eHEALTH INITIATIVE

COVID-19 and Beyond: Telepsychiatry Best Practices and Regulatory Priorities

May 7, 2020

Agenda

Welcome and Introductions
- Jennifer Covich Bordenick, Chief Executive Officer, eHealth Initiative and Foundation

Presentation
- Geoffrey Boyce, MBA, Chief Executive Officer, InSight + Regroup

- Irene Epshteyn, MD, Adult Psychiatrist, Whiteside County Community Health Clinic; Associate Medical Director, InSight + Regroup

- Naveen Kathuria, JD, SVP, Growth & Advisory Services, InSight + Regroup

Housekeeping

- **All participants are muted**
- **To ask a question to be answered by speakers:**
  - Use the "Q&A" box found on the bottom of your screen
  - We will address as many as possible after the presentations
- **For help with technical difficulties and non-speaker questions:**
  - Use the "chat" box and we will respond as soon as possible
- Slides and a recording of today's presentation will be available for download on eHI's Resource page: **www.ehidc.org/resources**
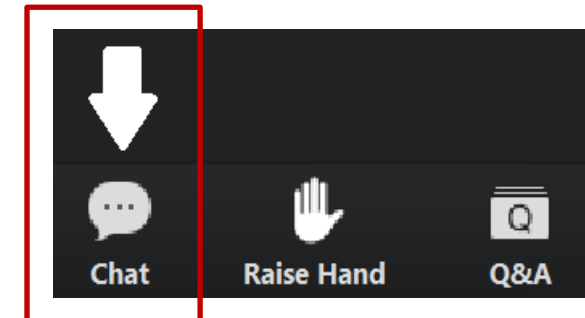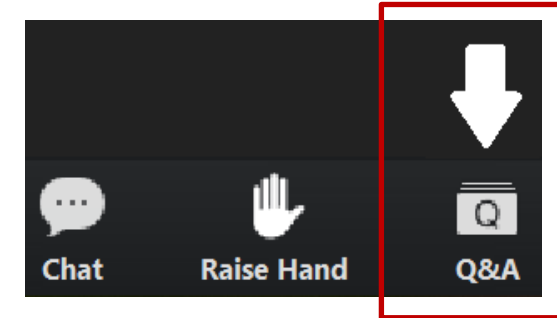
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Convene executives who are transforming healthcare through technology and innovation.

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UPCOMING PROGRAMS (See eHI Event Page):

- **May 12 –** eHI Executive Insights: Lisa Ide, MD, Chief Medical Officer, Zipnosis

- **May 21 –** eHI Executive Insights: Len Lichtenfeld, MD, American Cancer Society

Interested in sponsoring a COVID-19 program? Email Amy@ehidc.org

Thank you! This program was made possible with support from:

Today's Panel

Jennifer Covich Bordenick
Chief Executive Officer
eHealth Initiative & Foundation

Geoffrey Boyce, MBA
Chief Executive Officer
InSight + Regroup

Irene Epshteyn, MD
Adult Psychiatrist
Whiteside County
Community Health Clinic

Associate Medical Director
InSight + Regroup

Naveen Kathuria, JD
SVP, Growth & Advisory Services
InSight + Regroup

Telepsychiatry Solutions

iNSiGHT + regroup

A leader and trusted partner to organizations nationwide, offering comprehensive behavioral health capacity, guidance and expertise across the continuum of care.

- Shape the intersection of telehealth and behavioral healthcare
- Define the standard of care
- Advocate for improved telepsychiatry-friendly regulations

Optimize clinical care costs

Reduce recruitment costs

Increase patient access

Support compliance

Create revenue opportunities

Scheduled | In-home | On-demand

Where is Telepsychiatry Currently Being Used?

Primary Care & Outpatient Clinics — 1

Hospitals & Health Systems — 2

Community Mental Health Centers — 3

Skilled Nursing Facilities — 4

5 — **Corrections**

6 — **Mobile Crisis Units and ACT Teams**

7 — **Homes**

8 — **Schools & Universities**

Telebehavioral Health

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A Need for Care in Hospitals

1 in 8	90%	41%	3.2x	$2,264	~25%
ER visits that require a mental health consult	of ED directors reported boarding psychiatric patients every week	of EDs have a wait time of over 2 days to see a psychiatrist	the number of times longer a behavioral health patient remains in the ED than the average patient	the estimated cost for psychiatric boarding in the ED per patient	the rate reduction of psychiatric hospitalizations thanks to telepsychiatry

(1) Psychiatric Boarding in U.S. EDs, George Washington University Policy Brief
(2) U.S. Department of Veterans Affairs Patients Enrolled in Telemental Health Services, 2006–2010

A Need for Care in Clinics

1 in 5

Americans in need of mental health services per year

77%

Percentage of US counties with a severe shortage of psychiatrists

55%

Percentage of US counties without a single psychiatrist

~60%

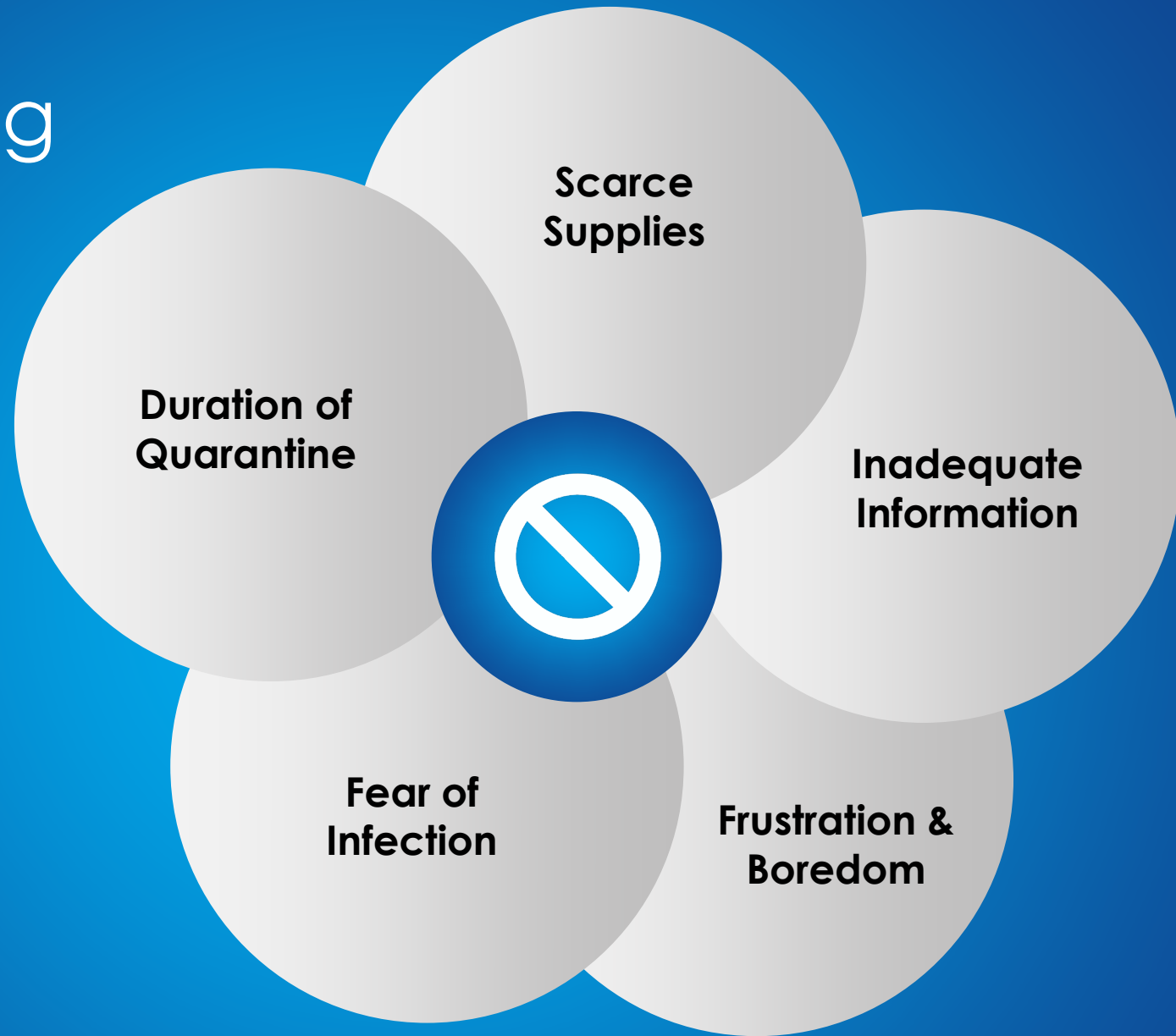Percentage of practicing psychiatrists over the age of 55

6k-15k

Estimated psychiatrist shortage in the US by 2025

60%

Adults with mental illness who received no care in the previous year

(1) Addressing the Escalating psychiatrist Shortage, AAMC News, February 13, 2018
(2) Advisory Board, Behavioral Health Management Guide, 2017

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Impact on Behavioral Health

56% of adults feel COVID-19 worry or stress has caused at least 1 negative effect on mental health, including **increased alcohol use**, **worsening chronic conditions**

69% and **45%** of individuals **18-29 years old and 65 and older, respectively,** reported the outbreak has caused adverse effects on their mental health or wellbeing

34.1% Increase in anti-anxiety medication prescriptions between February and March (**anti-depressants increased 14.8%**)
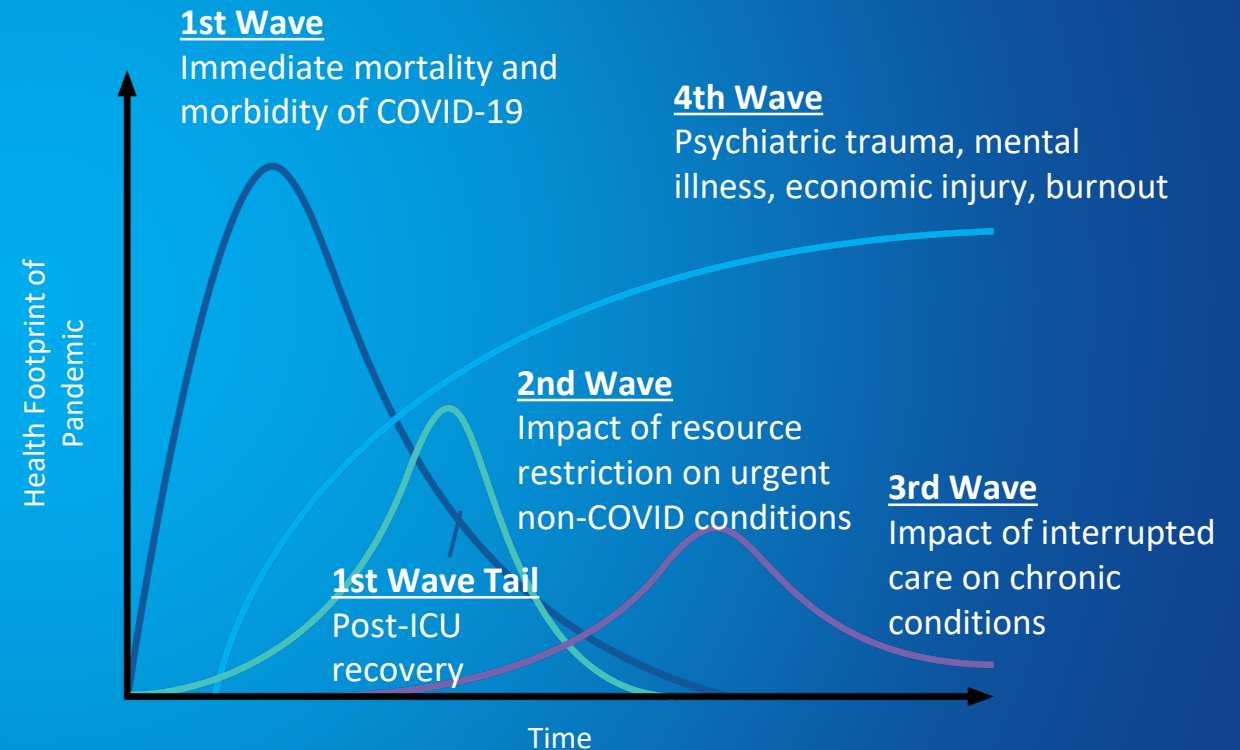
71% of individuals agree they would be **more likely to seek care if they could access telemental health services** (80% believe those that need services won't get it)

Kaiser Family Foundation Health Tracking Poll - Late April 2020

Express Scripts America's State of Mind Report April 2020

Cohens Veterans Network America's Mental Health Pulse

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Market Impact of COVID-19

The impact of the COVID-19 crisis on mental health will be significant and long-term

- Telehealth is now a go-to solution
- Home-based services are increasingly accepted
- Psychiatric clinicians are increasingly drawn to telehealth for their own safety and security
- Even though utilization of mental health services have temporarily dipped...

  - New utilizers of mental health services have emerged amid crisis
  - Macro trends of unemployment, inflation, economic downturn and isolation create a groundswell of increasing BH needs
  - Industry expects increased instances of depression, PTSD and suicidality

1st Wave
Immediate mortality and morbidity of COVID-19

4th Wave
Psychiatric trauma, mental illness, economic injury, burnout

2nd Wave
Impact of resource restriction on urgent non-COVID conditions

3rd Wave
Impact of interrupted care on chronic conditions

1st Wave Tail
Post-ICU recovery

Health Footprint of Pandemic

Time

Author: Victor Tseng, MD

A Tipping Point for Telehealth

Increasing reimbursement for telehealth services

Medicare and commercial payers are covering telehealth services at in-person rates

Reduced regulatory burden

Relaxation of physician licensing requirements, prescribing and HIPAA requirements

Increased patient and clinician utilization

COVID-19 is forcing a change in behavior as people get accustomed to interacting virtually

Increased demand for mental health services

COVID-19 and the associated economic impact will have a pronounced and lasting impact on people's mental health

New opportunities generated

Primary care, payers and practices rapidly require new support to establish and deliver sustainable home-based telehealth

Telepsychiatry and COVID-19

Scheduled 📅

Reduce the risk of the virus spreading with behavioral health clinicians who perform the same important responsibilities as onsite clinicians:

- Assessments
- Medication management
- Supervision
- Treatment team meetings

Telepsychiatry clinicians provide clinical capacity and **reduce the impact on limited emergency services in a community**.

In-home 🏠

Home-based care moves behavioral health care from clinics and primary care centers into patient homes.

- No interruption to receiving care or the patient experience
- Avoid the need to visit an office

With in-home virtual care, organizations can continue to **offer access to behavioral health care while helping to contain the spread of COVID-19.**

On-demand ⏱24

On-demand telepsychiatry offers access to experienced clinicians when and where organizations need it.

- Provide critical behavioral health coverage
- Enhance bandwidth and expertise of in-house staff

An on-demand model can help hospitals **evaluate psychiatric patients quickly and determine the most appropriate, least restrictive level of care while conserving hospital beds for COVID-19 patients**.

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Enhancing Clinic-based Services with In-home Solutions

The transition to in-home behavioral care from clinic-based programs has been evident, but it's more than a simple change in setting:

- **Clinician training for nuanced in-home care delivery**

- **New workflows**

- **Additional complexity and regulatory barriers**

- **Crisis plan development**

- **Virtualizing facilitators**

- **Technology implementation**
  - Simply switching to a common video tool like FaceTime and Skype is <u>NOT</u> the whole solution.
    - Appointment scheduling
    - End user support
    - Compliance & Reimbursement

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A Telepsychiatry-supported Community

Emergent Care

Individuals go to the Emergency Department and are evaluated by a telepsych clinician to quickly determine an appropriate, least restrictive level of care

Patient Homes

Individuals improve or are deemed appropriate to begin doing in-home telepsychiatry sessions.

Inpatient Units

Individuals need to be admitted to an inpatient unit where a telepsych clinician can perform patient rounding overnight

Community-based Outpatient Resources

Individuals continue (post ED/IP) or seek care at a community-based site that utilizes telepsychiatry.

COVID-19 Impact on Telehealth Regulations

State Licensure

- Currently, 49 states have either waived licensure requirements or have implemented a temporary emergency licensure process
- States have expedited the process to obtain permanent licensure, in some instances via the Interstate Medical Licensure Compact

Prescribing & DEA

- DEA-registered practitioners may prescribe controlled substances via telehealth without a prior in-person medical evaluation
- Additionally, prescribers are not required to obtain multiple state-specific DEA registrations during the emergency

HIPAA

- OCR will waive penalties for HIPAA violations against clinicians using everyday "non-public facing" technologies, such as FaceTime or Skype via enforcement discretion
- Additionally, telehealth clinicians are not currently required to bind tech vendors to a BAA

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COVID-19 Impact on Reimbursement

Medicare

- Waived geographic and originating site requirements now include homes and not just rural or health professional shortage areas
- Phone based, audio-only services are also reimbursable

Medicaid

- 48 states have received a section 1135 waiver to remove unnecessary barriers on clinicians such as prior authorization

Commercial

- Payors are quickly embracing telehealth by educating employers and members, waiving telehealth co-pays, offering enhanced reimbursement at parity to in-person rates
- Payors are encouraging more of their in-network clinicians to practice via telehealth

Best Practices & Implementation

CONSIDERATIONS, CARE MODELS, SUSTAINABILITY, COLLABORATION, OPERATIONS

What are the first things to consider if I want to start a telebehavioral program?

What are the greatest challenges or barriers to launching telepsychiatry?

Can we blend models or switch from clinic-based to in-home behavioral services?

Can you give an example of how you have adjusted a program recently as result of COVID?

Regulations & Compliance

REIMBURSEMENT, HIPAA, PRESCRIBING, LICENSING, PRIVILEGING

What is the easiest rule change to take advantage of quickly as a result of the public health emergency?

Can you discuss consent regarding telepsychiatry?

Are there any standard of care or ethical issues unique to providing in-home services via telehealth?

What are the best resources for staying up-to-date on regulatory changes?

COVID-19 & Beyond

FUTURE OF TELEHEATLH, NEW NORMS, ADOPTION, ADVOCACY

Will telebehavioral services be the norm post-COVID?

What are the most evident things the industry should advocate for following the pandemic?

How do you see payers reacting to the extraordinary demand regarding reimbursement rates?

RESOURCES & QUESTIONS

Association Resources

eHI - https://www.ehidc.org/resources/covid-19

ATA - https://info.americantelemed.org/covid-19-news-resources

APA - https://www.psychiatry.org/psychiatrists/covid-19-coronavirus

National Council on Behavioral Health -
https://www.thenationalcouncil.org/covid19/

CCHPCA - https://www.cchpca.org/resources/covid-19-telehealth-
coverage-policies

AMA - https://www.ama-assn.org/delivering-care/public-
health/covid-19-2019-novel-coronavirus-resource-center-physicians

National Consortium of TRCs -
https://www.telehealthresourcecenter.org/

Federation of State Medical Boards (FSMB) -
https://www.fsmb.org/advocacy/covid-19/

InSight + Regroup Resources

Telepsychiatry and COVID-19 Resource Page -
https://info.regrouptelehealth.com/1-covid-19

Leveraging Telepsychiatry to Meet Patient Needs During COVID-19 -
https://blog.regrouptelehealth.com/leveraging-telepsychiatry-to-meet-
patient-needs-during-covid-19

Regulatory Changes Pertaining to Telepsychiatry During Coronavirus -
https://blog.regrouptelehealth.com/regulatory-changes-pertaining-to-
telepsychiatry-amid-the-coronavirus

Privileging Options to Expedite Psychiatric Care -
https://blog.regrouptelehealth.com/leveraging-privileging-options-to-
expedite-psychiatric-care

Clinic Offers Virtual In-Home Mental Health Care During Crisis -
https://blog.regrouptelehealth.com/rural-clinic-offers-virtual-in-home-
mental-health-care-during-crisis

THANK YOU!