



## February 2023

The COVID-19 pandemic response impacted access to and use of every type of healthcare service for months after the initial federal and state emergency declarations.

### Did you know?

The COVID-19 pandemic and response impacted access to and use of every type of healthcare service during the months after the initial federal and state emergency declarations and precautions at the beginning of 2020. Yet medical claims data indicate that the costs of 7 selected types of service returned to pre-pandemic amounts by September 2020. By end of 2021, costs for all the selected types of service had surpassed pre-pandemic amounts, when compared to 2019.

### Here is the latest

On January 31, 2020, the United States Department of Health and Human Services declared a [public health emergency](#), as a result of the novel coronavirus (COVID-19). Nearly two months later, on March 13, the President of the United States declared a [National Emergency](#), and New Hampshire Governor Christopher Sununu issued an Executive Order declaring a [state of emergency](#) due to the spread of COVID-19. The [state of emergency](#) resulted in non-essential business closures, postponement of elective healthcare services, such as surgeries and annual check-up appointments, and restricted visitation to residential care facilities throughout the state. Within two months of the state of emergency being declared, many of the [restrictions were lifted](#) and non-essential medical procedures could resume with enhanced COVID protocols in place.

The measures taken to slow the spread of COVID-19 in response to the pandemic impacted peoples' access to and use of every type of healthcare delivery service. Such changes in utilization are reflected in healthcare claims and corresponding costs. When analyzing medical claims data among commercially insured members, a decline in per member per month

(PMPM) costs<sup>1</sup> was observed, beginning in March 2020, and reaching their lowest points in April 2020. Analysis found that 3 types of service returned to pre-pandemic PMPMs soonest, by June 2020: Facility Outpatient, Surgical; Professional, Radiology; Professional, Surgical. The 2 types of services that returned to pre-pandemic PMPMs the slowest, by August and September 2020 were Professional, Emergency Room and Professional, Medical.

In comparing 2019 and 2021 claims data, findings showed that the PMPM costs for nearly all types of service analyzed were at least slightly higher in 2021 than in 2019, after a drop in 2020.

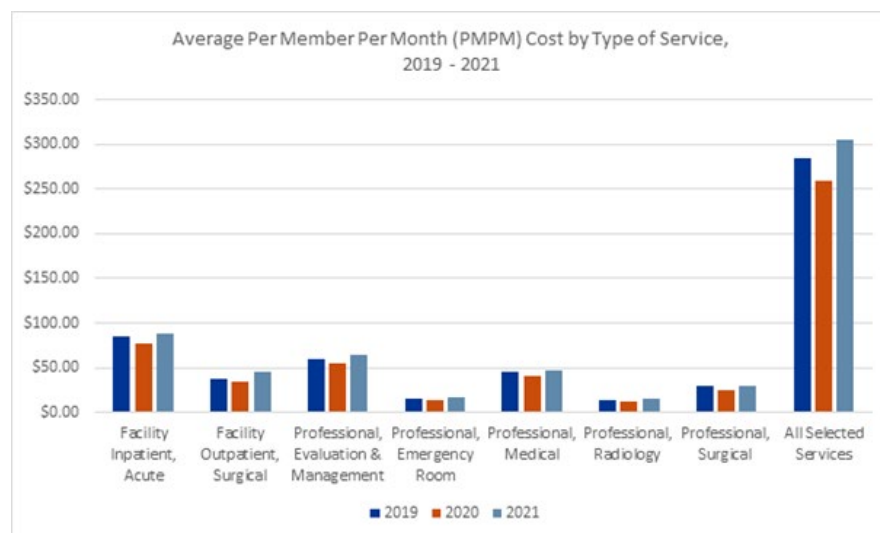
## What does this mean for New Hampshire?

This data can help us better understand the trajectory for healthcare per member per month costs by type of service in New Hampshire (NH).

Current findings show that costs are increasing across nearly all selected types of service in NH. As shown on the chart below, Facility Outpatient, Surgical type of service had the largest increase over the 3-year period from 2019 to 2021. This is followed closely by Professional, Evaluation & Management and Facility Inpatient, Acute. Across all selected types of service, per member per month costs have increased by \$20.86 from 2019 to 2021, indicating increased monthly healthcare costs for NH residents with commercial insurance.

This analysis does not include pharmacy-related use and cost. Pharmacy claims did not experience a similar dip in 2020 with the COVID restrictions. A forthcoming brief will focus on pharmacy costs specifically.

For more details on COVID-19 claims recovery in New Hampshire, read the [full report](#).



<sup>1</sup> Per member per month (PMPM) cost reflects the total paid amount for medical services, spread across all the members, for the month.