

1.1. Number of contacts (including teleconsultations) with a GP (R-7)

1.1.1. Documentation sheet

Description	Primary indicator
	Total number of contacts (including teleconsultations) with a GP
	Secondary indicators
	Total number of contacts (excluding teleconsultations) with a GP
	Total number of contacts (including teleconsultations) with a GP (as a percentage of the total number of contacts with a GP in the pre-COVID period)
	Total number of contacts (excluding teleconsultations) with a GP (as a percentage of the total number of contacts with a GP in the pre-COVID period)
	Share of teleconsultations among contacts with a GP (as a percentage of the total number of contacts with a GP in the pre-COVID period)
Calculation	Total number of contacts (including teleconsultations) with a GP = sum of consultations with a GP, visits of a GP and teleconsultations with a GF performed during the considered month.
	Total number of contacts (excluding teleconsultations) with a GP = sum of consultations with a GP and visits of a GP performed during the considered month.
	Total number of contacts (including teleconsultations) with a GP (as a percentage of the total number of contacts with a GP in the pre-COVID period): Numerator = sum of consultations with a GP, visits of a GP and teleconsultations with a GP performed during the considered month Denominator = sum of consultations with a GP and visits of a GP performed during the same month of 2019.
	Total number of contacts (excluding teleconsultations) with a GP (as a percentage of the total number of contacts with a GP in the pre-COVID period): Numerator = sum of consultations with a GP and visits of a GP performed during the considered month; Denominator = sum of consultations with a GP and visits of a GP performed during the same month of 2019.
	Share of teleconsultations among contacts with a GP (as a percentage of the total number of contacts with a GP in the pre-COVID period) Numerator = sum of teleconsultations with a GP performed during the considered month; Denominator = sum of consultations with a GP and visits of a GP performed during the same month of 2019.
Rationale	In March 2020, teleconsultations in primary care were initiated in Belgium (by the creation of three nomenclature codes) in order to ensure access to essential care while preventing the spread of the virus by avoiding direct contact between patients and health professionals. These teleconsultations were free of charge for the patient. Since August 2022, this temporary system has been replaced by a permanent one that implies a small co-payment for the patient. ¹

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	The ability to transform the way services are delivered (from in-person contact to teleconsultations) is a characteristic of the resilience of the healthcare system. However, this ability cannot simply be assessed by the share of teleconsultations among all contacts with a GP for a given month. Indeed, it is likely that the total number of contacts with a GP has changed compared to the pre-COVID period. If this is the case, the percentage of teleconsultations among all contacts with a GP would not correctly document how teleconsultations did <i>replace</i> in-person contacts. To overcome this bias, we compare the number of teleconsultations with a GP on a given month with the total number of contacts with a GP in the same month of 2019.
Data source	RIZIV – INAMI (DocN)
Technical definitions	Teleconsultations are identified by nomenclature codes 101 135, 101 791, 101 835 and 101 990. It is estimated (using docP data) that around 90% of these nomenclature codes are billed by GPs, while 10% are billed by medical specialists. Therefore the total number of teleconsultations with GPs is calculated as 90% of the total number of teleconsultations performed during the considered month.
	Other contacts with a GP are identified by nomenclature codes 101 010, 101 032, 101 054, 101 076 (consultations), 103 110, 103 132 (visits)
International comparability	Total number of contacts (including teleconsultations) with a GP is not included in standardised international indicator sets. However, international results concerning the total number of face-to-face contacts (i.e. excluding teleconsultations) with primary care providers are presented. ²
Limitations	It is not possible to distinguish whether a change in the total number of contacts with a GP is due to changes in needs (e.g. increase needs of GP care to the spreading of COVID-19, decrease needs of GP care due to reduction of other communicable diseases) or to changes in the healthcare system (e.g. restriction of face-to-face contacts, availability of teleconsultations). Therefore a decrease in the total number of contacts with a GP does not necessarily mean that more needs are unmet for the patient. On the other hand, an increase in the total number of contacts with a GP does not necessarily imply an overuse of GP care.
	The data used do not allow to distinguish teleconsultations performed by GPs from those performed by other physicians. The total number of teleconsultations with GPs is estimated to be 90% of the total number of teleconsultations performed during the considered month. However, as the share of teleconsultations performed by other physician may vary over time, this estimation is not precise.
Dimension	Resilience
Related indicators	
Reviewers	Thibault Troch (RIZIV – INAMI)

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1.1.2. Results

Belgium

During the first wave of COVID-19, Belgium experienced a large drop in the number of face-to-face contacts with GPs (Figure 1). Between February and April 2020, the total number of face-to-face contacts with GP decrease by more than 50% (from 3 971 103 to 1 773 840 contacts). In April 2020, the number of face-to-face contacts with GPs represented 38% of the contacts in April 2019 (Figure 2).

However, the development of teleconsultations compensated the decrease in face-to-face contacts. Indeed, when teleconsultations are included, the number of contacts with GPs only decreased by 13% between February and April 2020 (Figure 1) and the number of contacts in April 2020 represented 92% of the contacts in April 2019 (Figure 2). In May 2020, the number of face-to-face contacts represented 49% of its level in 2019. Including teleconsultation, the number of contacts in May 2020 represented 85% of the number of contacts in May 2019.

Between June 2020 and February 2021, the number of face-to-face contacts with GPs stayed below its level in the same month of 2019 (ranging from 70% to 86% of its level in the same month of 2019). When taking into account teleconsultations however, until December 2020 there were more contacts with GPs than during the same month of 2019. In January and February 2021 February 2021, the number of contacts with GP (including teleconsultations) was below, but very close to its level in the same month of 2019.

From March 2021 onward, the number of face-to-face contacts with GPs returned close to its level in the same month of 2019. When including teleconsultations, the number of contacts was between 7% and 33% above its level in the same month of 2019.



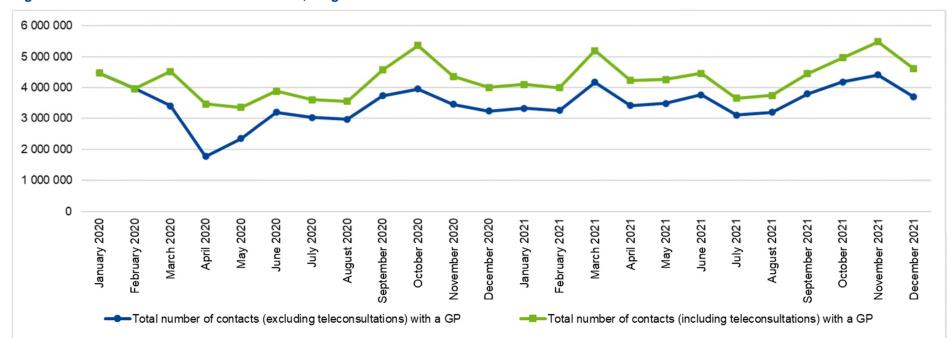


Figure 1 – Total number of contacts with a GP, Belgium

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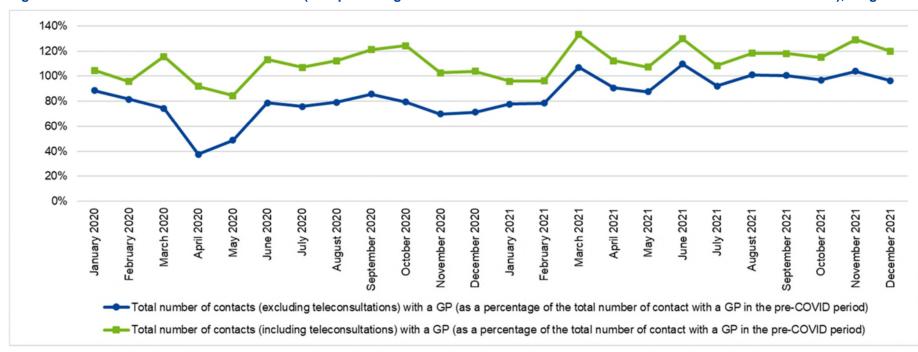


Figure 2 – Total number of contacts with a GP (as a percentage of the total number of contact with a GP in the same month of 2019), Belgium

Regional comparison

From Figure 3, Figure 4 and Figure 5, it can be seen that the total number of contacts with GPs followed a similar evolution in the three regions of the country: an increase in March 2020 followed by a decrease in April-May 2020. From there, the number of face-to-face contacts remained below its level of 2019 up to February 2021. A the same time, when including teleconsultations, the number of contacts was at or above the level of 2019.

The share of teleconsultations in the total number of contacts (Figure 6) was different in the three regions of the countries, although it follows a similar evolution over time. Overall teleconsultations represented a larger share of

the total number of contacts in Wallonia and in Brussels than in Flanders. In April 2020, teleconsultations represented more than 60% of the contacts with a GP in Wallonia and Brussels while it only represented 36% of the contacts in Flanders. On average, between May 2020 and December 2021, the monthly share of teleconsultations vary between was 19% and 46% in Wallonia, between 21% and 42% in Brussels and between 14% and 25% in Flanders.

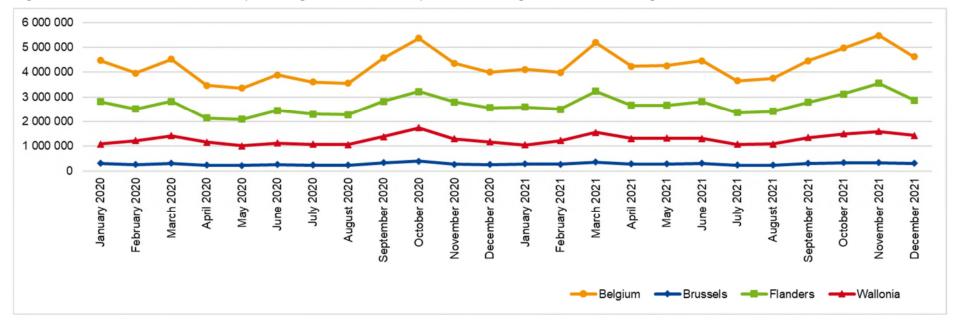
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International comparison

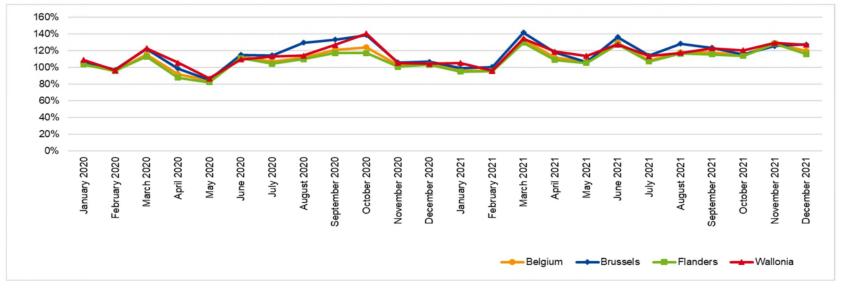
Results from other countries also show a decrease in face-to-face primary care consultations (that may, at least partly be offset by an expansion of telehealth services).² The number of consultations with GP fell by 66% in Portugal, about 40% in Australia, 18% in Austria and 7% in Norway in May 2020, compared with the same month in 2019. In seven OECD countries

(Israel, Australia, Spain, Norway, Chile, Costa Rica an Mexico) the number of face-to-face doctor consultations per person fell in 2020 compared to 2019. In Denmark, an increase is observed between 2019 and 2020. Data for other OECD countries are not yet available.

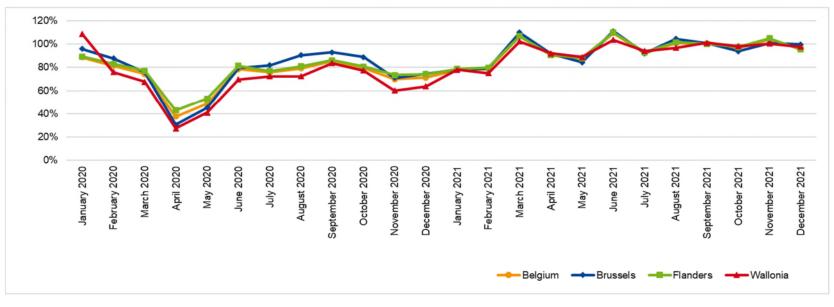
Figure 3 – Total number of contacts (including teleconsultations) with a GP, Belgium and its three regions











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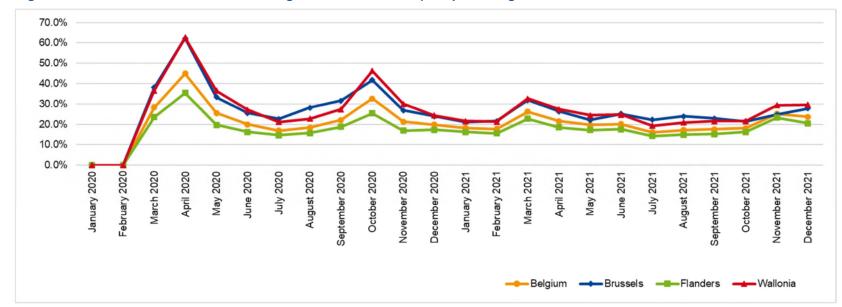


Figure 6 – Share of teleconsultations among contacts with a GP (as a percentage of the total number of contact with a GP in the same month of 2019)

Key points

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- During the first wave of COVID-19, a large drop of face-to-face contacts with GPs was experienced in the three regions of the country.
- This drop was largely compensated by the development of teleconsultations.
- Nevertheless, a small disruption was observed in April and May 2020. In April 2020 the number of contacts including teleconsultations only represented 92% of the contacts in April 2019. In May 2020, they only represented 85% of the number of contacts in May 2019.
- A bouncing back was already observed from June 2020 onward. The number of contacts with GPs including teleconsultations was constatly above or close to its level for the same month of 2019.
- There is little variation in the evolution of the number of contacts with GPs in the three regions of the country.
- However, the share of teleconsultations among the total contacts with GPs was systematically higher in Wallonia and in Brussels than in Flanders.

References

- 1. RIZIV-INAMI. Remboursement des consultations médicales à distance [Web page].2023 [cited August 2023]. Available from: <u>https://www.inami.fgov.be/fr/themes/cout-remboursement/par-</u> <u>mutualite/prestations-distance-medecins/Pages/default.aspx</u>
- 2. OECD. Health at a Glance 2021. 2021.