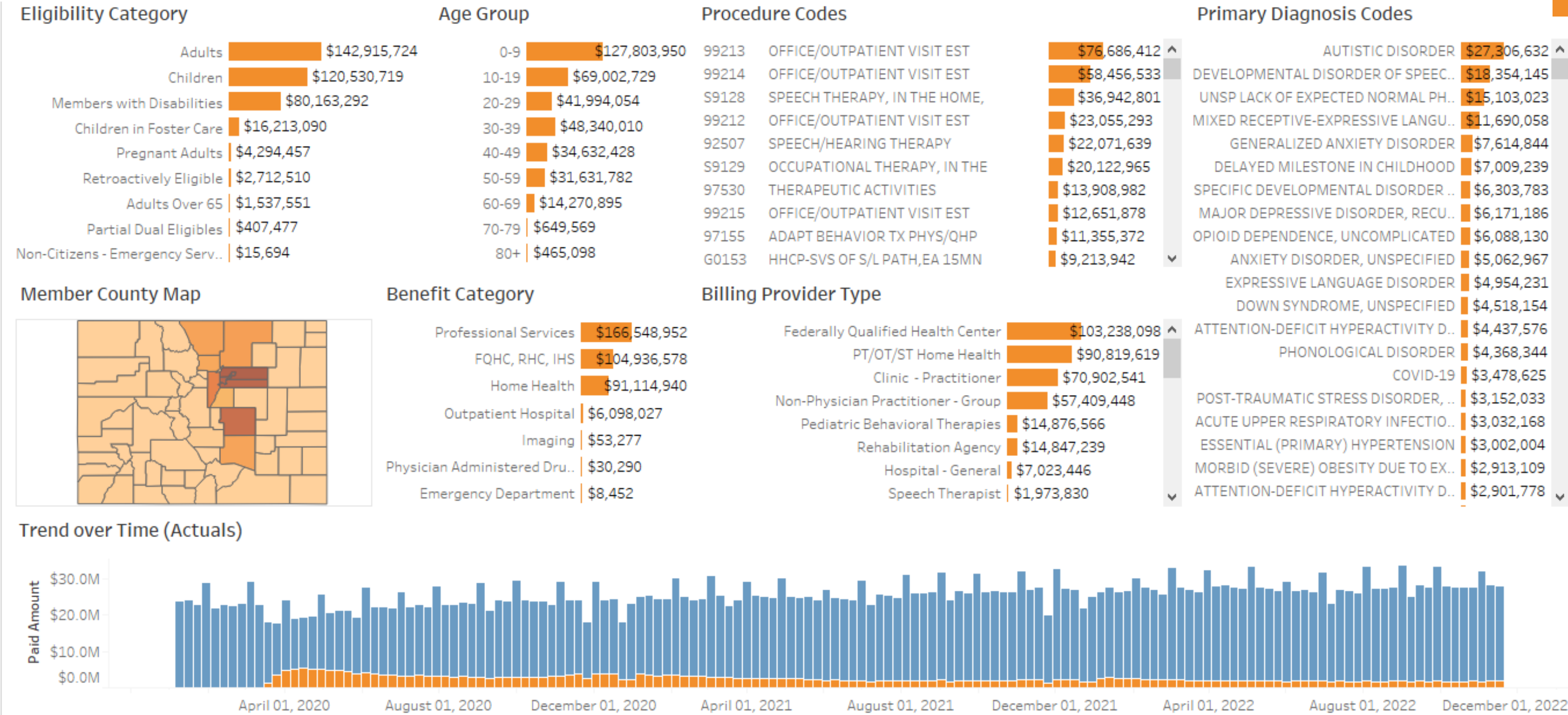


Outpatient and Professional Services Eligible for Telemedicine

Service Type
Not Telemedicine
Telemedicine



Member County Map

Benefit Category

Professional Services

\$166,548,952

FQHC, RHC, IHS

\$104,936,578

Home Health

\$91,114,940

Outpatient Hospital

\$6,098,027

Imaging

\$53,277

Physician Administered Dru..

\$30,290

Emergency Department

\$8,452

Billing Provider Type

Federally Qualified Health Center

\$103,238,098

PT/OT/ST Home Health

\$90,819,619

Clinic - Practitioner

\$70,902,541

Non-Physician Practitioner - Group

\$57,409,448

Pediatric Behavioral Therapies

\$14,876,566

Rehabilitation Agency

\$14,847,239

Hospital - General

\$7,023,446

Speech Therapist

\$1,973,830

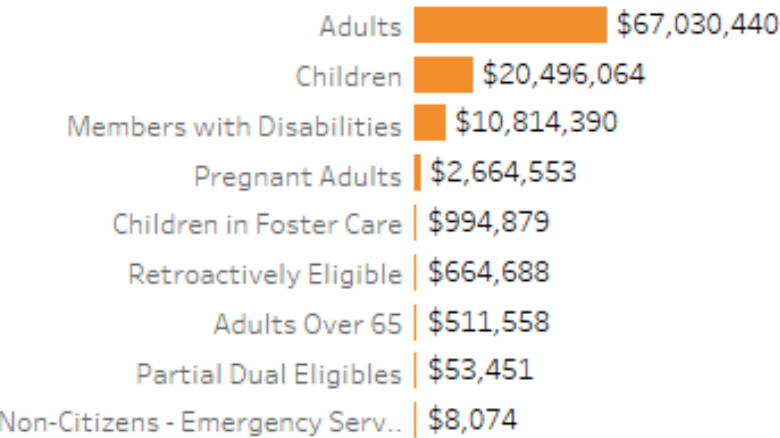
Trend over Time (Actuals)

Note: Only includes Fee-For-Service services eligible for telemedicine. HCBS and Case Management Agencies do not indicate which services provided are telemedicine and therefore have been excluded from the above graph. Dental services are excluded. Trend graph shows service dates from 1/5/20 through 11/19/22. All other graphs include service dates from 1/5/20 through 1/21/23. Due to limited claims run-out, paid amounts may change over time. For outpatient services, only outpatient claim lines with the 'GT' modifier or with a telemedicine-specific procedure code were identified as telemedicine. Due to the fact that outpatient crossover paid amounts are only available at the claim header level, the header level paid amount has been distributed evenly among each claim line for the purposes of reporting paid amounts at the line level. This methodology may not be an accurate reflection of the actual distribution of costs among outpatient crossover claim lines.

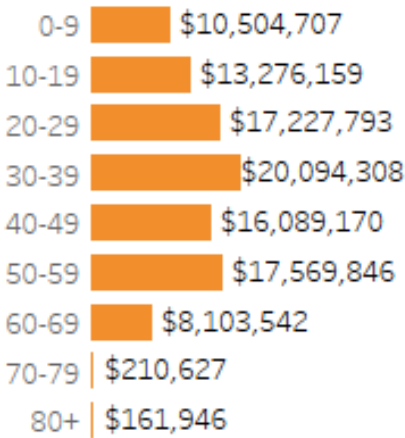
Federally Qualified Health Centers

Service Type
■ Not Telemedicine
■ Telemedicine

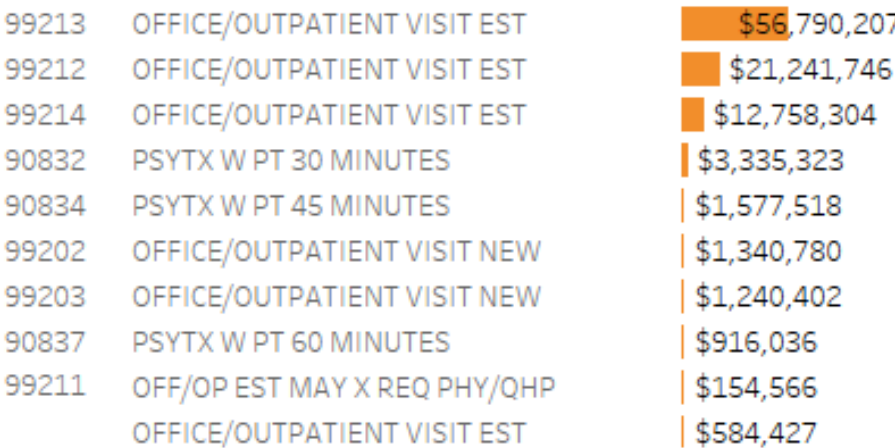
Eligibility Category



Age Group



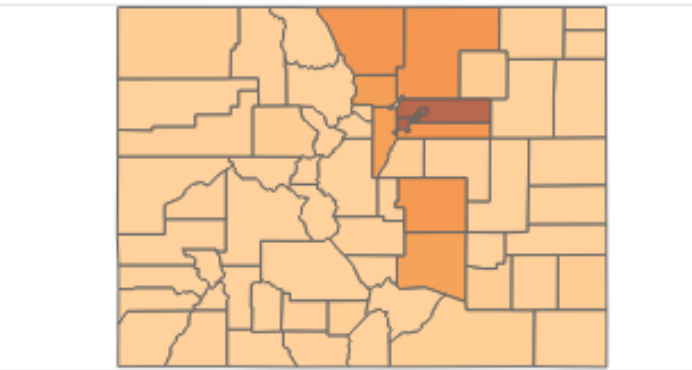
Procedure Codes



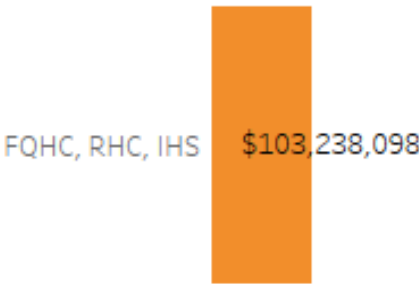
Primary Diagnosis Codes



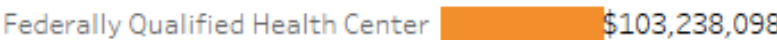
Member County Map



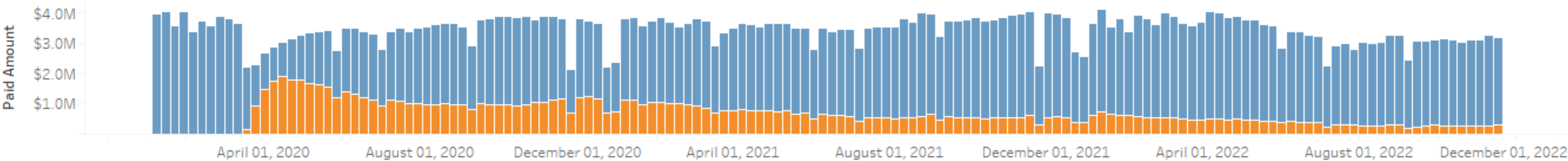
Benefit Category



Billing Provider Type



Trend over Time (Actuals)



Note: Only includes Fee-For-Service services eligible for telemedicine. Dental services are excluded. Trend graph shows service dates from 1/5/20 through 11/19/22. All other graphs include service dates from 1/5/20 through 1/21/23. Due to limited claims run-out, paid amounts may change over time. For outpatient services, only outpatient claim lines with the 'GT' modifier or with a telemedicine-specific procedure code were identified as telemedicine. Due to the fact that outpatient crossover paid amounts are only available at the claim header level, the header level paid amount has been distributed evenly among each claim line for the purposes of reporting paid amounts at the line level. This methodology may not be an accurate reflection of the actual distribution of costs among outpatient crossover claim lines.

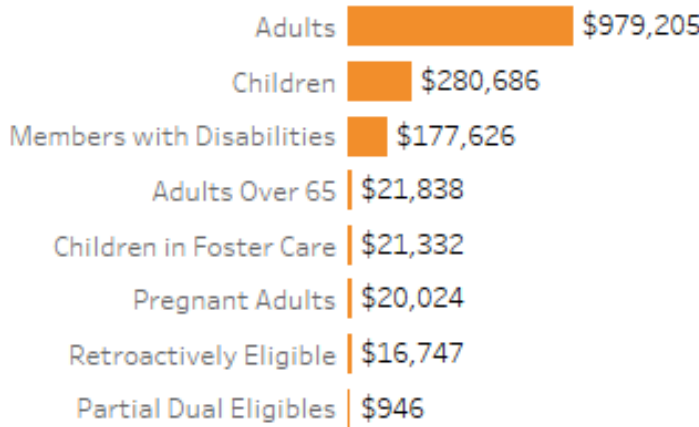
Rural Health Clinics

Service Type

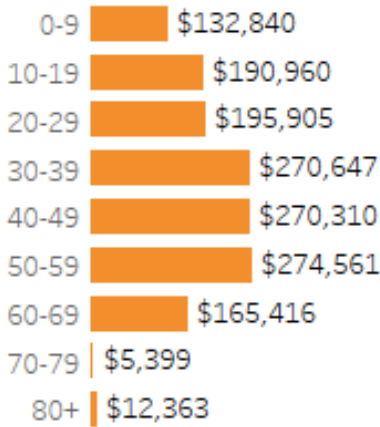
Not Telemedicine

Telemedicine

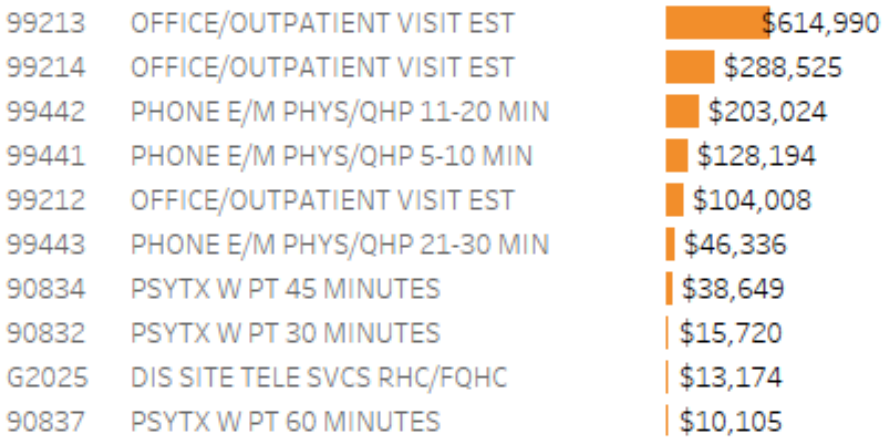
Eligibility Category



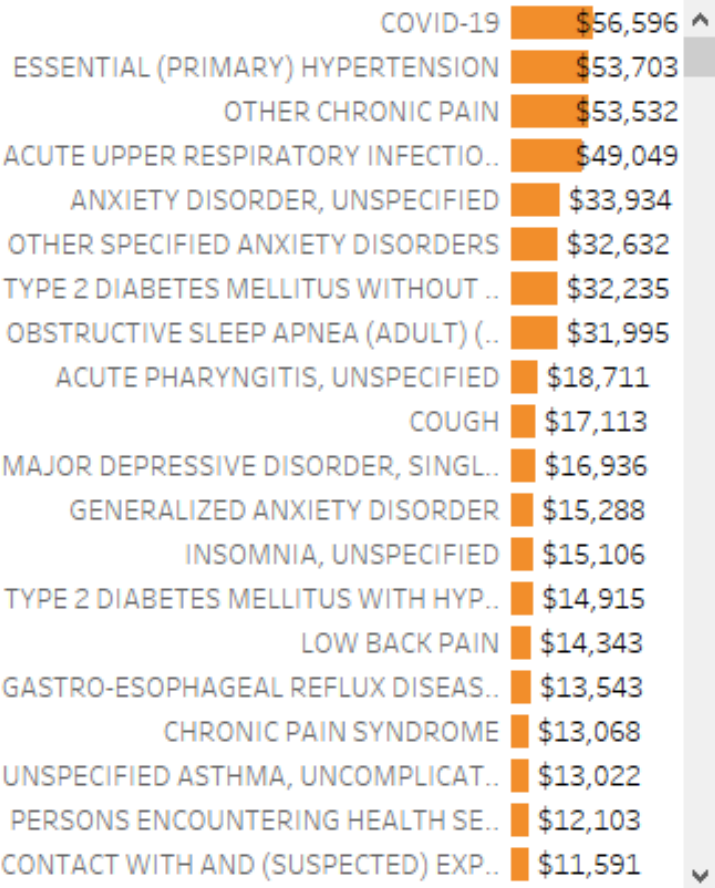
Age Group



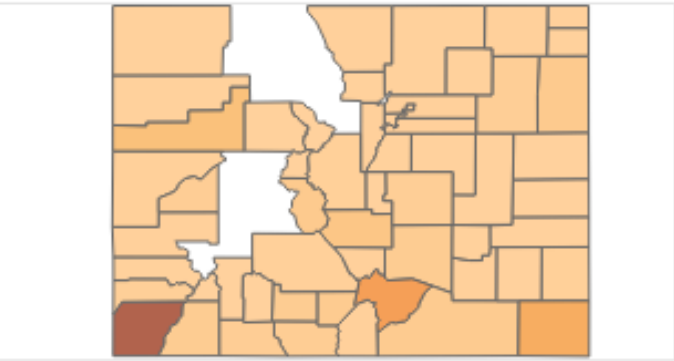
Procedure Codes



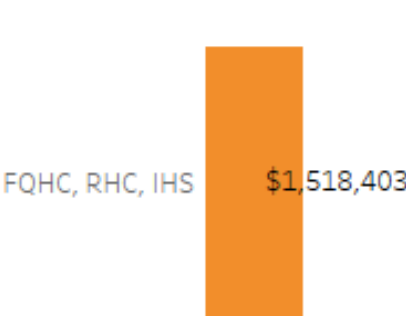
Primary Diagnosis Codes



Member County Map



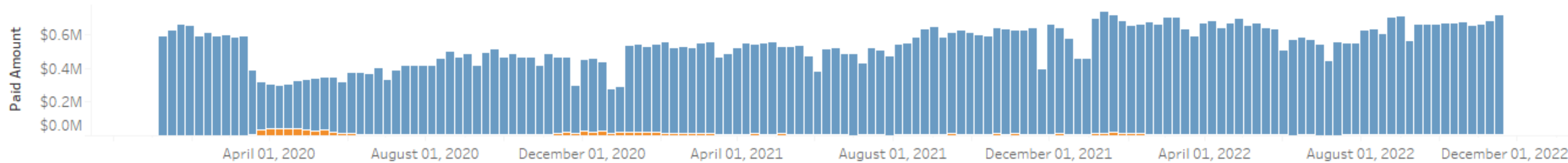
Benefit Category



Billing Provider Type



Trend over Time (Actuals)

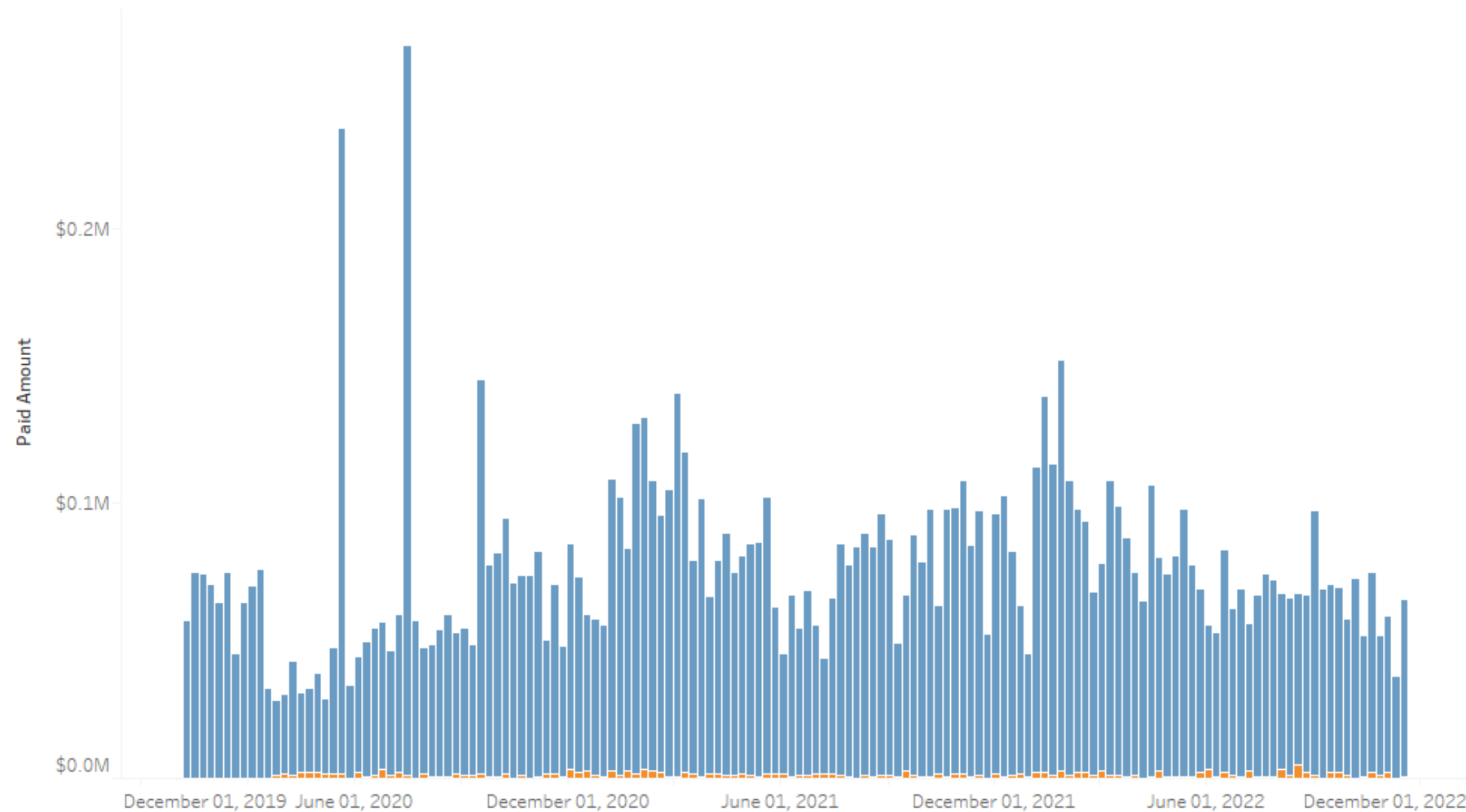


Note: Only includes Fee-For-Service services eligible for telemedicine. Dental services are excluded. Trend graph shows service dates from 1/5/20 through 11/19/22. All other graphs include service dates from 1/5/20 through 1/21/23. Due to limited claims run-out, paid amounts may change over time. For outpatient services, only outpatient claim lines with the 'GT' modifier or with a telemedicine-specific procedure code were identified as telemedicine. Due to the fact that outpatient crossover paid amounts are only available at the claim header level, the header level paid amount has been distributed evenly among each claim line for the purposes of reporting paid amounts at the line level. This methodology may not be an accurate reflection of the actual distribution of costs among outpatient crossover claim lines.

Indian Health Services

Service Type
■ Not Telemedicine
■ Telemedicine

Trend over Time (Actuals)

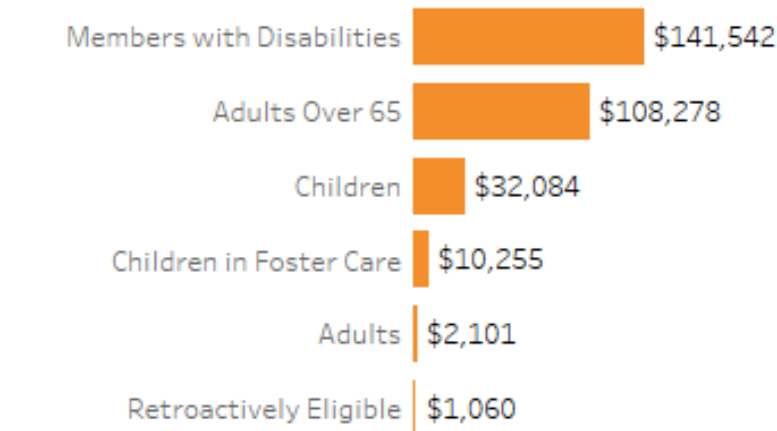


Note: Due to data issues, this graph does not accurately capture all telemedicine services provided by IHS. Only includes Fee-For-Service services eligible for telemedicine. Dental services are excluded. Data shows service dates from 1/5/20 through 11/19/22. Due to limited claims run-out, paid amounts may change over time. For outpatient services, only outpatient claim lines with the 'GT' modifier or with a telemedicine-specific procedure code were identified as telemedicine. Due to the fact that outpatient crossover paid amounts are only available at the claim header level, the header level paid amount has been distributed evenly among each claim line for the purposes of reporting paid amounts at the line level. This methodology may not be an accurate reflection of the actual distribution of costs among outpatient crossover claim lines.

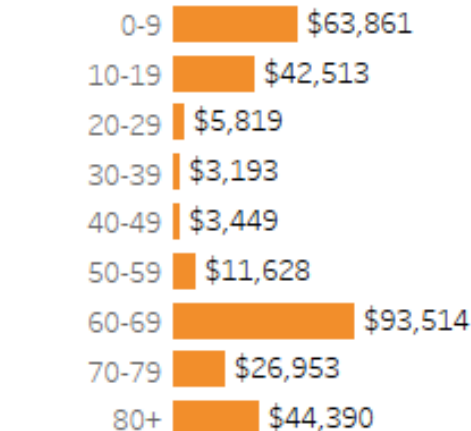
Certified Nursing Assistant/Registered Nurse Home Health

Service Type
Not Telemedicine
Telemedicine

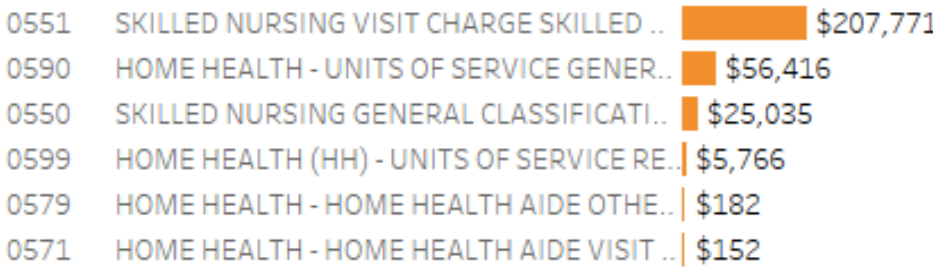
Eligibility Category



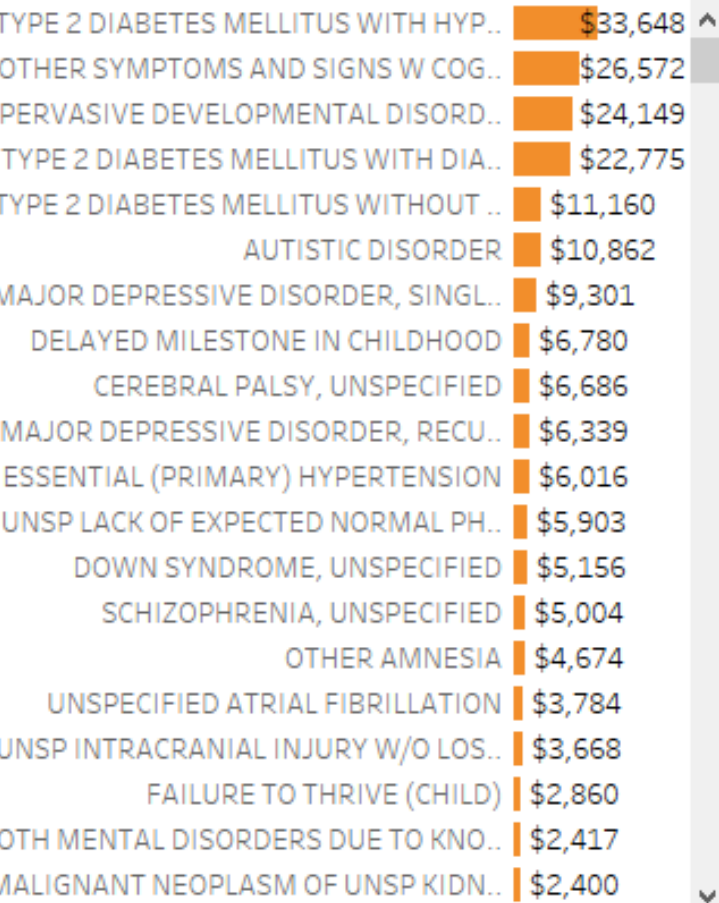
Age Group



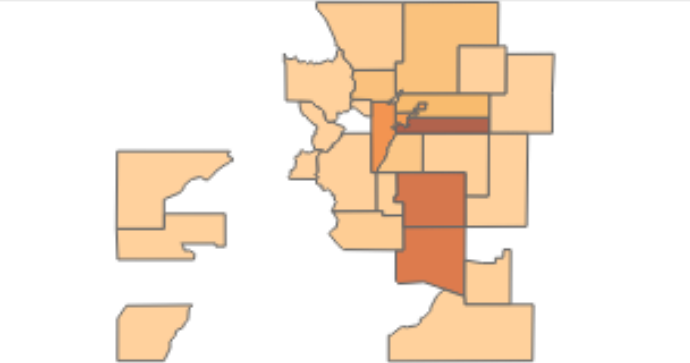
Revenue Codes



Primary Diagnosis Codes



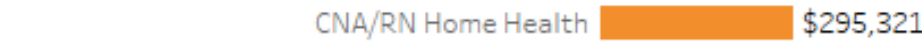
Member County Map



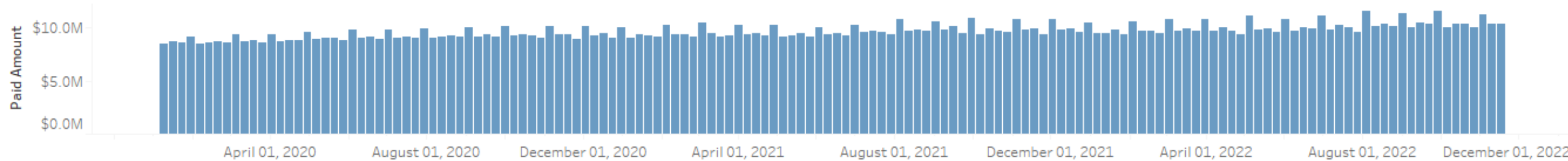
Benefit Category



Billing Provider Type



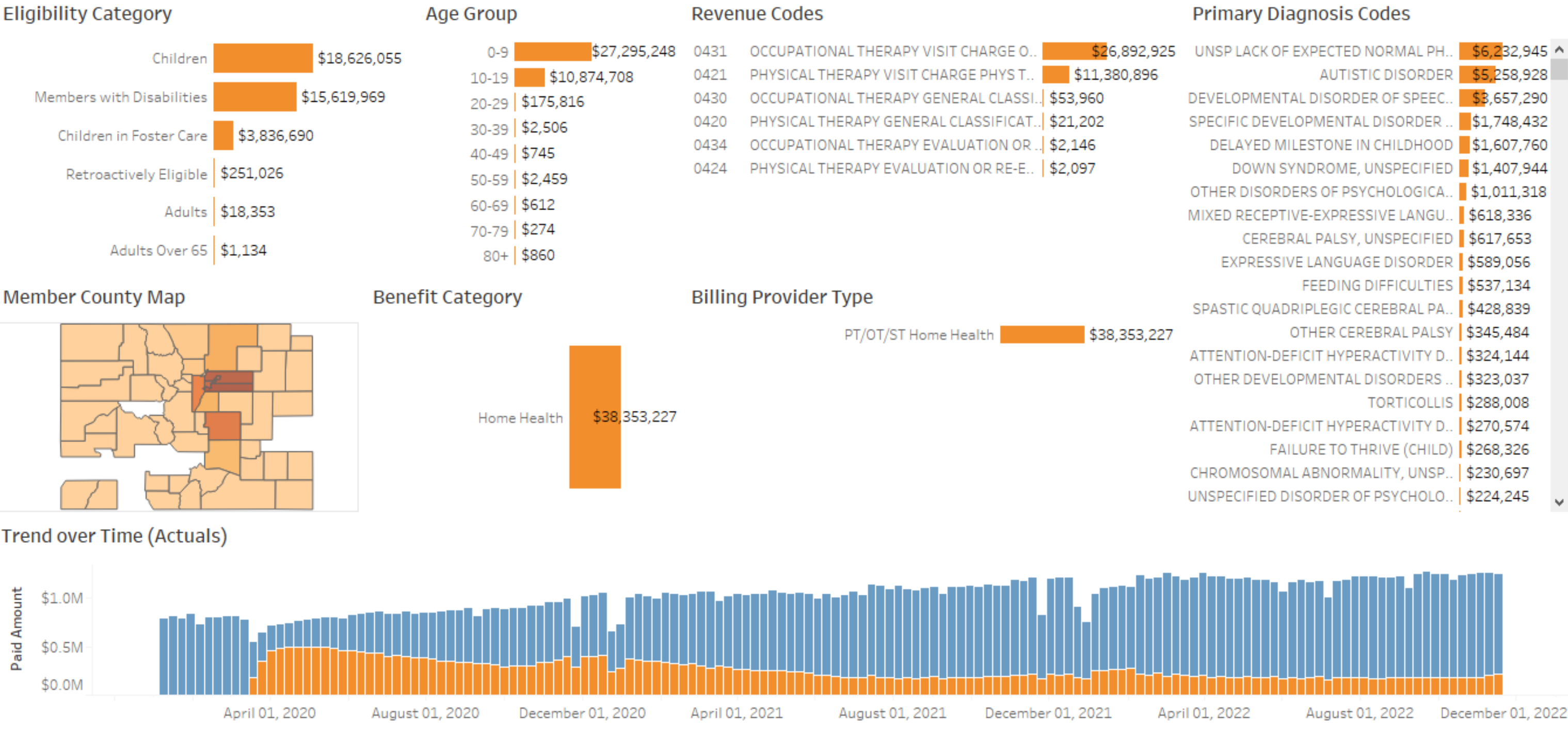
Trend over Time (Actuals)



Note: Only includes Fee-For-Service services eligible for telemedicine. Trend graph shows service dates from 1/5/20 through 11/19/22. All other graphs include service dates from 1/5/20 through 1/21/23. Due to limited claims run-out, paid amounts may change over time. For outpatient services, only outpatient claim lines with the ‘GT’ modifier or with a telemedicine-specific procedure code were identified as telemedicine. Due to the fact that outpatient crossover paid amounts are only available at the claim header level, the header level paid amount has been distributed evenly among each claim line for the purposes of reporting paid amounts at the line level. This methodology may not be an accurate reflection of the actual distribution of costs among outpatient crossover claim lines.

Physical Therapy/Occupational Therapy Home Health

Service Type
■ Not Telemedicine
■ Telemedicine



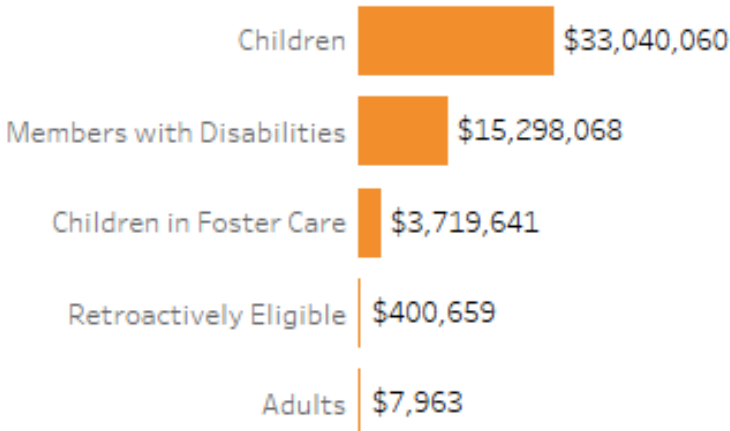
Trend over Time (Actuals)

Note: Only includes Fee-For-Service services eligible for telemedicine. Trend graph shows service dates from 1/5/20 through 11/19/22. All other graphs include service dates from 1/5/20 through 1/21/23. Due to limited claims run-out, paid amounts may change over time. For outpatient services, only outpatient claim lines with the 'GT' modifier or with a telemedicine-specific procedure code were identified as telemedicine. Due to the fact that outpatient crossover paid amounts are only available at the claim header level, the header level paid amount has been distributed evenly among each claim line for the purposes of reporting paid amounts at the line level. This methodology may not be an accurate reflection of the actual distribution of costs among outpatient crossover claim lines.

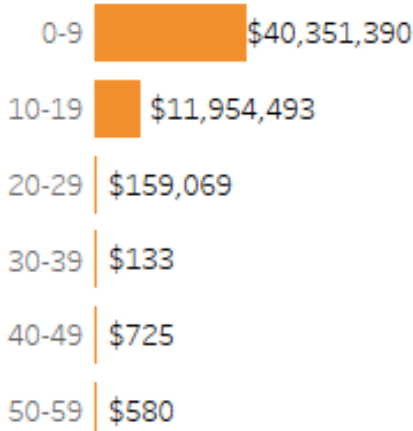
Speech Therapy Home Health

Service Type
■ Not Telemedicine
■ Telemedicine

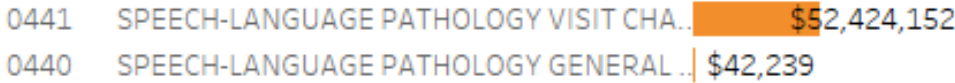
Eligibility Category



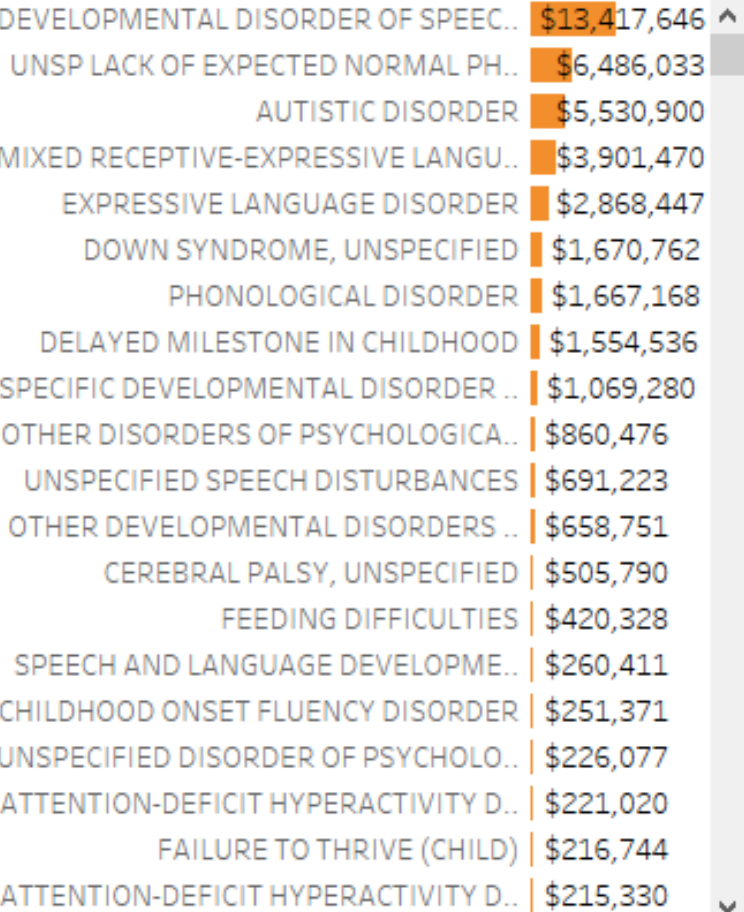
Age Group



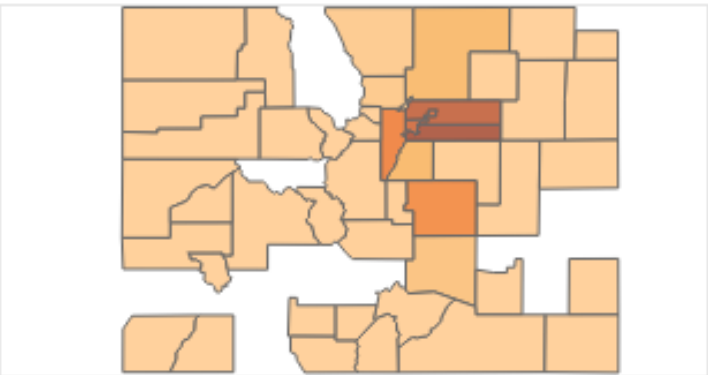
Revenue Codes



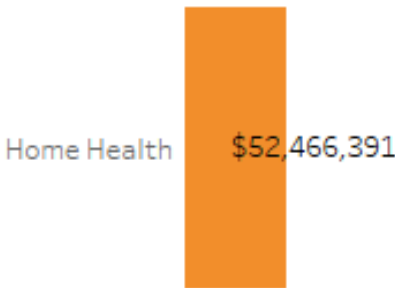
Primary Diagnosis Codes



Member County Map



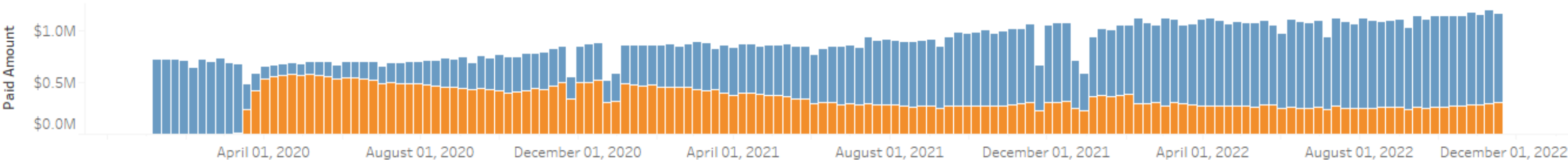
Benefit Category



Billing Provider Type



Trend over Time (Actuals)

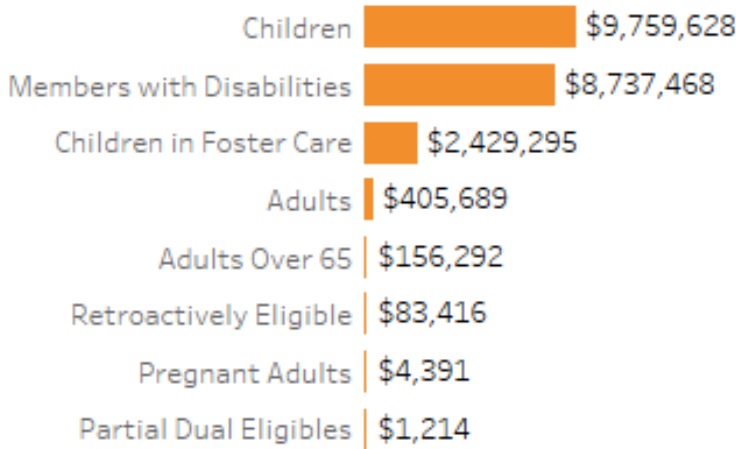


Note: Only includes Fee-For-Service services eligible for telemedicine. Trend graph shows service dates from 1/5/20 through 11/19/22. All other graphs include service dates from 1/5/20 through 1/21/23. Due to limited claims run-out, paid amounts may change over time. For outpatient services, only outpatient claim lines with the 'GT' modifier or with a telemedicine-specific procedure code were identified as telemedicine. Due to the fact that outpatient crossover paid amounts are only available at the claim header level, the header level paid amount has been distributed evenly among each claim line for the purposes of reporting paid amounts at the line level. This methodology may not be an accurate reflection of the actual distribution of costs among outpatient crossover claim lines.

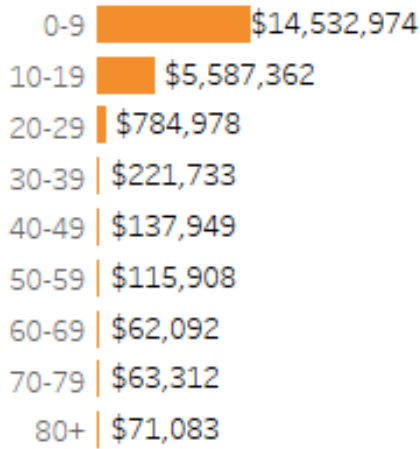
Physical Therapy/Occupational Therapy

Service Type
■ Not Telemedicine
■ Telemedicine

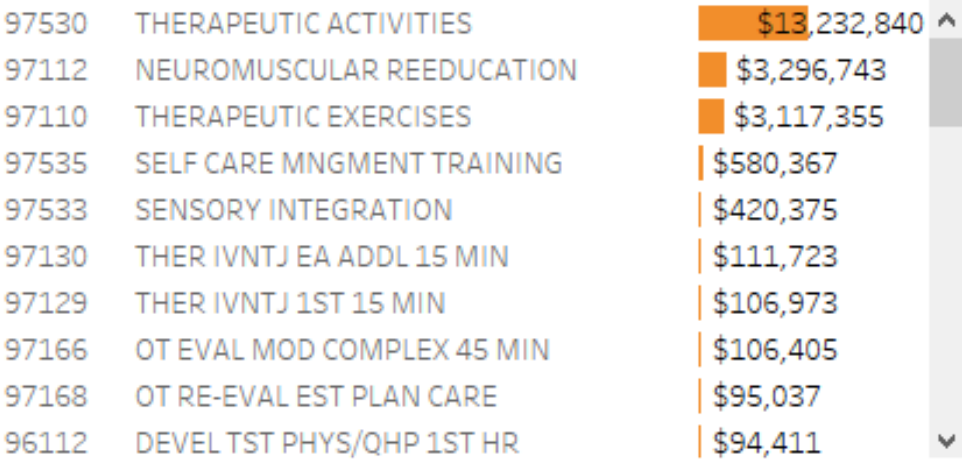
Eligibility Category



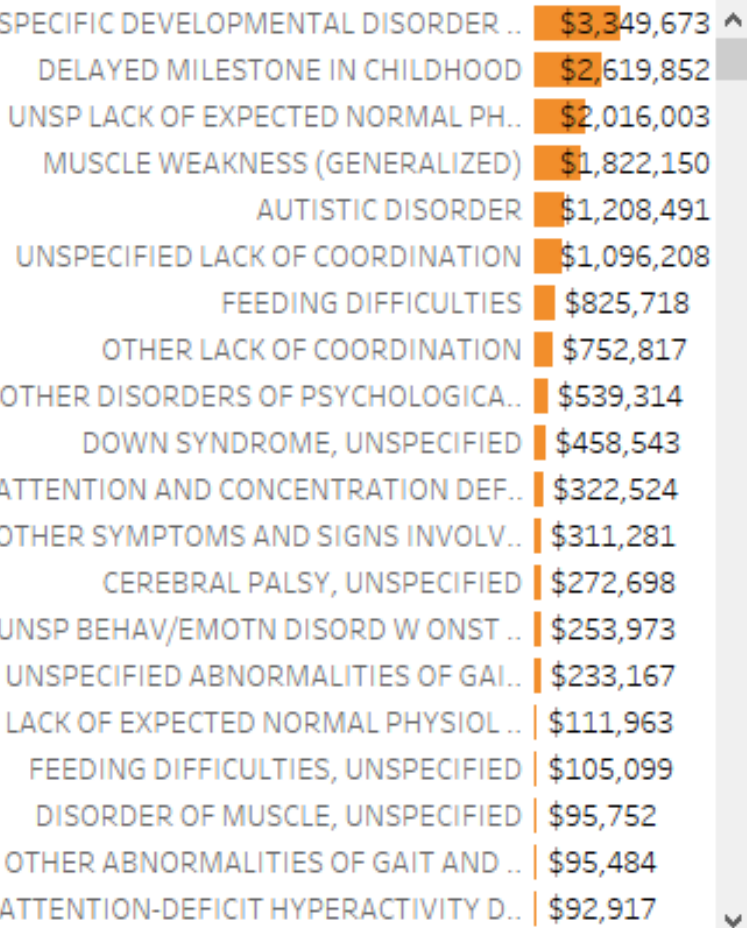
Age Group



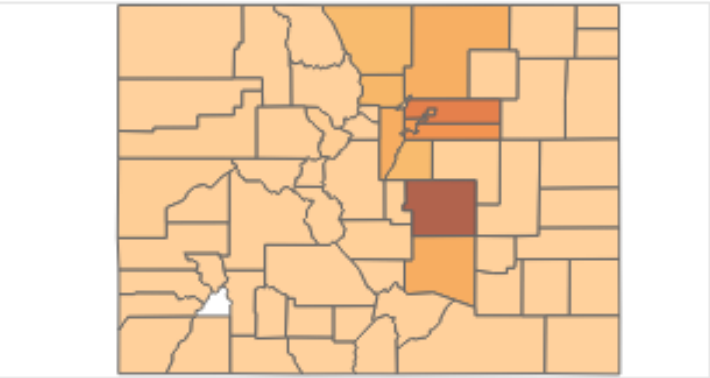
Procedure Codes



Primary Diagnosis Codes



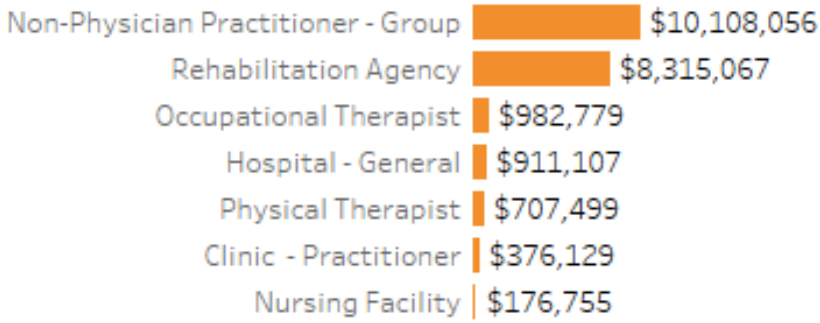
Member County Map



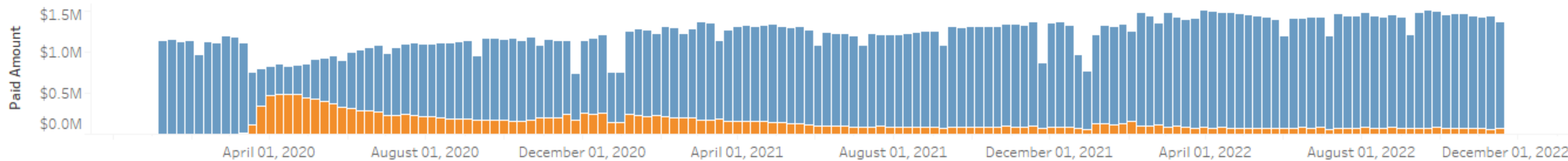
Benefit Category



Billing Provider Type



Trend over Time (Actuals)

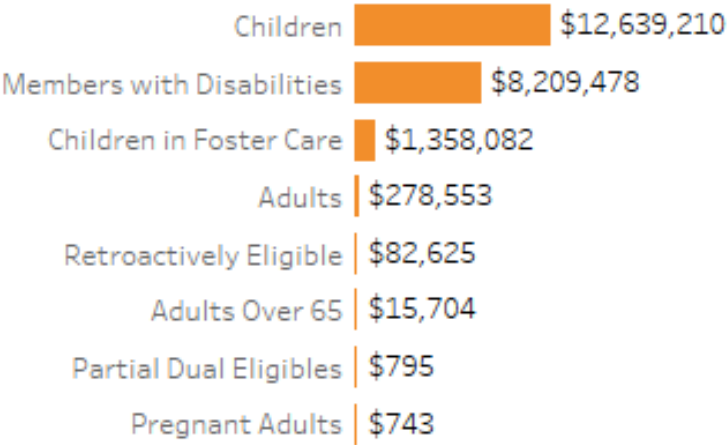


Note: Only includes Fee-For-Service services eligible for telemedicine. Trend graph shows service dates from 1/5/20 through 11/19/22. All other graphs include service dates from 1/5/20 through 1/21/23. Due to limited claims run-out, paid amounts may change over time. For outpatient services, only outpatient claim lines with the 'GT' modifier or with a telemedicine-specific procedure code were identified as telemedicine. Due to the fact that outpatient crossover paid amounts are only available at the claim header level, the header level paid amount has been distributed evenly among each claim line for the purposes of reporting paid amounts at the line level. This methodology may not be an accurate reflection of the actual distribution of costs among outpatient crossover claim lines.

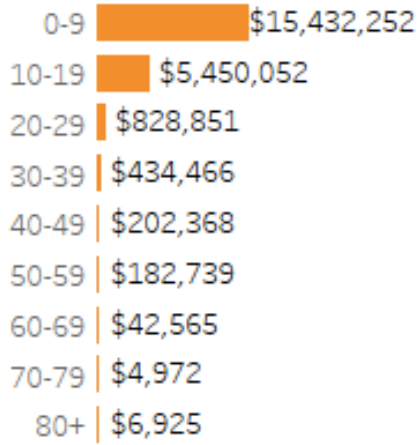
Speech Therapy

Service Type
■ Not Telemedicine
■ Telemedicine

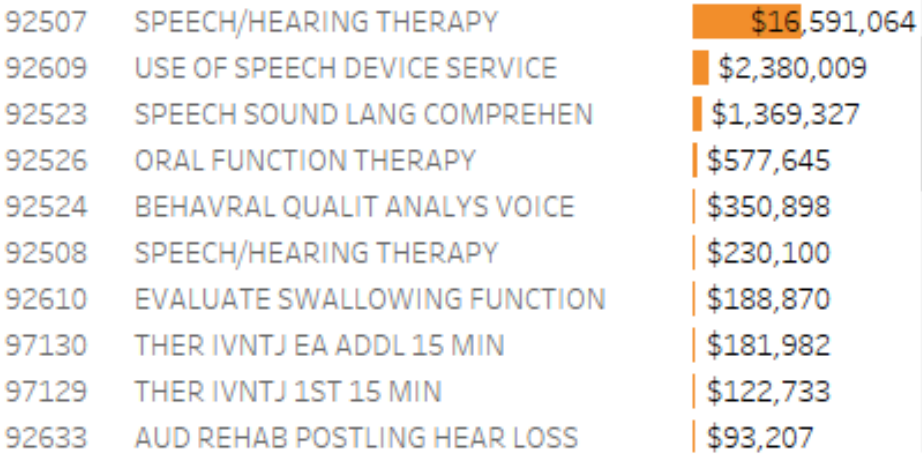
Eligibility Category



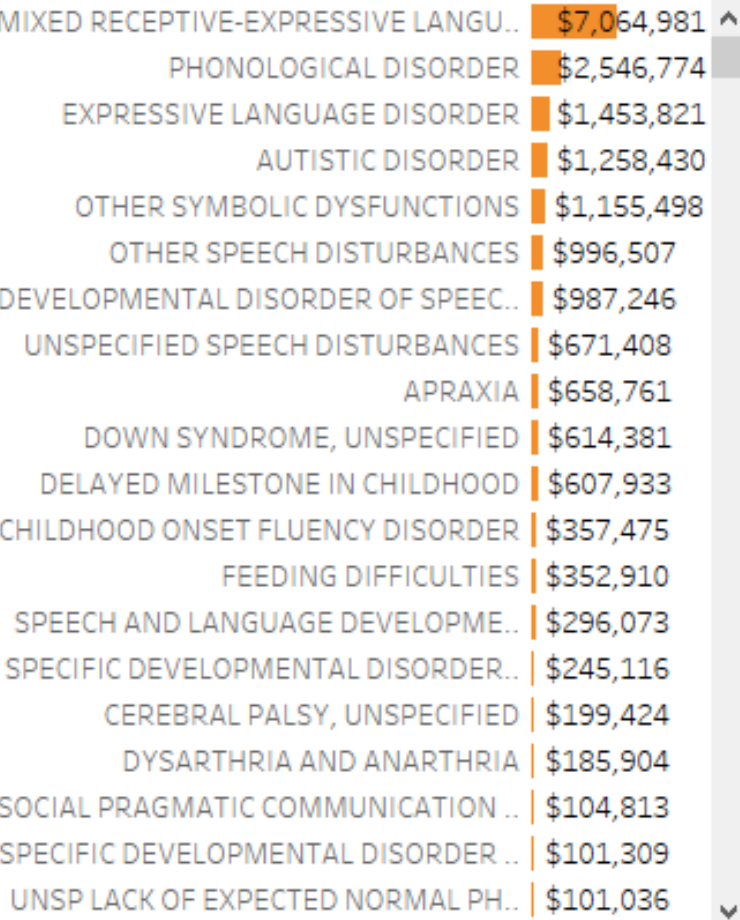
Age Group



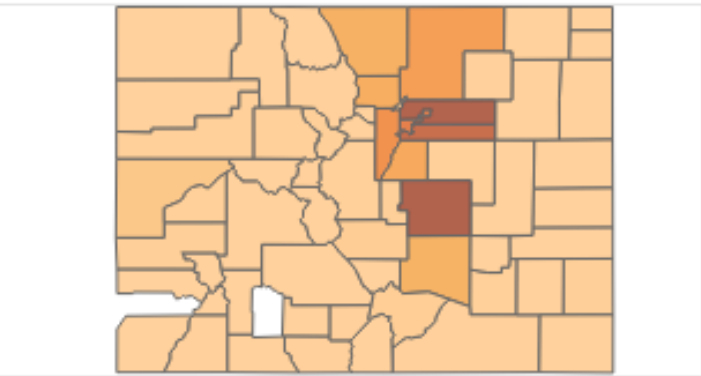
Procedure Codes



Primary Diagnosis Codes



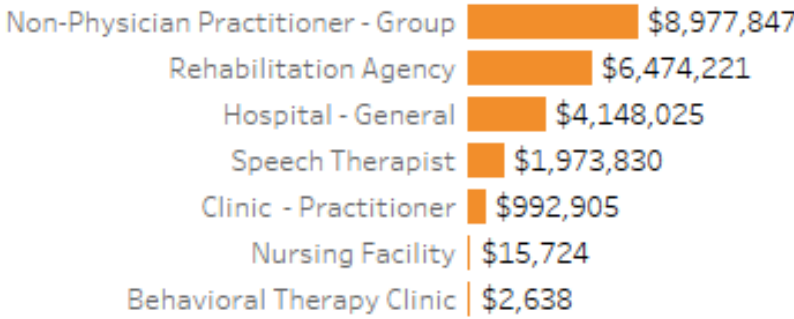
Member County Map



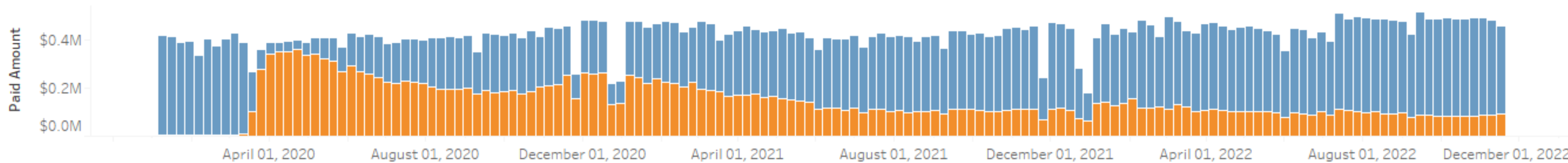
Benefit Category



Billing Provider Type



Trend over Time (Actuals)



Note: Only includes Fee-For-Service services eligible for telemedicine. Trend graph shows service dates from 1/5/20 through 11/19/22. All other graphs include service dates from 1/5/20 through 1/21/23. Due to limited claims run-out, paid amounts may change over time. For outpatient services, only outpatient claim lines with the 'GT' modifier or with a telemedicine-specific procedure code were identified as telemedicine. Due to the fact that outpatient crossover paid amounts are only available at the claim header level, the header level paid amount has been distributed evenly among each claim line for the purposes of reporting paid amounts at the line level. This methodology may not be an accurate reflection of the actual distribution of costs among outpatient crossover claim lines.

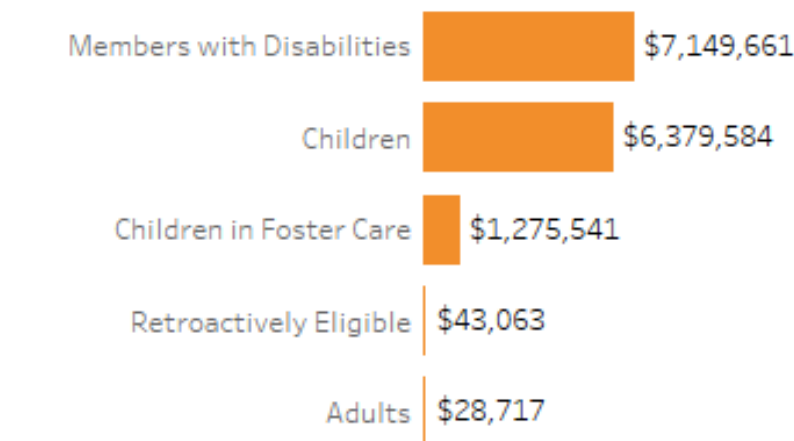
Pediatric Behavioral Therapy

Service Type

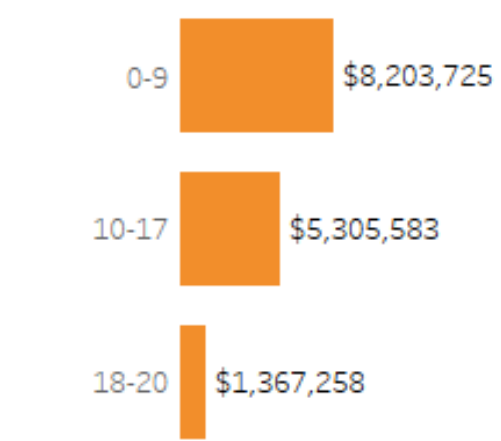
Not Telemedicine

Telemedicine

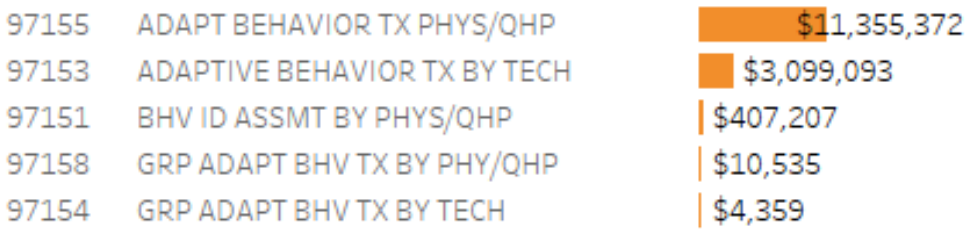
Eligibility Category



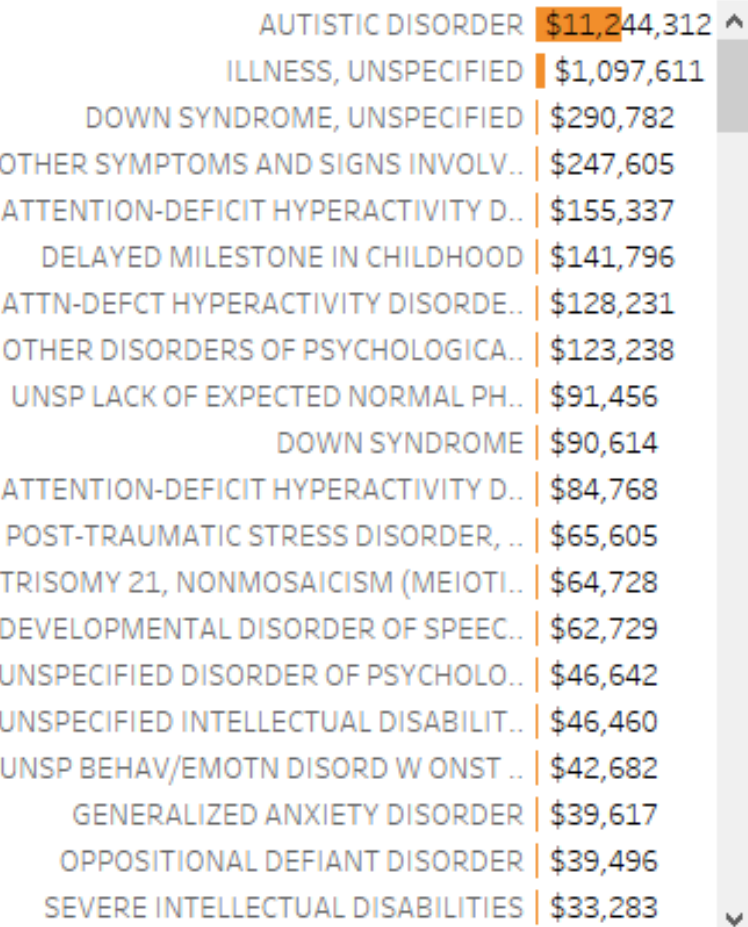
Age Group



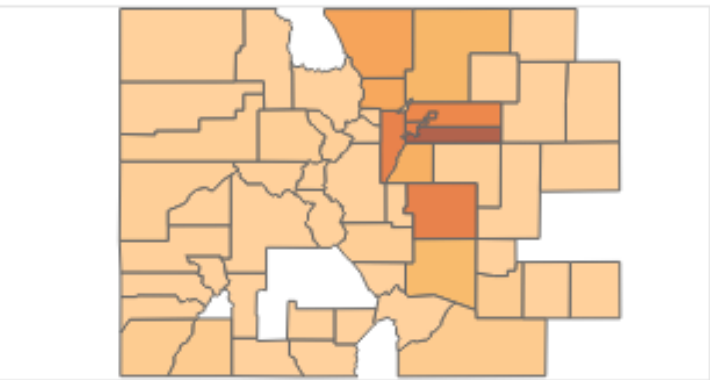
Procedure Codes



Primary Diagnosis Codes



Member County Map



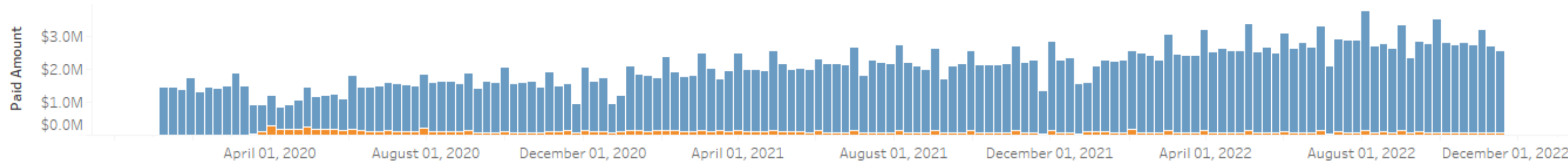
Benefit Category



Billing Provider Type



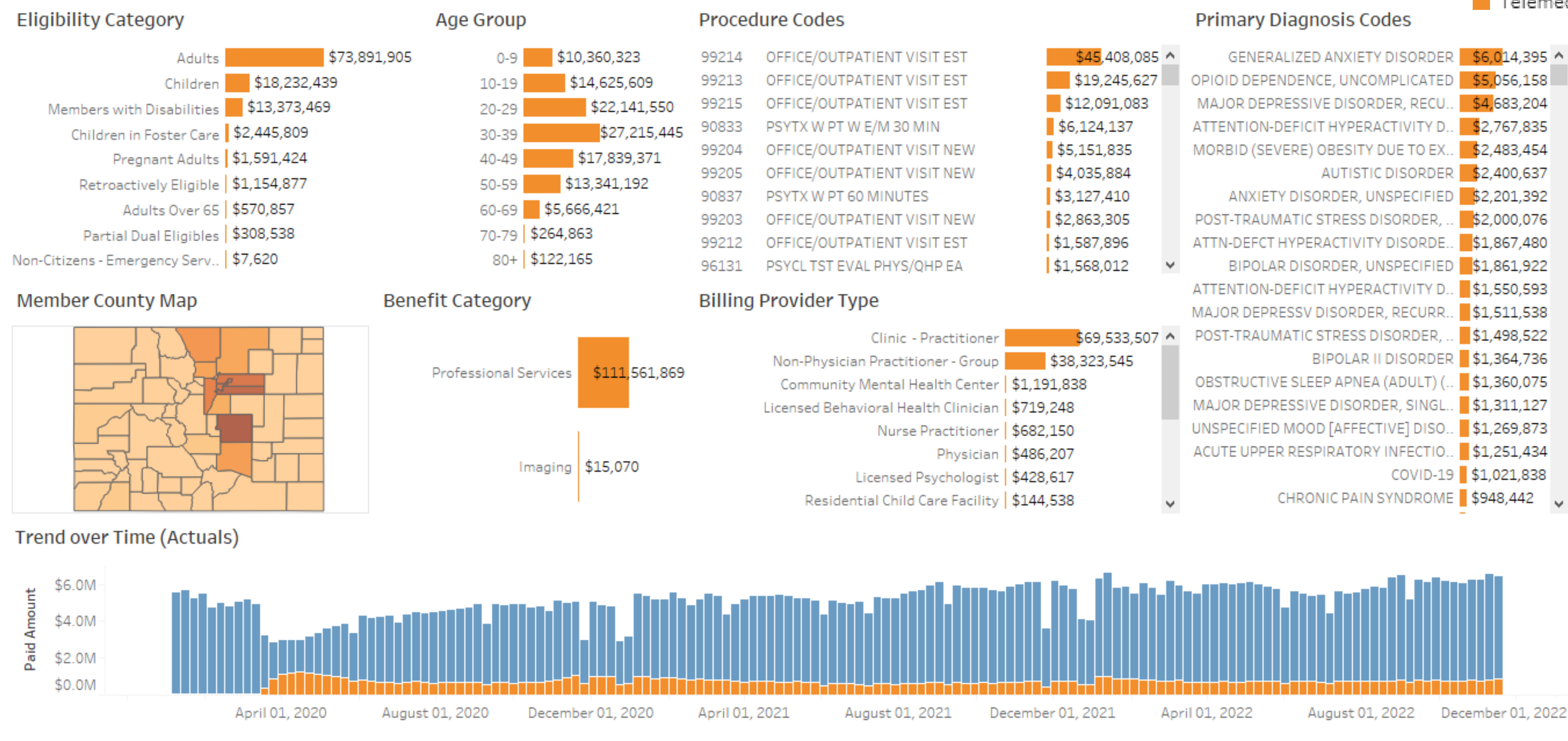
Trend over Time (Actuals)



Note: Only includes Fee-for-Service services eligible for telemedicine. Trend graph shows service dates from 1/5/20 through 11/19/22. All other graphs include service dates from 1/5/20 through 1/21/23. Due to limited claims run-out, paid amounts may change over time. HCBS and Case Management Agencies do provide telemedicine services but do not indicate them as such on the claim, and therefore have been excluded in the above graphs.

Fee Schedule Medical Providers and Other Professional Services

Service Type
■ Not Telemedicine
■ Telemedicine



Note: Only includes Fee-for-Service services eligible for telemedicine. Trend graph shows service dates from 1/5/20 through 11/19/22. All other graphs include service dates from 1/5/20 through 1/21/23. Due to limited claims run-out, paid amounts may change over time. HCBS and Case Management Agencies do provide telemedicine services but do not indicate them as such on the claim, and therefore have been excluded in the above graphs.