SAMHSA-HRSA
Center for Integrated Health Solutions

A TO Z
DEVELOPING TELEBEHAVIORAL HEALTH CAPACITY TO SERVE THE NEEDS OF YOUR PATIENTS

Health Centers
Healthy Start Programs
Ryan White HIV/AIDS Program Grantees and Service Providers
Rural Health Clinics
Session 1
Overview Q + A
May 29, 2013

Today's Speakers

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Health Resources and Services Administration
U.S. Department of Health and Human Services

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National Council for Community
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Vice President of Marketing/
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The web site:

http://www.integration.samhsa.gov/operations-administration/cihs-telebehavioral-health

The Listserv:

All Participants will receive an email and a link to join the Listserv

All of the presentations will be archived on the web site

Goals of the Training

1: Identify for their own organization one or more telebehavioral health service models that are clinically appropriate and a pathway to sustainability;

2: Identify and engage the range of stakeholders necessary to successfully establish telebehavioral health services;

3: Coordinate their telebehavioral health activities with pertinent local, state and federal partners.

T/TA SERIES SCHEDULE

- **Session I:** Overview & Laying the Groundwork
  May 22, 2013 @ 12:00 PM EST
  Register **Here**

- **Session I:** Office Hours Q+A
  May 29, 2013 @ 12:00 PM EST
  Register **Here**

- **Session II:** State Regulatory/Reimbursement Topograpy; Engagement and Outreach
  June 5, 2013 @ 12:00 PM EST
  Register **Here**

- **Session II:** Office Hours Q+A
  June 12, 2013 @ 12:00 PM EST
  Register **Here**

- **Session III:** Economics, Partnerships
  June 19, 2013 @ 12:00 PM EST
  Register **Here**

- **Session III:** Office Hours Q+A
  June 26, 2013 @ 12:00 PM EST
  Register **Here**

- **Session IV:** Technology and Logistics
  July 17, 2013 @ 12:00 PM EST
  Register **Here**

- **Session IV:** Office Hours Q+A
  July 24, 2013 @ 12:00 PM EST
  Register **Here**

- **Session V:** Implementation
  August 7, 2013 @ 12:00 PM EST
  Register **Here**

- **Session V:** Office Hours Q+A
  August 14, 2013 @ 12:00 PM EST
  Register **Here**

- **Session VI:** Launch, Refinement, Lessons Learned and Wrap Up
  August 21, 2013 @ 12:00 PM EST
  Register **Here**

- **Session VI:** Office Hours Q+A
  August 28, 2013 @ 12:00 PM EST
  Register **Here**

The T/TA Series is targeted to organizations that have determined that telebehavioral health services are part of their future and want to move forward.

The training uses the Triple Aim and Patient Centered Medical Home (PCMH) Practice Transformation as a framework.

Polling Question

Why did you join the Telebehavioral Health Training & Technical Assistance Series? (check all that apply)

- Build Awareness and Knowledge Growth
- Understanding How This Model of Service Fits in with Healthcare Reform Initiatives
- Obtain Additional Information to Implement or Help Others Implement Telebehavioral Health

Please utilize the Listserv for communication on issues

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Attend the Office Hours and Q+A for This T/TA Session

When: May 29, 2013 @ 12:00 PM EST
Register Here: https://www2.gotomeeting.com/register/831277722

This and all webinars will be archived and available on the web site:

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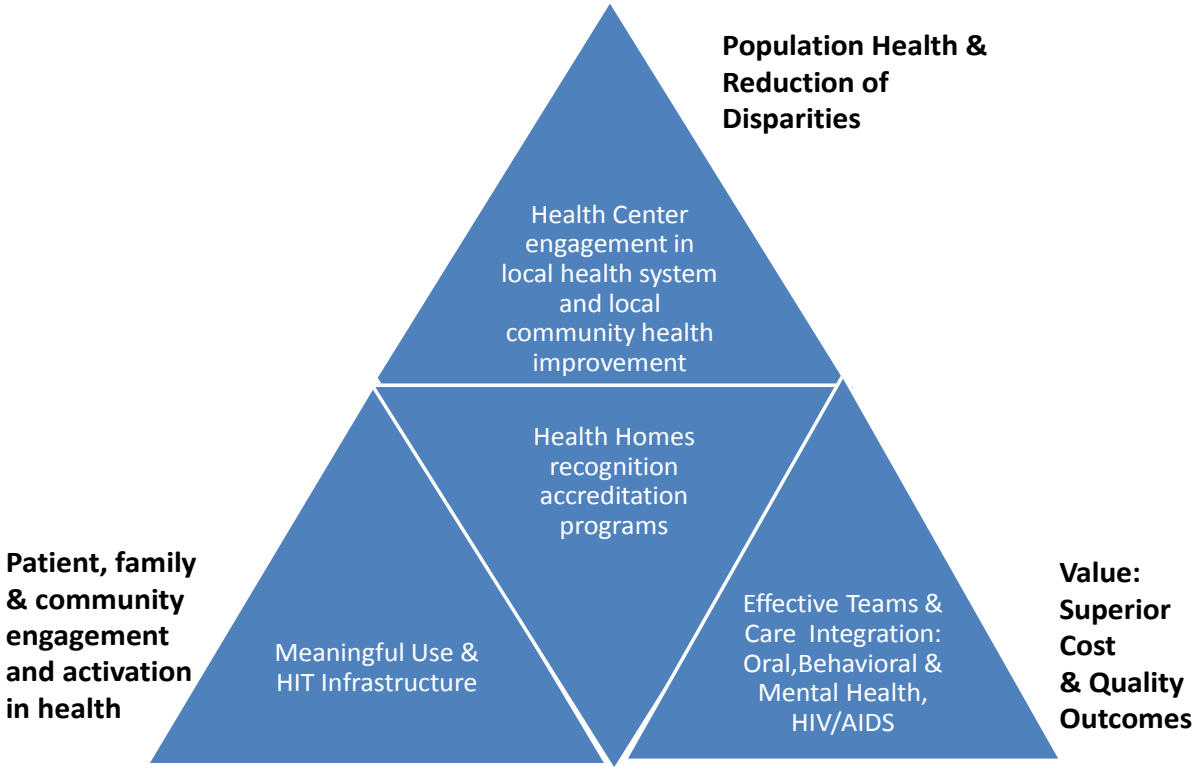
Health Home Health Reform Framework



Bob Franko, MBA
Cherokee Health Systems
Vice President of Marketing/National Training Coordinator

Cherokee Health Systems Our "Telesuite" of Services

Bob Franko, MBA
Vice President of Marketing/National Training Coordinator

Our "Telesuite" of Services

Telepsychiatry
Telepsychology
Telehealth (Primary Care)
Telepharmacy

Web-based trainings (internal and external)
EHR "tasking," communication, sharing

Benefits of Telehealth

Paramount to our mission of expanding access

Vital to our integrated care approach

Efficient, convenient for patients

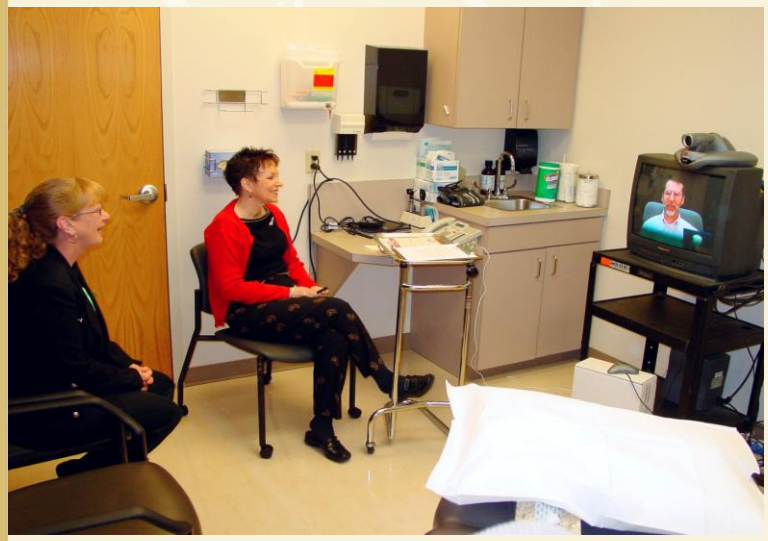
More accurate diagnosing

Important for rural/frontier patients

Reduces cost

Real-time access, real-time communication

The Consulting Psychiatrist



The Consulting Psychiatrist

Access and Population-Based Care

Consultation

Enhance the Skills of Primary Care Colleagues

Treatment Team Meetings

Telepsychiatry

Co-Management of Care

Tele-Primary Care
The S.M.A.R.T. Program

Since 2008

Sevier County Schools – 23 locations

Nearly 5,000 students seen

Staff Retention, Health Expansion

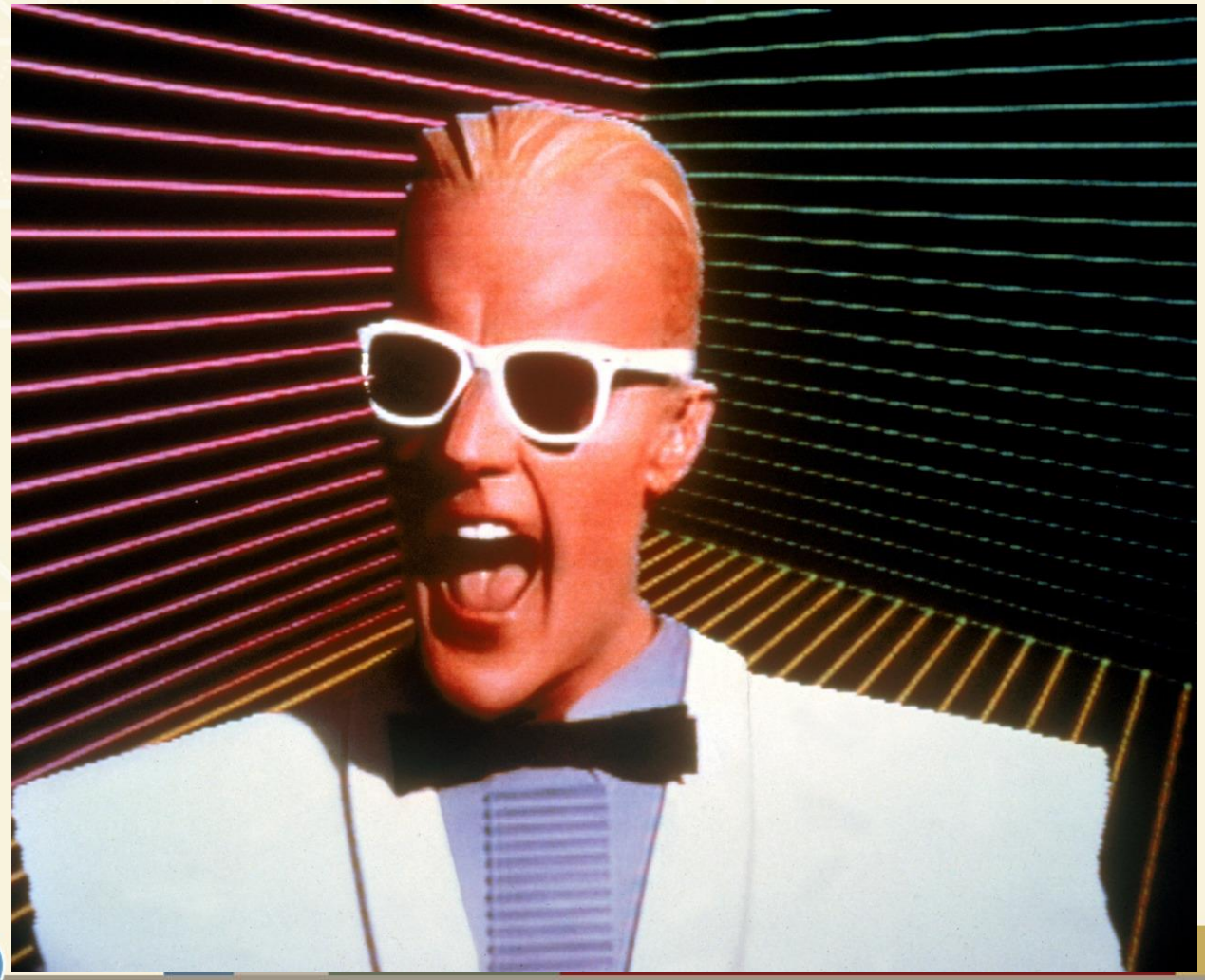
Bilingual Psychologist who resides in Miami, FL and sees patients daily in East Tennessee

Family Physician who resides in Lexington, KY and sees patients daily in our Morristown, TN clinic

Patients throughout our Appalachian region are able to access care they might have otherwise not been able to

Telepharmacy program now developing

Lessons Learned



- To build trust and confidence in the service, quality is vital
- T1 lines – have not traditionally used Skype or other web-based services
- High production value
- On-site expertise
- Back-up plans

Polling Question

What do you Identify as Barriers to Your Implementation of Telebehavioral Health? (check all that apply)

- **Financing/Reimbursement**
- **Lack of Expertise for Implementation**
- **Staffing**
- **Workflow Redesign**

Phil Hirsch, PhD
Chief Clinical Officer
HealthLinkNow

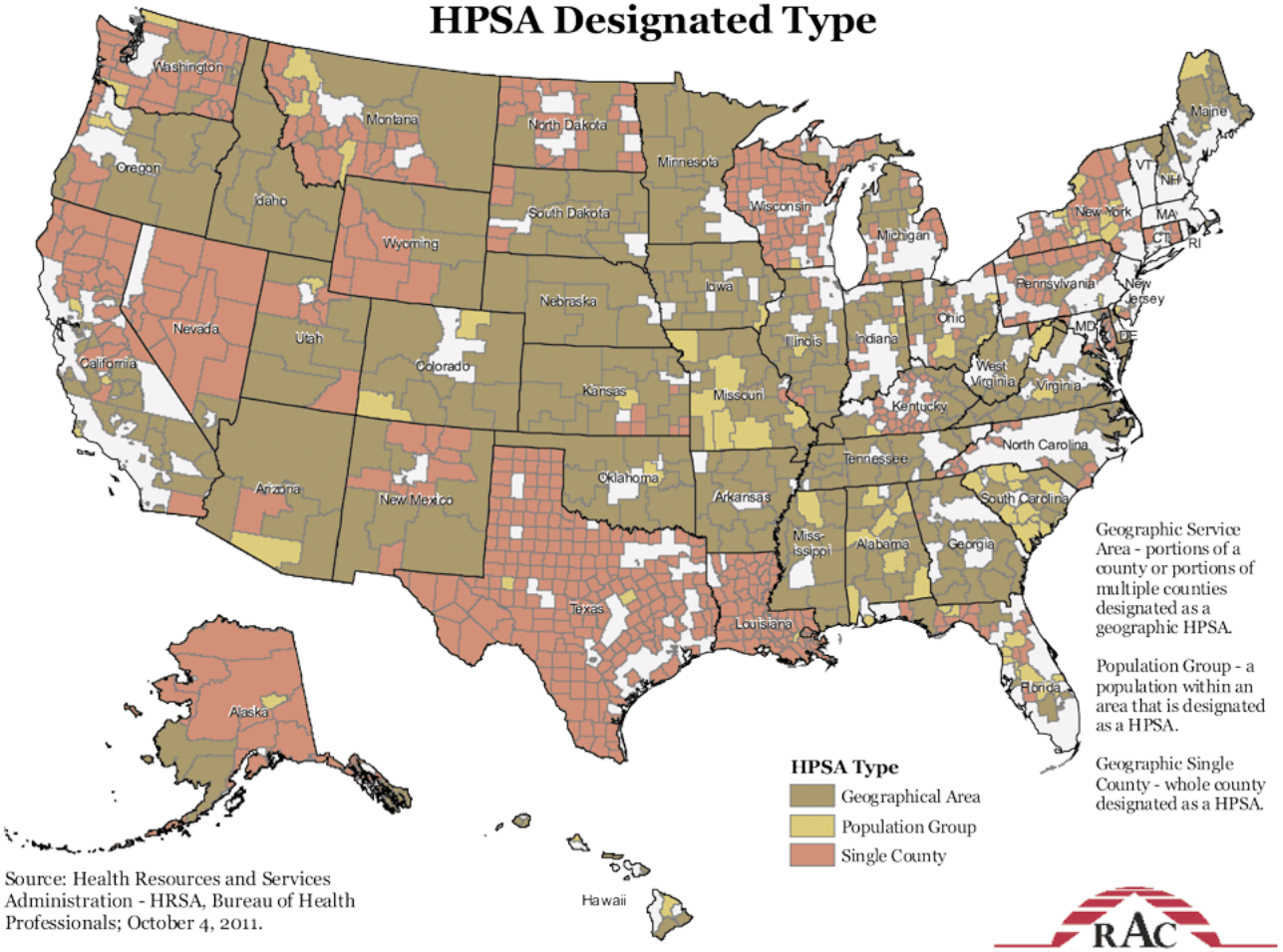
Telebehavioral Health Integration

NOT

The Medium is the Message

A medium affects the society in which it plays a role not by the content delivered over the medium, but by the characteristics of the medium itself.

Health Professional Shortage Areas (HPSA) - Mental Health
HPSA Designated Type



Source: Health Resources and Services Administration - HRSA, Bureau of Health Professionals; October 4, 2011.

Note: Alaska and Hawaii not shown to scale

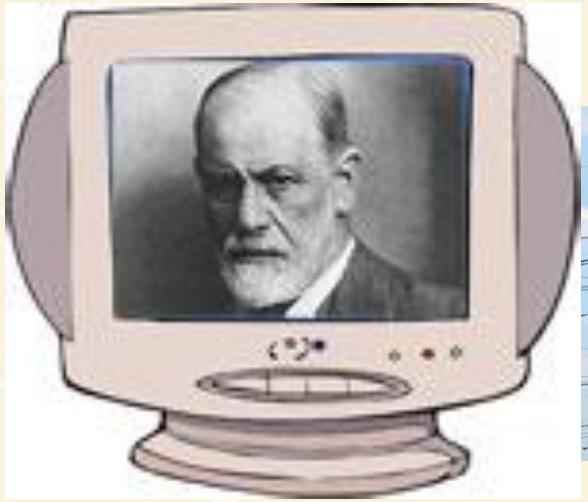
Medical Home

ROBERT GRAHAM CENTER

Policy Studies in Family Medicine and Primary Care

"Efforts to provide everyone a medical home will require inclusion of mental health care if they are to succeed in improving care and reducing costs."

Not your father's telepsychiatry

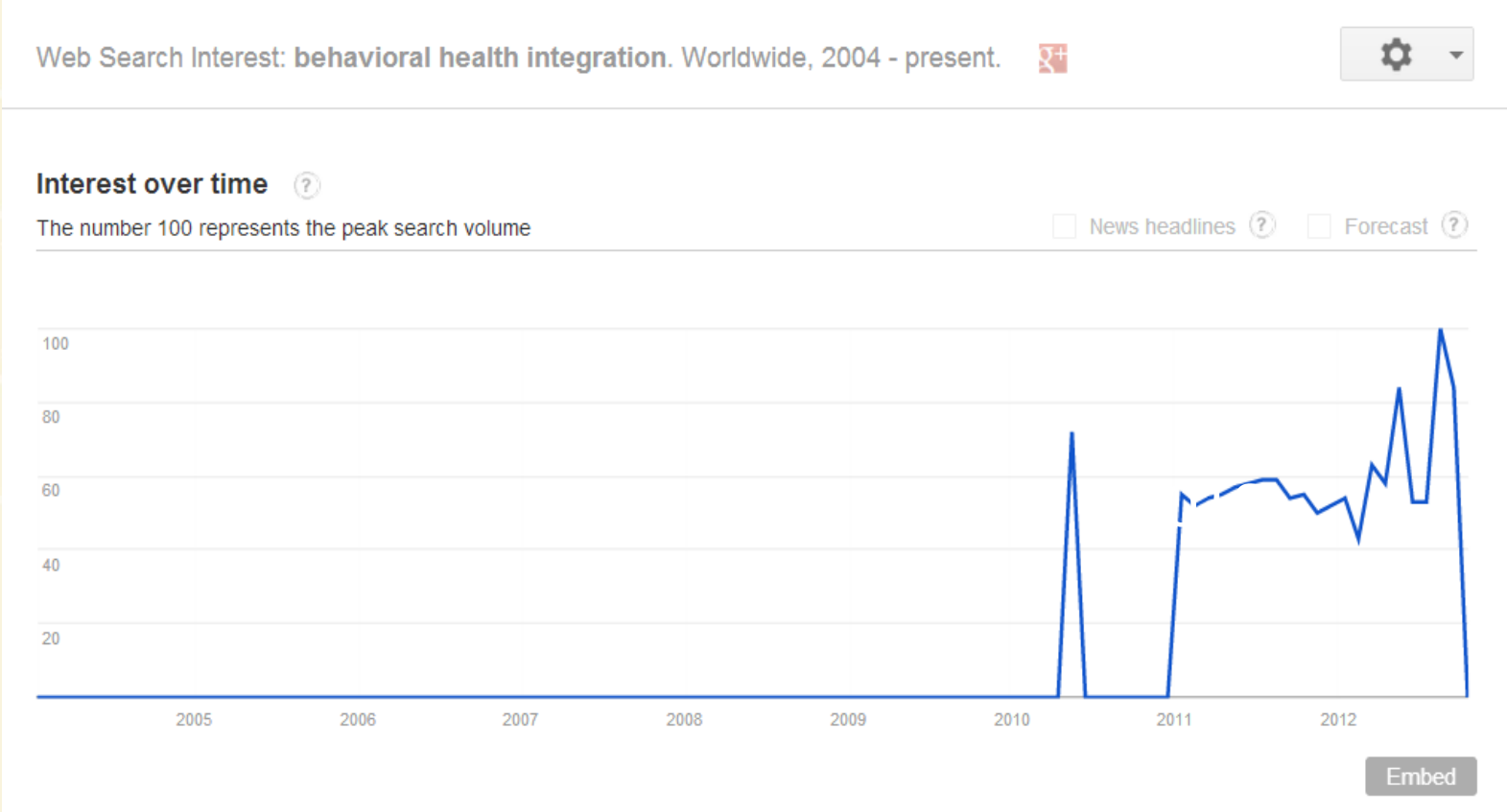


Secure/Private
Effective
Reliable
Mobile

Panasonic

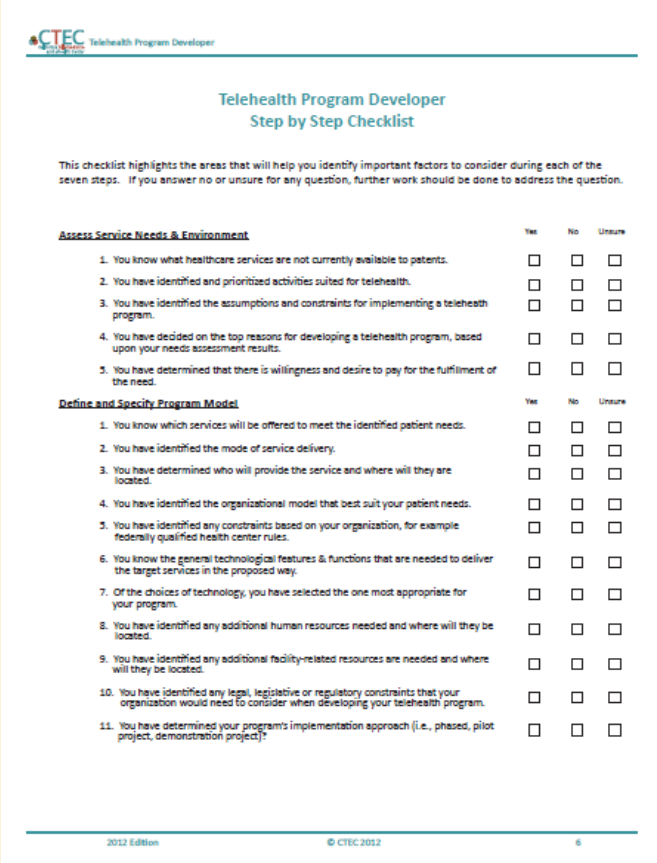
Google trends

"Behavioral Health Integration"



Implementation: Not linear

- **Assess service needs & environment**
- **Define and specify program model**
- **Develop business case**
- **Plan program and technology**
- **Develop performance monitoring plan**
- **Implement the telehealth program**
- **Monitor & improve program**



CTEC Telehealth Program Developer

Telehealth Program Developer
Step by Step Checklist

This checklist highlights the areas that will help you identify important factors to consider during each of the seven steps. If you answer no or unsure for any question, further work should be done to address the question.

Assess Service Needs & Environment	Yes	No	Unsure
1. You know what healthcare services are not currently available to patients.	☐	☐	☐
2. You have identified and prioritized activities suited for telehealth.	☐	☐	☐
3. You have identified the assumptions and constraints for implementing a telehealth program.	☐	☐	☐
4. You have decided on the top reasons for developing a telehealth program, based upon your needs assessment results.	☐	☐	☐
5. You have determined that there is willingness and desire to pay for the fulfillment of the need.	☐	☐	☐

Define and Specify Program Model	Yes	No	Unsure
1. You know which services will be offered to meet the identified patient needs.	☐	☐	☐
2. You have identified the mode of service delivery.	☐	☐	☐
3. You have determined who will provide the service and where will they are located.	☐	☐	☐
4. You have identified the organizational model that best suit your patient needs.	☐	☐	☐
5. You have identified any constraints based on your organization, for example federally qualified health center rules.	☐	☐	☐
6. You know the general technological features & functions that are needed to deliver the target services in the proposed way.	☐	☐	☐
7. Of the choices of technology, you have selected the one most appropriate for your program.	☐	☐	☐
8. You have identified any additional human resources needed and where will they be located.	☐	☐	☐
9. You have identified any additional facility-related resources are needed and where will they be located.	☐	☐	☐
10. You have identified any legal, legislative or regulatory constraints that your organization would need to consider when developing your telehealth program.	☐	☐	☐
11. You have determined your program's implementation approach (i.e., phased, pilot project, demonstration project)?	☐	☐	☐

2012 Edition © CTEC 2012 6

http://www.caltrc.org/program-developer

To receive a kit, please contact CTEC at (877) 590-8144.

Source: California Telemedicine and eHealth Center (CTEC). The CTEC Telehealth Program Developer Kit. Funded through the generous support of the Health Resources & Services Administration (Grant No. G22TH0770), The California Endowment and the Blue Shield of California Foundation.

For every problem there is a solution

Cost of technology

Sustainability

- Medicare
- Medicaid
- Commercial health plans
- Uninsured
- FQHC's and similar
- Value based payment environments

Low Bandwidth and stubborn firewalls

Workforce shortages

Lack of EHR

ROI vs Value Proposition

Improve access and follow through

Increase case finding [1]

Implement evidence based practices

- BH Conditions
- Health Behaviors

Provide decision support

Improve chronic illness management [2]

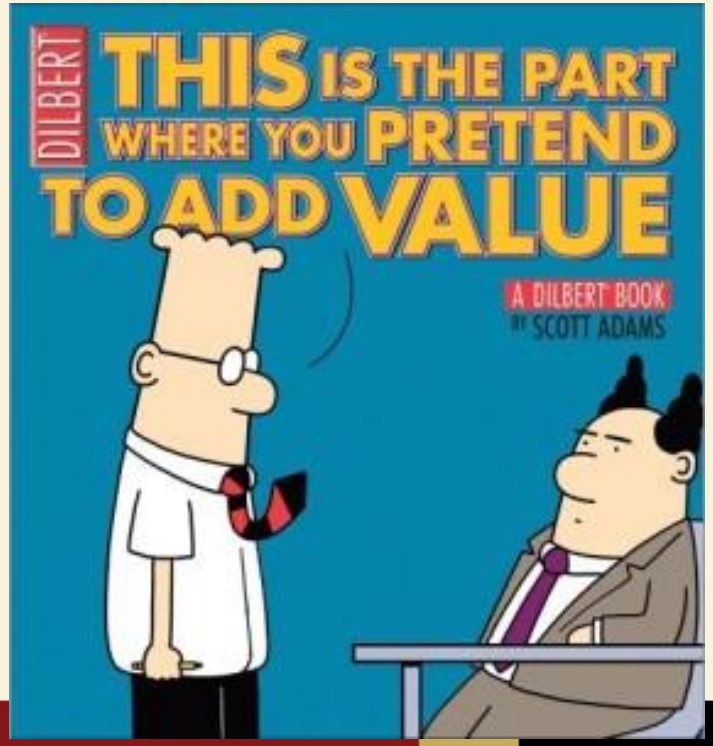
Reduce costs [3,4]

Improve attendance and adherence

Redeploy PCP time

Reduce travel strain and cost [5]

Increase realization of quality incentives



Citations for "Value Proposition"

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2. Edward H. Wagner, Brian T. Austin, Connie Davis, Mike Hindmarsh, Judith Schaefer, and Amy Bonomi. Improving Chronic Illness Care: Translating Evidence Into Action. HEALTH AFFAIRS ~ Volume 20, Number 6. November / December 2001.
3. Bogner, Post, Morales, Bruce. *Diabetes Depression and Death: A randomized controlled trial of a depression treatment program for older adults based in primary care (PROSPECT)* . ***Diabetes Care* 30:3005–3010, 2007.**
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