



# Utilization Patterns of Telehealth: New Realities in Post-COVID Children's Behavioral Health Care in Louisiana

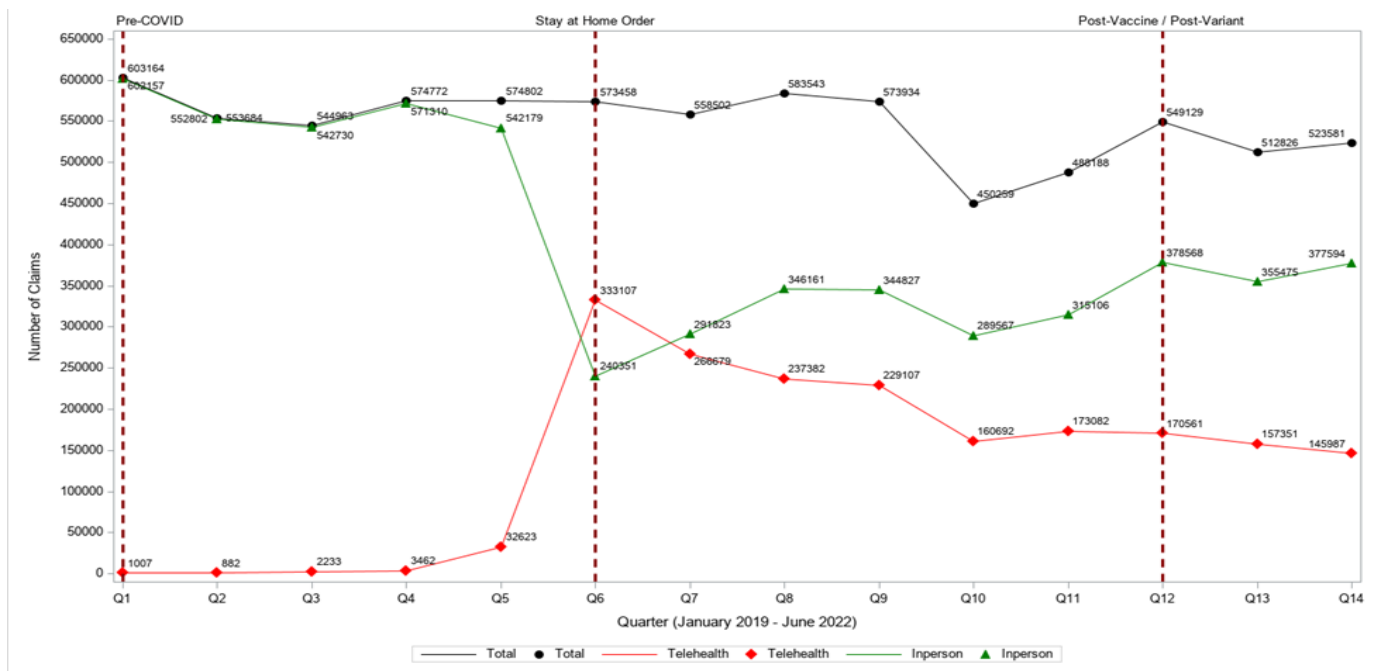
## Introduction

Before COVID-19, over 98.5% of children's behavioral health claims in Louisiana described the place of service as 'in-person,' including all face-to-face visits — whether in an office, facility, hospital, etc. Four-months following the COVID emergency Stay-at-Home Order that began in March 2020, the Center surveyed clinician experiences during the rapid adjustment to 'telehealth' visits to understand experiences and determine resource gaps. A convenience sample of over 300 clinicians, that served Louisiana populations, described an abrupt yet successful transition to telehealth. Nearly 80% of clinicians designated the transition as telehealth-only utilization and/or 'hybrid' visits (combined in-person and telehealth visits).<sup>1,2</sup> In this brief, the Center discusses how Louisiana's children's behavioral health Medicaid claims data demonstrate longitudinal variations in the place of service across Pre-COVID, Stay-at-Home, and Post-Vaccination eras. These patterns are explored at claims, clients, and clinician levels.<sup>3</sup>

## Claims-level Comparisons between In-Person and Telehealth Care

Figure 1 shows the COVID emergency and resulting Stay-at-Home Order were not associated with a significant loss in claims but a rather abrupt shift in how care took place. Telehealth briefly exceeded in-person claims peaking at 58% of total claims (333,107) in April through May 2020 (i.e., Quarter 6). Concurrently, in-person claims reached their lowest point of 42.0% of total claims (240,351). In-person claims rebounded rapidly at an average increase of 7.4% per quarter, ending in 2021 at 68% of all claims. Despite the progressive migration back to in-person care, telehealth utilization has largely sustained compared to the pre-COVID era, with a quarterly average of 38.1% (range: 27.9% - 58.0%) of all child and family behavioral health claims.

Figure 1: Client Trend by Claim Type and Quarter (January 2019 to June 2022)



NOTE: These data are presented longitudinally using claim-quarters, meaning they specify all patient claims observed by each three-month quarter for all available data (14 quarters = 3.5 years).

<sup>1</sup> Singh, S., Fenton, A., Bumbarger, B., Beiter, K., Simpson, L., Thornton, M. & Phillippi, S. (2022). Transitioning behavioral healthcare in Louisiana through the COVID19 pandemic: Policy and practice innovations to sustain telehealth expansion. Journal of Technology in Behavioral Science. 7, 296-306  
<sup>2</sup> 79.8% of 307 clinicians surveyed in the Center's 2020 Telehealth Survey reported using only Telehealth Only care (85.6%) or Hybrid care (24.1%), with only 1.7% reporting In-person care.  
<sup>3</sup> Levels are defined as: Claims are counted individually, clients represent all claims with patient ID, clinicians represent all individual clinicians who served the clients.

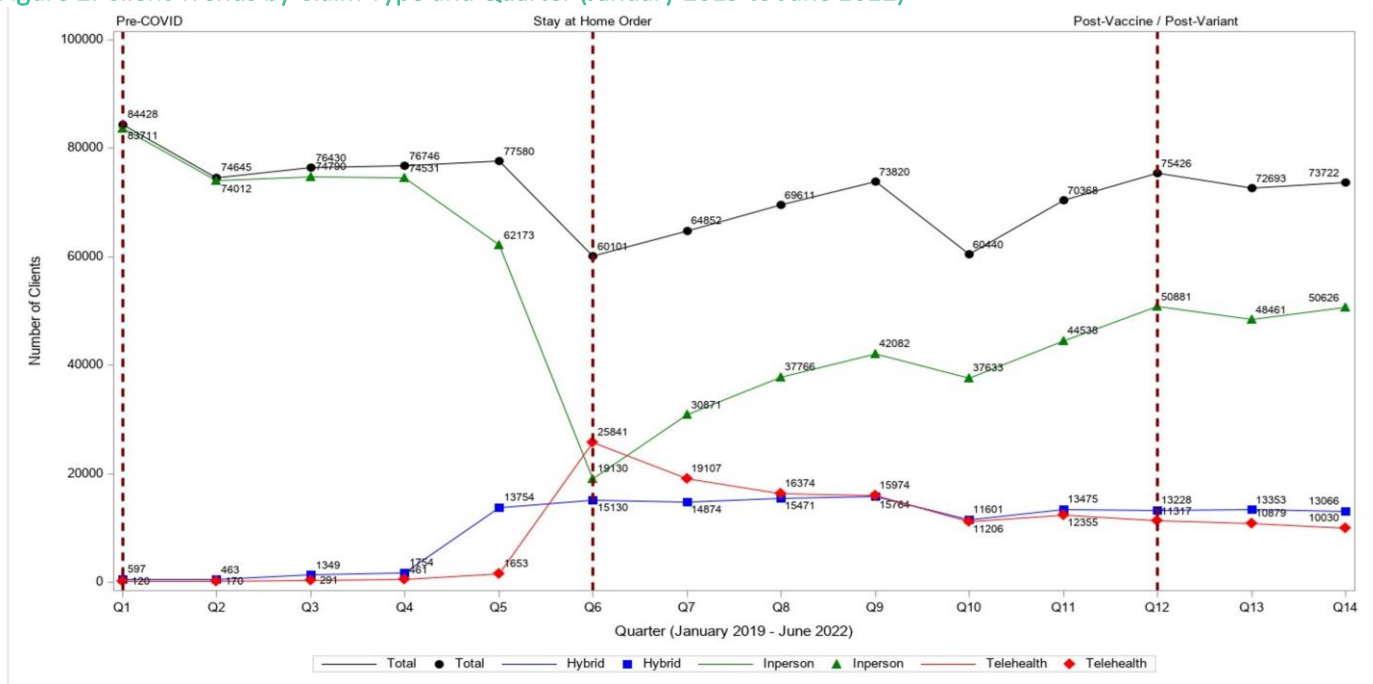
The most significant decline in overall claims occurred during Quarters 9 and 10 (January – June 2021). Counterintuitively, this 25.1% drop corresponds with the greatest increase in statewide COVID vaccinations. The Louisiana Vaccine Tracker reported those with at least one dose growing from 26.5% to 51.6% and two doses from 16.7% to 45.3% of the Louisiana population during this time period.<sup>4</sup> Despite a rebound in Quarter 12, the post-vaccination/post-variant era claims are, on average, 7.1% lower than pre-COVID claims.<sup>5</sup>

### Clients by Place of Service

Figure 2 shows client care utilization patterns and trends. In general, client care utilization appears disrupted, with a 22.5% decrease during the April-July 2020 (i.e., Quarter 6) Stay-at-Home order and a subsequent drop of 18.1% utilization in April-July 2021 (i.e., Quarter 10). Based on a quarterly average, clients utilizing in-person care comprised 60.6% (range: 47.6% - 68.7%) of all care, increasing an average of 10.3% per quarter, and clients using telehealth care comprised 18.9% of all clients (range: 13.6% - 23.5%) decreasing at an average of 11.3% per quarter.<sup>6</sup>

Unlike individual claims, aggregated client claims can indicate the place of service patterns by quarter, such as in-person only, telehealth only, or hybrid claims, meaning a combination of in-person and telehealth visits. Figure 2 illustrates a stable population sustaining 20.6% hybrid claims (range: 18.5% -25.2%) after April-July 2020 (i.e., Quarter 6). This consistent hybrid and telehealth use continues for two years after the Stay-at-Home Order. Together, hybrid and telehealth users represent an average of 39.4% of all clients (range: 31.3% - 52.4%).

Figure 2: Client Trends by Claim Type and Quarter (January 2019 to June 2022)



### Mapping Changes in Telehealth Use

Figures 1 and 2 show care utilization patterns differing over time. Figure 3 illustrates that utilization also differs across geography. The following three maps visualize a six-month zip code-level pattern of change in clients who engaged in in-person, telehealth, or hybrid care. Each map is calculated as the percentage difference in total clients from April-July 2020 (i.e., Quarter 6) and the Stay-at-Home Order to October – December 2021 (i.e., Quarter 12), which is the Post-Vaccine and Post-Variant era.

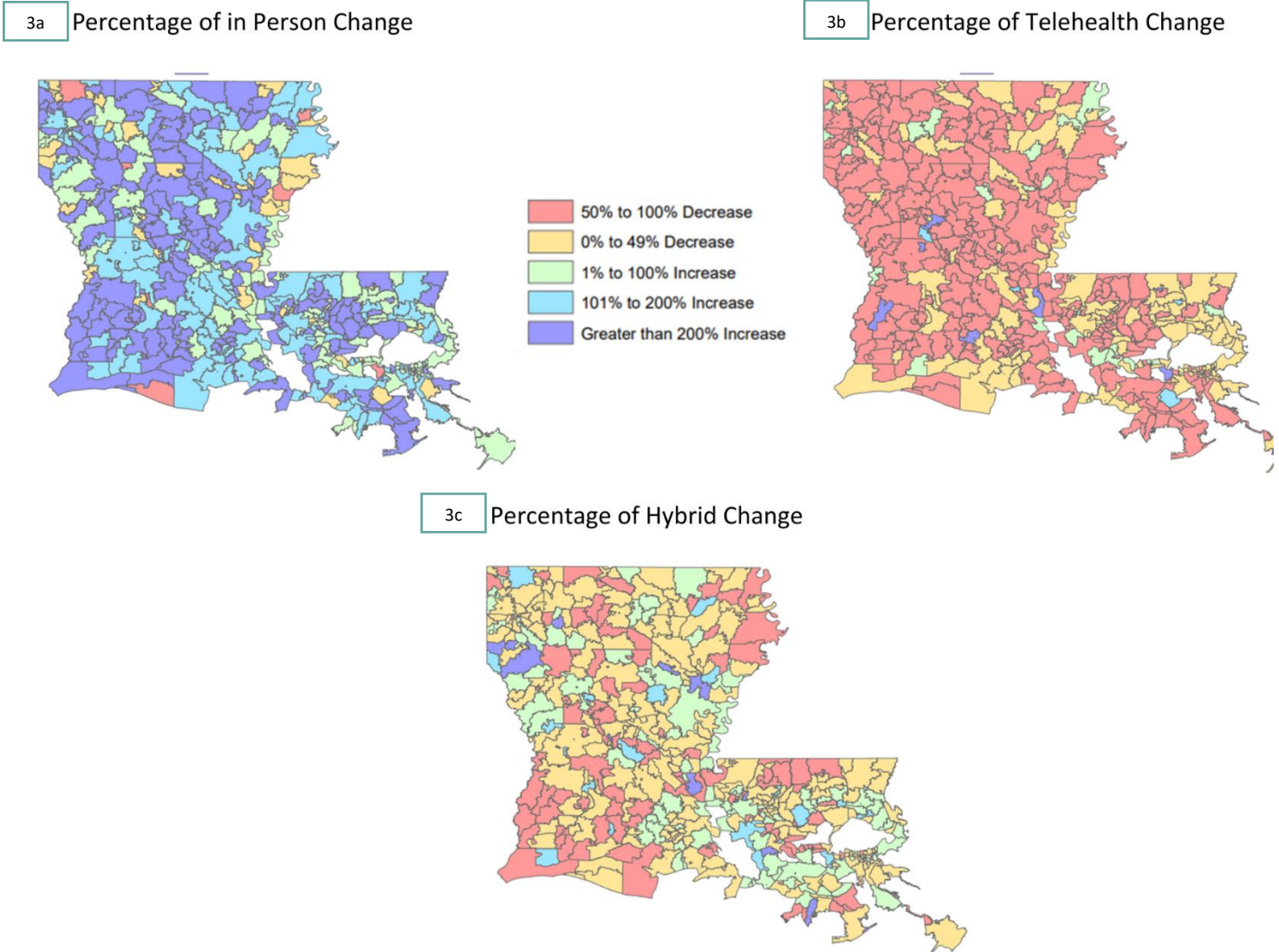
<sup>4</sup> Louisiana COVID-19 Vaccine Tracker: <https://data.news-leader.com/covid-19-vaccine-tracker/louisiana/22/>

<sup>5</sup> Comparing average Pre-COVID claims to average Post-Vaccination/Post-variant claims: Era averages are 570,277 and 528,512 respectively

<sup>6</sup> Excluding the Quarter 10 decline

Figure 3a depicts an increase in clients experiencing in-person care, with most zip codes showing a 100% percent to greater than 200% increase. Figure 3b shows a less pronounced shift of clients away from telehealth care by a decrease of 50% to 100%. Finally, Figure 3c indicates that clients engaging in hybrid care experienced the least percentage decreases, with 52% of zip codes decreasing by 0 – 49% and 33% decreasing by 50-100%, and the remaining 15% increasing between April-July 2020 to October-December 2021 (i.e., Quarters 6 through 12).

Figure 3: Percentage Change of Place of Service over 6 Quarter period: April 2021 to December 2021

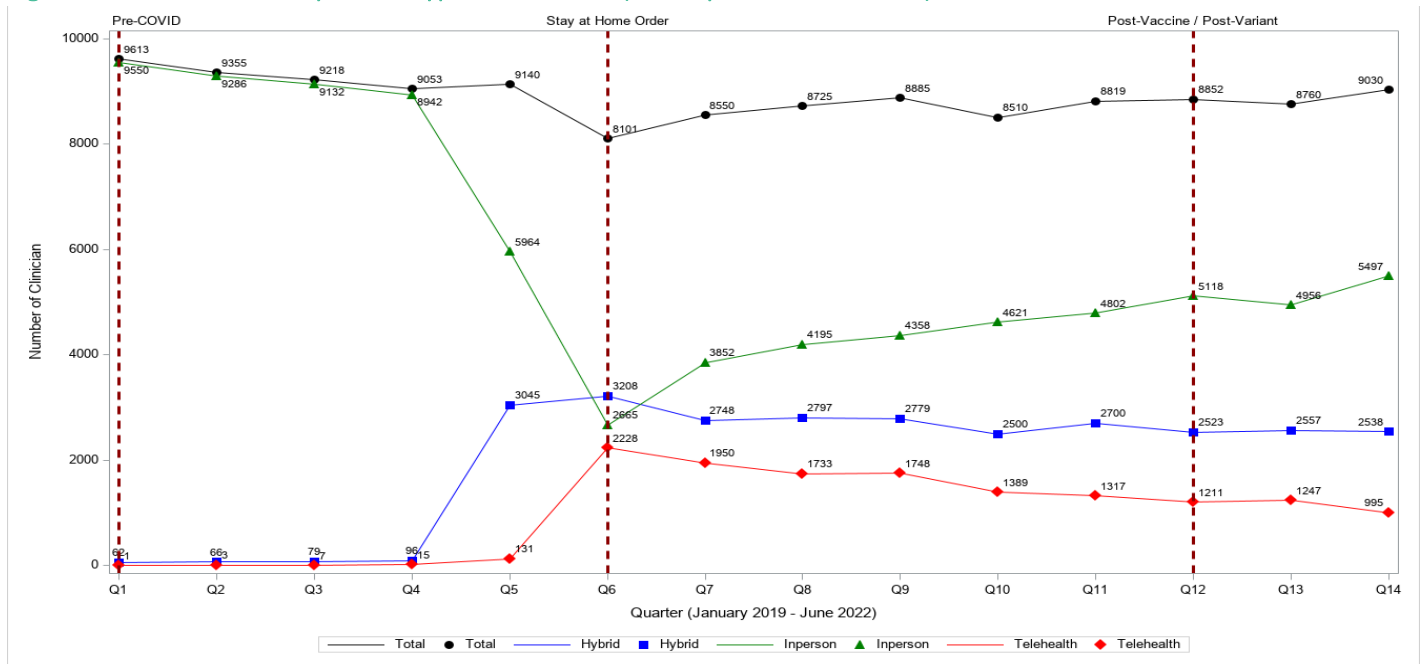


While telehealth care slowly declines, hybrid care appears to be a consistent method of service delivery to nearly a third of the population.

### Sustained and Adaptive Clinician Populations

Clinician data are derived as the unique providers for each client yet have several distinct differences from claim or client patterns. For example, the Center's findings indicate clinicians' early adoption of hybrid care beginning in January-March 2020 (i.e., Quarter 5), whereby 3045 of the 9140 clinicians (33.3%) provided hybrid care before the official Stay-at-Home Order (See Figure 4 below). Secondly, while claim, client, and clinician patterns show a progressive return to in-person care, the findings illustrated in Figure 3 indicate that nearly 29.2% of clinicians regularly maintained hybrid care with clients. Lastly, clinician populations, like client populations, were sensitive to the Stay-at-Home order and mass vaccinations, experiencing an 11.4% decrease in April-June 2020 (i.e., Quarter 6), followed by a 4.2% decrease in April-June 2021 (i.e., Quarter 10). When considering claim and client patterns at these same time points, it appears that a declining number of clinicians may have provided more care (individual claims) to a vacillating number of clients.

Figure 4: Clinician trends by Claims type and Quarter (January 2019 to Jun 2022)



## CONCLUSIONS & IMPLICATIONS

These findings show that telehealth visits for children's behavioral health in Louisiana have significantly increased during the pandemic, although in-person visits rebounded as the pandemic progressed and vaccination rates increased. The findings also show that hybrid care has become a stable and consistent way of providing care across the state, trending upward in certain geographical regions even as overall telehealth use trends downward. It is suggested that policymakers consider hybrid care in their policies regarding telehealth-related access to continue providing behavioral healthcare services to those wanting to utilize this delivery method. To assist with this, the Center is researching several place-based factors critical in understanding these emerging care trends, including broadband access, urban vs. rural location, distance to providers, and average income, along with other demographic features, to determine if any discernible drivers significantly affect telehealth-only and hybrid utilization.

The findings suggest clinicians quickly adopted hybrid care models, even before official Stay-at-Home Orders, and consistently sustained them. The study also reveals that clinician populations were declining, though claims were steady, and clients rebounded quickly, suggesting clinicians' capacity may have been chronically overwhelmed. It is recommended that policymakers consider providing more support for clinicians, not only in providing high-quality care using telehealth and hybrid but in complex settings like the pandemic and other emergencies that can upset the ratio of client and client needs to clinician capacity.

**Authors: Dr. Sonita Singh, Dr. Brian Bumbarger, Willandra Whiting, MPH & Dr. Stephen Phillippi**

The Center's partnership with the state focuses on creating a trained workforce, increasing access to EBPs, and examining improved utilization of EBPs to better serve the behavioral health needs of youth and families throughout Louisiana. More information on the Center is available at <https://laevidencetopractice.com/>.