



Mike DeWine, Governor  
Jon Husted, Lt. Governor

Maureen Corcoran, Director

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**Lisa Lawless, Communications Director, Ohio Department of Medicaid**  
614-813-5358 | [lisa.lawless@medicaid.ohio.gov](mailto:lisa.lawless@medicaid.ohio.gov)

**Kevin R. Walter, Press Secretary, Ohio Department of Medicaid**  
614-752-3688 | [kevin.walter@medicaid.ohio.gov](mailto:kevin.walter@medicaid.ohio.gov)

**One year after expansion, Medicaid providers and their patients continue to embrace telehealth**  
*New rules pay off during time of restricted in-person doctor visits*

**COLUMBUS, Ohio** — More than 860,000 Medicaid members have taken advantage of telehealth services filing more than 5.8 million claims in the year since Gov. Mike DeWine reduced restrictions on online medical visits due to the pandemic, the Ohio Department of Medicaid announced today.

“It’s clear that the expansion of medically appropriate telehealth services has resulted in an increase in access to quality care,” said Ohio Medicaid Director Maureen Corcoran. “It not only has allowed us to maintain needed services in urban settings but has increased access to care for members in rural communities and small towns. It has helped to ensure that Ohioans served by Medicaid can receive needed services at a time when office visits are more difficult.”

As the state addressed emerging health threats due to coronavirus, Governor DeWine on March 19, 2020 enacted an emergency telehealth rule to protect Ohioans from the virus without disrupting care. The new rules, which the agency made permanent in September, allow Medicaid practitioners to use telehealth for many services previously limited to in-person visits, including services delivered via email, telephone, and commonly used internet conferencing platforms.

“Patients receiving behavioral and mental health services, which are much less dependent on in-office visits than those for assessment of physical ailments, have especially benefited from the expanded telehealth rules,” said Mary Applegate, M.D., the agency’s medical director.

“At a time when overall medical utilization has decreased, Medicaid services for behavioral and mental health have stayed steady for both children and adults,” Applegate said. “And, the number of persons missing appointments has actually decreased. Telehealth has been critical to these members during the pandemic, since we know members with behavioral and mental health care needs, including those battling addiction, are most vulnerable to the isolation and economic pressures resulting from COVID-19.”

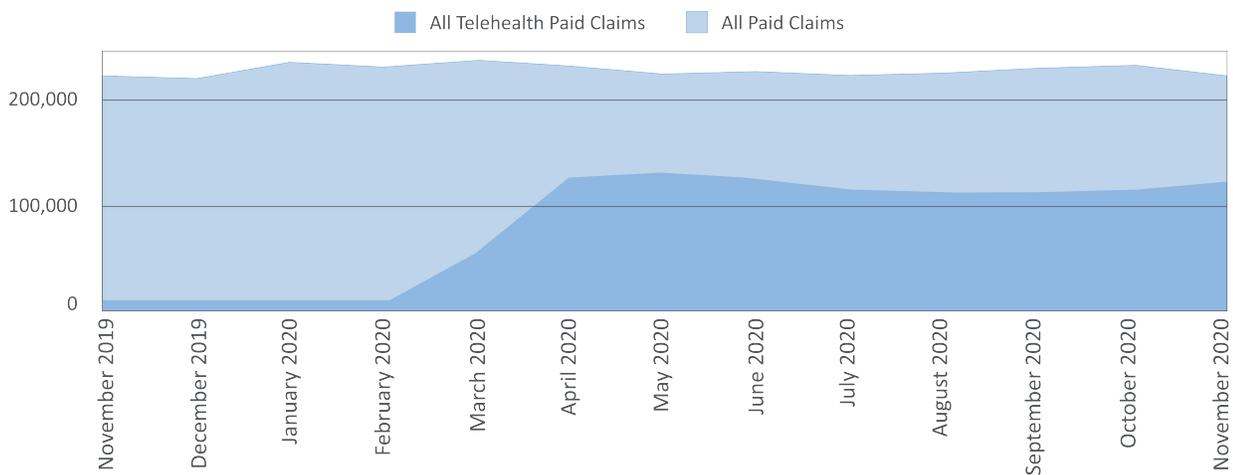
Of the total number of Ohioans filing Medicaid claims for telehealth services since the beginning of the public health emergency, 3.3 million services were rendered from Ohio Department of Mental Health and Addiction Services behavioral health providers. That compares to pre-emergency numbers showing Medicaid providers averaged fewer than 1,000 telehealth claims per month for physical health services, and 4,000 telehealth claims per month for mental health and addiction services.

Telehealth adoption has grown exponentially in areas of the state equipped with broadband infrastructure. For example:

- Less than 1% of Medicaid recipients received telehealth services prior to the telehealth emergency rule expansion; as of the end of December this has grown to about 22%.
- Medicaid use of telehealth services grew 35 times, from an average of less than 8,000 per month prior to the pandemic, to 273,698 per month in December.
- Medicaid providers who billed for telehealth services increased approximately almost 22 times, from 250 providers in January, to 5,537 by December.

While telehealth is not appropriate for all medical services, “Telemedicine is an increasingly important way to deliver needed care, just as working from home has been essential during the pandemic,” Corcoran said. “We’re committed to ensuring members can conveniently access quality health care services – especially mental health and addiction services in a time of additional stress – and telehealth is making a big difference for Ohioans.”

**Mental Health and Addiction Services Telehealth as a Proportion of Overall Services**  
 Monthly Counts of Patients Using Services



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