

Highlights of GAO-22-104700, a report to congressional committees

Why GAO Did This Study

To respond to the COVID-19 pandemic, states have expanded their coverage of telehealth in Medicaid, a jointly financed federal-state health care program for low-income and medically needy individuals.

The CARES Act includes a provision for GAO to report on the federal response to the pandemic. In addition, GAO was asked to examine the use of Medicaid flexibilities in response to COVID-19. This report describes selected states' telehealth use before and during the pandemic, and experiences with and plans for telehealth. It also evaluates, among other things, CMS's telehealth oversight of quality of services.

GAO analyzed state-reported data on telehealth use in six states selected, in part, based on variation in geography, Medicaid program size, and percentage of population living in rural areas. GAO reviewed federal oversight documents, interviewed state and federal Medicaid officials, and assessed CMS oversight against CMS guidance on using data to identify disparities in health care and target improvements.

What GAO Recommends

GAO is making two recommendations to CMS to (1) collect and analyze information about the effect delivering services via telehealth has on the quality of care Medicaid beneficiaries receive, and (2) determine any next steps based on the results of the analysis.

View GAO-22-104700. For more information, contact Carolyn L. Yocom at (202) 512-7114 or yocomc@gao.gov.

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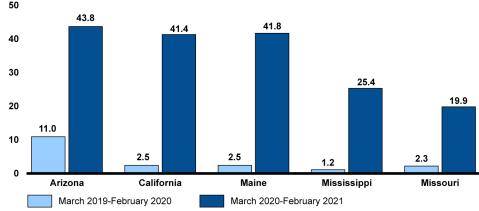
CMS Should Assess Effect of Increased Telehealth Use on Beneficiaries' Quality of Care

What GAO Found

GAO's analysis of Centers for Medicare & Medicaid Services (CMS) data in five selected states shows that the number and percentage of services delivered via telehealth and Medicaid beneficiaries receiving them increased exponentially at the beginning of the COVID-19 pandemic in March 2020. From March 2020 through February 2021, 32.5 million services were delivered via telehealth to about 4.9 million beneficiaries in the five states, compared with 2.1 million services to about 455,000 beneficiaries in the 12 months prior to the pandemic.

Percentage of Medicaid Beneficiaries Receiving at Least One of Their Services via Telehealth, March 2019 through February 2020 and March 2020 through February 2021

Percentage



Source: GAO analysis of Centers for Medicare & Medicaid Services data. | GAO-22-104700

Note: GAO determined Tennessee's data were not sufficiently reliable for purposes of this analysis.

Medicaid officials from all six selected states said expanding telehealth supported beneficiaries' access to care, but also identified some limitations. Officials reported making or considering post-pandemic telehealth modifications.

CMS does not collect, assess, or report information about any effect delivering services via telehealth has on the quality of care Medicaid beneficiaries receive and has no plans to do so. Doing so is important, given concerns GAO has raised about the quality of care provided via telehealth. It would also be consistent with how CMS has encouraged states to use data on quality of care to identify disparities in health care and target opportunities for improvement to advance health equity. These efforts could begin with data for quality measures CMS already collects or through other means.

CMS neither agreed nor disagreed with GAO's recommendations. GAO maintains it is crucial for CMS to collect and analyze information to assess telehealth's effect on the quality of care Medicaid beneficiaries receive.