



Telemedicine as an Alternative Access to Outpatient Health Care by Statutory Health Insurance Physicians - Trends in the Period 2017 to 2021

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Abstract

Background

Personal patient-physician contacts declined sharply during the COVID-19 pandemic lockdown. Legal restrictions for the use of telemedicine were lifted and at the same time financial incentives were created for panel physicians and psychotherapists to make greater use of telemedicine services. The aims of this study were to describe i) patient characteristics who used telemedicine services between 2017 and 2021, ii) the scope of telemedicine services billed, and iii) the physician specialty groups who provided telemedicine services.

Methods

According to the definition of the Working Group Telemedicine of the German Medical Association (Bundesärztekammer), telemedicine is defined as medical services that are provided over spatial distances or time shifts and for which information and communication technologies are used. 795 telemedicine services defined by fee schedule items from the Uniform Value Scale were selected for analyses. Procedures that have been in use for years, such as telephone consultation, were not included in the analyses. The data basis was the nationwide billing data of SHI-accredited physicians according to §295 of the German Social Code) Fifth Book from 2017 to 2021. The study populations were the billing SHI-accredited physicians/psychotherapists as well as the SHI-insured persons with at least one annual physician contact in Germany.

Results

In 2020 and 2021, compared to the previous years 2017 to 2019, there was a pronounced increase in the proportion of contract physicians and contract psychotherapists who offered and billed for telemedicine services to nearly 25% (2017: 4.5%). The proportion of the total fee requested for telemedicine services on overall billed services according to the Uniform Value Scale (2017: 0.0 %; 2021: 0.8%), and the proportion of patients receiving telemedicine services among all SHI-insurants (2017: 0.2%; 2021: 1.9%) also increased strongly compared with the previous years 2017 to 2019. However, both metrics remained at very low levels below 2%. The telemedicine services provided within the scope of the COVID-19 pandemic since 2020 are predominantly assigned to the psychotherapeutic care sector. The average annual fee demand per patient for all billed services (telemedicine and other



services) for patients with telemedicine services was above average (2021: 1,777 euros) compared to the rest of the SHI-insured population (2021: 594 euros). The considerable increase in the number of patients with billing for telemedicine services in the first pandemic year 2020 is largely attributable to those patients for whom telemedicine was prescribed for the first time in 2020. Nearly half of the fee-for-service claims for new telehealth patients in 2020 were for psychotherapy, some of which was provided telehealth or in-person in physician offices of all telemedicine patients, 39% were residing in large cities. Telemedicine patients were younger than patients without telemedicine services (mean age 42 vs. 46 years) regardless of place of residence. The proportion of women was higher among telemedicine patients than patients without telemedicine (63% vs. 54%).

Conclusion

Under the changed conditions of the COVID-19 pandemic (2020 to the end of the 2021 period examined here), telemedicine services were offered and billed by significantly more panel physicians/psychotherapists than before 2020. Telemedicine was quickly implemented in the acute phase of the pandemic in 2020 by panel physicians and psychotherapists, especially in psychotherapy as an alternative to the existing mode of personal physician contact. After a certain trial period in times of crisis, it remains to be observed what role telemedicine will play in the future and what significance it can acquire in the field of psychotherapy, but also in other specialist groups. According to preliminary data analyses, the number of video consultations declined again in the first half of 2022.

Keywords

COVID-19, uniform value scale, primary care, psychotherapy, teleconsultation, telemedicine, trend analysis, video consultation

Citation

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