of access to M/BH services. These telehealth services substituted for in-person care, and total visits remained steady. M/BH providers have reported being able to provide a wide array of services efficiently, effectively, and safely to patients using video services and the telephone.<sup>4</sup> Coverage of audio-only M/BH services is particularly important for patients who may not have access to, or may not feel comfortable with, interactive audio and video technologies or who may not feel comfortable with in-person visits. Both audio and video telehealth services will likely continue to serve as significant modes for care delivery to meet the needs of M/BH patients seeking care. This data demonstrates that audio and video visits can substantively support improved access to M/BH care, and both should be made available as options for all patient populations, particularly in communities with limited access to M/BH services.

Authors: Danielle Carder, Sarah Hampton, and Brooke Kelly

### Notes

1. AAMC analyzed physician and nonphysician claims billed by Faculty Practice Plan members of the Clinical Practice Solutions Center (CPSC). The CPSC is a product of the AAMC and Vizient that collects billing data from Faculty Practice Plan members to provide benchmarks and help members improve performance.
2. Substance Abuse and Mental Health Services Administration, Center for Behavioral Health Statistics and Quality. *Mental Health Annual Report: 2013-2018. Use of Mental Health Services: National Client-Level Data*. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2020.
3. Eighty-two CPSC members shared claims data for each month of 2020 at the time of this analysis (August 2021); 81 of those 82 had claims for "mental health visits," which are defined as Evaluation and Management visits (CPT codes 99201-5, 99211-5, and 99441-3) where mental and behavioral health ICD-10 codes from the top six diagnoses of 2018 were the primary diagnosis. "Audio-only visits" were identified based on CPT code 99441-3. "Video visits" were identified based on CPT code 99201-5 or 99211-5 and place of service = 02 or modifiers 95, GT, GQ, and/or G0 on the claim. Claims are across all payers, specialties, and places of service sites except Inpatient Hospital = 21. "Other" payer includes payers such as Veterans Affairs, self-pay, and international payers.
4. Thakkar S, Tarshis T. Satisfaction with telehealth service delivery among providers during the COVID-19 pandemic. *J Am Acad Child Adolesc Psychiatry*. 2021;60(10):S245. doi:10.1016/j.jaac.2021.09.36