



Benchmarking Telehealth Usage in Virginia

DATA FINDINGS

The **Virginia Telehealth Network (VTN)** conducts a periodic survey of active licensed health care providers across the Commonwealth to better understand Virginia's current and future needs with virtual care. This research effort is intended to inform and enhance telehealth policy and planning in Virginia to best reflect provider perspective regarding current and future opportunities in telehealth. This research was supported by the [Virginia Department of Health Professions](#) and the [Virginia Department of Health](#).

The fourth iteration of this benchmarking survey was conducted 12/20/2025 to 1/30/2026. It was distributed via Typeform and received 5,474 responses.

For results of prior benchmarking surveys, visit ehealthvirginia.org/telehealth-survey.

We would like to thank the [Mid-Atlantic Telehealth Resource Center](#), the [Medical Society of Virginia](#), the [Virginia Radiological Society](#), and the [Virginia Rural Health Association](#) for their support in distributing this survey.

Choose the option that best applies:	N	%
I currently see patients.	4,956	90.5%
I do not currently see patients.	518	9.5%
Total	5,474	

OF THOSE WHO SEE PATIENTS...

Do you currently use telehealth for patient care?	N	%
Yes	4,088	82.5%
No	858	17.5%
Total	4,956	

IF RESPONDENTS ANSWERED NO (DOES NOT CURRENTLY USE TELEHEALTH)...

I am not currently using telehealth in my practice because...	N	%
Not compatible with specialty/practice style	410	47.2%
Not applicable with my role in health	341	39.3%
Lack of patient demand	100	11.5%
Quality of care concerns	157	18.1%
Patient population limitations with technology access	122	14.1%
Reimbursement concerns	114	12.1%
Practice workflow concerns	75	8.6%
Liability concerns	70	8.1%
Other	74	8.5%
Total	868	

Are there aspects of telehealth you would consider using in the future?	N	%
Video/synchronous patient encounter (scheduled)	261	65.7%
Synchronous provider-to-provider consultation	177	44.6%
Remote patient monitoring	163	41.1%
Audio only / telephonic patient encounter	104	26.2%
Clinical supervision or collaboration for licensure	93	23.4%
Urgent care (non-scheduled, on-demand)	73	18.4%
Asynchronous patient-to-provider encounter (e-visit)	88	22.2%
Asynchronous provider-to-provider consultation	71	17.9%
Total	397	

IF RESPONDENTS ANSWERED YES (CURRENTLY USES TELEHEALTH)...

I reside in...	N	%
Virginia and provide care via telehealth to patients in Virginia	2,936	71.8%
Virginia and provide care via telehealth to patients in other states	797	19.5%
Another state and provide care via telehealth to patients in Virginia	976	23.9%
Another state and provide care via telehealth to patients in other states	593	14.5%
Total	4,088	

Over the past year, telehealth has allowed me to: (select all that apply) N = 4,088	N	%
Offer my current patients a virtual care option	3,700	90.5%
Enhance care coordination for my patients	2,764	67.6%
Grow my patient panel to include new patients from my local community	1,899	46.5%
Grow my patient panel to include new patients beyond my local community	2,393	58.5%
Serve patients in Virginia while residing out of state	1,103	27%
Serve patients in other states while residing in Virginia	827	20.2%
Decrease risk of transmission of illness in-office	2,432	59.5%
None	19	0.5%
Other	390	9.5%

Approximately, what percent of your patient encounters have been provided by telehealth?										
	0%		1-24%		25-49%		50-74%		75-100%	
	N	%	N	%	N	%	N	%	N	%
Prior to 2020	2,804	68.6%	900	22%	144	3.5%	88	2.2%	152	3.7%
At your highest usage	22	0.5%	491	12%	509	12.5%	593	14.5%	2,473	60.5%
Today	55	1.4%	1,197	29.3%	706	17.3%	579	14.2%	1,551	37.9%

What components of telehealth do you utilize? N = 4,041	Prior to 2020	Today	Future
Video / synchronous patient encounter (scheduled)	18%	93%	72%
Synchronous provider-to-provider consultation	10%	48%	42%
Remote patient monitoring	6%	31%	26%
Audio-only / telephonic patient encounter	19%	46%	34%
Clinical supervision or collaboration for licensure	10%	36%	32%
Urgent care (non-scheduled, on-demand)	7%	33%	27%

What components of telehealth do you utilize? <i>Cont'd</i> N = 4,041	Prior to 2020	Today	Future
Asynchronous patient-to-provider encounter (e-visit)	6%	25%	21%
Asynchronous provider-to-provider consultation	6%	21%	19%
Project ECHO or telementoring	1%	3%	5%
Store and forward	2%	4%	5%
AI-facilitated tools such as note-taking, patient check-ins, triage, etc.	2%	24%	25%
Other	1%	1%	2%

On a scale of 1-5, rate your level of agreement with the following statements about your experience with telehealth as a provider N = 4,088	Avg Rating
I plan to increase my telehealth usage in the future.	3.97
Telehealth allows me to address patient care barriers.	4.64
Telehealth allows me to see more patients.	4.4
Telehealth allows me to connect with other health care providers.	3.88
Telehealth allows me to have more flexibility in my schedule.	4.5
I am able to balance in-person and virtual care in my patient schedule.	4.28
I have seen improvements in my patients' continuity of care due to telehealth.	4.49
I feel confident in the quality of care I'm able to offer my patients via telehealth.	4.62
My patients would be disappointed if I stopped offering telehealth appointments.	4.69
Reimbursement is adequate for the care provided via telehealth.	3.43
I need to have an audio-only telehealth option that is reimbursable.	3.68
Telehealth is an effective tool for providing care to my patients.	4.72
My telehealth patients have struggled to have prescriptions filled.	2.41
The ongoing extensions of telehealth flexibilities initiated during the public health emergency limited my ability to be reimbursed for telehealth services.	2.58
Any potential expirations of the telehealth flexibilities initiated during the public health emergency will impact my ability to continue to see my patients via telehealth.	4.44
I am concerned that proposed in-person visit requirements for prescribing will impact my ability to continue to see my patients.	3.84

Have you or your organization considered modifying your telehealth provision based on federal telehealth policy uncertainty?	N	%
Yes	1,501	36.7%
No	2,587	63.3%
Total	4,088	

Are there areas you feel could be IMPROVED to make your telehealth experience, as a PROVIDER, better? (select all that apply) N = 4,088	N	%
Interstate licensure	2,906	71.1%
Reimbursement	2,537	62.1%
Public health emergency flexibilities made permanent	2,257	55.2%
Internet connectivity	1,645	40.2%
Patient digital literacy	1,512	37.0%
Liability concerns	1,307	32.0%
Integration with other technology systems (i.e., EHR, patient notifications)	1,285	31.4%
Privacy and security	826	20.2%
Practice workflow	630	15.4%
None	196	4.8%
Other	50	1.2%

Are there areas you feel could be IMPROVED to make the PATIENT experience with telehealth better? (select all that apply) N = 4,088	N	%
Internet connectivity	2,434	59.5%
Public health emergency flexibilities made permanent	2,192	53.6%
Digital literacy	1,971	48.2%
Technical assistance	1,967	48.1%
Access to devices	1,871	45.8%
Interpreter services to help with language differences	1,386	33.9%
Trust in telehealth's capabilities	1,180	28.9%
Integration with other technology systems (i.e., EHR, patient notifications)	1,095	26.8%
None	300	7.3%
Other	53	1.3%

Please check any items of interest for involvement in telehealth policy and implementation.	N	%
Virginia's State Telehealth Plan: community input, updates, and comment opportunities	1,365	29.6%
Virginia Telemental Health Initiative: volunteer mental health professionals providing pro bono mental health supports to the patients of Virginia's free and charitable clinics	667	14.5%

Please check any items of interest for involvement in telehealth policy and implementation. <i>Cont'd</i>	N	%
Virginia Telehealth Network resources and updates , including results of this benchmarking survey	1,459	31.6%
I am not interested in any of these.	2,670	57.9%
Total	4,088	

I am a... (choose all that apply) N = 4,615	N	%
Mental/behavioral health provider	2,533	54.9%
Medical – specialty care provider (including MD, DO, NP, PA)	829	18.0%
Medical – primary care provider (including MD, DO, NP, PA)	714	15.5%
Rehabilitation therapist (e.g., PT, OT, SLP)	367	8.0%
Nurse	250	5.4%
Other	160	3.5%
Dental/oral health provider	54	1.2%
Vision provider	34	0.7%
Pharmacist	31	0.7%

I care for... (choose all that apply) N = 4,615	N	%
Adult patients	4,168	90.3%
Geriatric patients	2,647	57.4%
Pediatric patients	2,146	46.5%

I participate with... (choose all that apply) N = 4,615	N	%
Commercial / employer-sponsored insurance	3,582	77.60%
Self-pay	3,145	68.2%
Medicaid (including Medicaid managed care)	2,550	55.3%
Medicare	2,326	50.4%
Tricare / VA	2,239	48.5%
Sliding-scale / pro bono care	1,313	28.5%
Direct-to-consumer telehealth	1,273	27.6%
Telehealth via a county or state facility (e.g., school system, corrections)	331	7.2%
Other	135	2.9%



Open-Ended Response Analysis

The analysis of 2,827 open-ended survey responses reveals overwhelming, consistent support for preserving and strengthening telehealth policies in Virginia. Respondents emphasized that telehealth is no longer an emergency-era solution, but a core component of modern health care delivery.

Across responses, ten major themes emerged, with strong alignment around permanence, reimbursement stability, and equitable access.

1. Make Telehealth Permanent

Respondents overwhelmingly want pandemic-era telehealth flexibilities made permanent in statute and policy.

- “Make telehealth permanently available and not subject to rolling sunset provisions that create uncertainty for providers and patients.”
- “Please make telehealth permanent so providers and patients are not left wondering every year if they will lose access.”

- “Telehealth should be codified into law as a permanent option, not treated as a temporary emergency measure.”
- “We need permanent telehealth policies so health systems can plan staffing, infrastructure, and patient care appropriately.”
- “Stop treating telehealth like a pandemic experiment and make it a standard, permanent part of care delivery.”

2. Ensure Reimbursement & Payment Parity

Continued reimbursement, especially payment parity with in-person care, is seen as essential to sustaining telehealth access.

- “You MUST allow for continued reimbursement and payment parity for telehealth services moving forward.”
- “Without reimbursement parity, providers simply cannot afford to continue offering telehealth at scale.”
- “Ensure telehealth visits are reimbursed at the same rate as in-person visits to maintain access.”
- “If reimbursement goes away, so will telehealth—it is that simple.”
- “Payment parity is critical for rural practices and small providers to survive.”

3. Expand Access for Rural & Underserved Communities

Telehealth is viewed as a lifeline for rural Virginians and communities with limited provider access.

- “Rural communities depend on telehealth because we simply do not have enough specialists within a reasonable driving distance.”
- “Telehealth is often the only way our patients in remote areas can access specialty care.”
- “Please continue supporting telehealth for rural populations where transportation is a significant barrier.”
- “For many of our patients, telehealth eliminates hours of travel and lost wages.”
- “Access to telehealth reduces disparities in care for underserved and geographically isolated communities.”

4. Allow Audio-Only Telehealth

Audio-only options are critical for seniors, low-income patients, and those without reliable internet or devices.

- “Audio-only telehealth must remain an option for patients without broadband or smartphones.”
- “Many elderly patients cannot navigate video platforms, but they can manage a phone call.”
- “Please do not eliminate audio-only services—they are essential for equitable access.”
- “Audio visits are often the only realistic option for patients in low-resource settings.”
- “Removing audio-only would disproportionately harm vulnerable populations.”

5. Increase Cross-State Licensure Flexibility

Respondents want fewer barriers to providing care across state lines.

- “Allow providers to practice across state lines without excessive administrative hurdles.”
- “Licensure compacts and cross-state flexibility would dramatically improve access to specialty care.”
- “Please reduce barriers that prevent telehealth providers from seeing patients in neighboring states.”
- “Interstate licensure reform is necessary to maximize the potential of telehealth.”
- “Telehealth should not be limited by outdated geographic licensing restrictions.”

6. Invest in Broadband & Technology Infrastructure

Access to reliable internet remains a foundational barrier to telehealth expansion.

- “Invest in broadband infrastructure so all Virginians can actually access telehealth services.”
- “Telehealth expansion is meaningless without reliable internet in rural areas.”
- “The Commonwealth must prioritize broadband access as a health equity issue.”
- “Connectivity challenges continue to limit patient participation in video visits.”
- “Technology access and digital literacy need to be addressed alongside telehealth policy.”

7. Protect Patient Choice

Patients should be able to choose telehealth or in-person care based on preference and clinical appropriateness.

- “Continue to give patients the telehealth option when clinically appropriate.”
- “Patients deserve the choice between virtual and in-person care.”
- “Do not take away telehealth as an option—it improves convenience and satisfaction.”
- “Let providers and patients decide together what modality works best.”
- “Telehealth should complement in-person care, not replace or be restricted unnecessarily.”

8. Reduce Regulatory & Administrative Burdens

Respondents cited documentation requirements and regulatory complexity as barriers.

- “Streamline telehealth regulations so providers can focus on patient care rather than paperwork.”
- “Excessive documentation requirements discourage providers from offering telehealth.”
- “Simplify compliance requirements that add administrative burden without improving quality.”
- “Regulatory uncertainty makes it difficult to invest in telehealth infrastructure.”
- “Reduce red tape that slows innovation and access.”

9. Protect & Expand Medicaid Telehealth Coverage

Continued Medicaid support is seen as essential for equitable access.

- “Maintain Medicaid coverage for telehealth services at current levels.”
- “Medicaid patients rely heavily on telehealth for behavioral health and primary care.”
- “Please ensure telehealth coverage remains robust within Medicaid programs.”
- “Eliminating Medicaid telehealth flexibilities would severely harm low-income families.”
- “Telehealth is critical for improving health outcomes among Medicaid populations.”

10. Support Providers & Workforce Sustainability

Telehealth helps with provider recruitment, retention, flexibility, and burnout—but only if policies support sustainability.

- “Telehealth flexibility improves provider recruitment and retention.”
- “Providers need stability in policy to continue investing in telehealth platforms and training.”
- “Telehealth allows clinicians to manage their schedules more effectively and reduce burnout.”
- “Support for telehealth strengthens the overall health care workforce.”
- “Sustainable telehealth policies benefit both patients and providers.”

