



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 4

Technology & Logistics

July 24, 2013



Today's Speakers

Michael R. Lardiere, LCSW
VP HIT & Strategic Development
National Council for Community
Behavioral Healthcare

Jonathan Neufeld, Ph.D.
Clinical Director/Principal Investigator
Upper Midwest Telehealth Resource Center
jneufeld@inhse.net



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 Topography; 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](#)



Polling Question

Telehealth has a very limited number of uses:

- True
- False



Jonathan Neufeld, Ph.D.



The Telehealth Market(s)

- Large Hospitals & Medical Specialty Groups
 - Video Consults with peripherals, integrated EMR
 - Tele-Stroke, Tele-ICU, Home Monitoring
- Small Hospitals, Medical Specialists
 - Video Consults with some peripherals
- Small Practices
 - Live 2-way interactive video, no peripherals
 - *** Significant overlap with business video market



Telehealth Market Dynamics

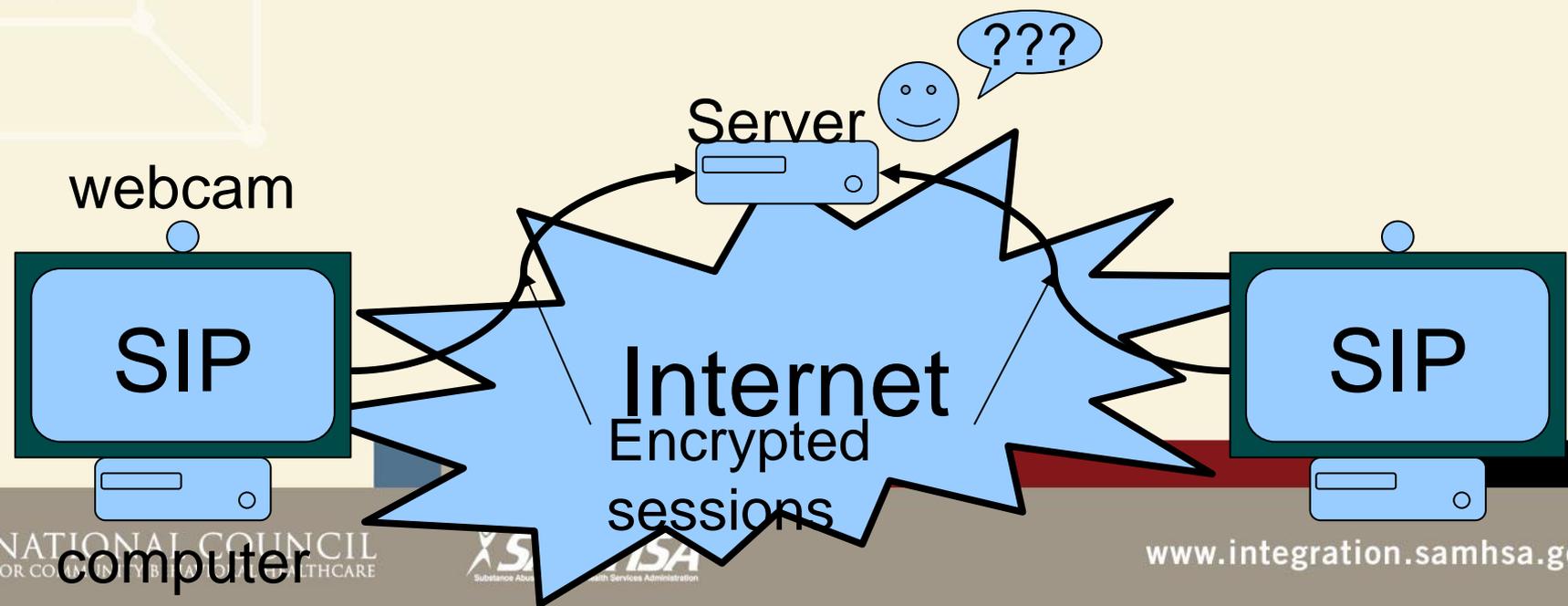
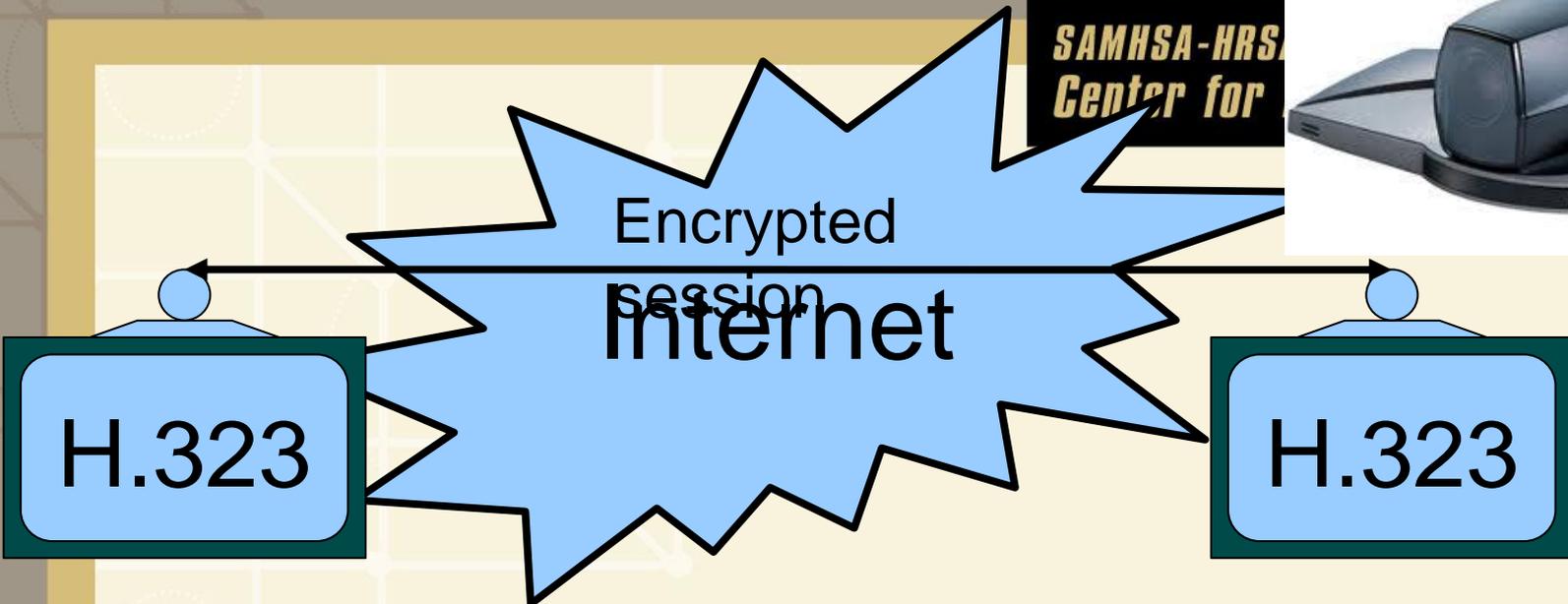
- Market size drives commoditization
 - Interactive video has a huge market, so equipment and software costs are driven down
- Specialty Applications: Tele-Stroke, Tele-ICU, EMR integration, Peripherals (stethoscope, etc.)
 - Smaller, more specialized market
 - Higher cost, “health care premium”
 - FDA regulation adds significant costs



Interactive Video Basics

- **High speed internet at both sites**
 - 1 Mbps or more (nominal)
 - Test at <http://speedtest.umflint.edu>
- **Endpoints – Two Major Classes**
 - **H.323 – Standalone system**
 - Hardware based, often older and/or larger
 - Tandberg, Polycom, LifeSize, Sony, etc.
 - **SIP – Client/server system**
 - Software based (using a host computer)
 - Skype, Oovoo, Vsee, ClearSea, Zoom, etc.
 - Mobile apps





Peripherals

- Camera – Dermatology, wound evaluation
 - Tremendous detail, resolution, lighting options
 - Unnecessary for many applications
- Stethoscope –
 - Several very good models available
 - Bluetooth (wireless) connections, excellent audio
- ENT Scope –
 - Multiple models available
 - Modular, easy to use



Integrating On Site Staff

- Manipulation of peripherals
 - Document training in equipment use
- Scope of Licensure
 - Telemedicine (in general)
 - Palpation, other specific techniques under direct supervision
- Two Key Strategies
 1. Trust – Develop strong working relationships
 2. Documentation – Policies & Procedures AND Case Notes
 - TRCs can provide examples of each



Resources

- Telehealth Technology Assessment Center
 - HRSA-funded technology-focused TRC
 - <http://www.telehealthtechnology.org/toolkits>
 - Best objective introduction
 - Information ages quickly, newest and most expensive equipment not covered



Phil Hirsch, PhD



Polling Question

The logistics of implementing telebehavioral health are too difficult:

- **True**
- **False**



Logistics

- Referral
- Scheduling
- BiDirectional PHI
- Prescribing
- O/S Telemedicine coordinator



Referral

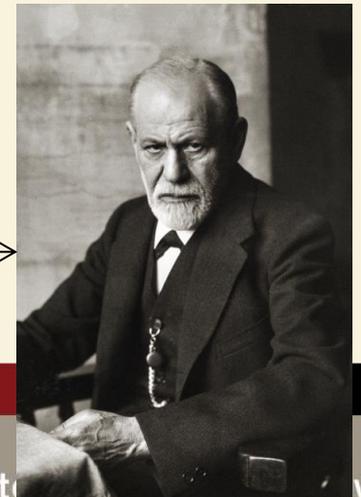


EMR – EMR

EMR viewed remotely

**Standard data set by
PDF**

- **Facesheet**
- **Problem list**
- **Medication list**
- **Recent labs**
- **Psychosocial hx**
- **Reason for referral**
- **Recent office notes**



Scheduling

- Establish template with Originating Site
- O/S access to Practitioner calendar
- Who is billing for service viz where the calendar lives (O/S or R/S)
- Rooming the patient/client
- How late is too late
- Who launches the video call
- Patient calls outside of scheduled hours



PHI Flow

- What is to be conveyed
- What is the timeliness expectation
- How is PHI conveyed
 - EMR to EMR
 - Fax
 - Other



Prescribing

- Who is prescribing
- ePrescribe or not
- Scheduled medications
- Local (agency/state) formularies and pre-auth



TM Coordinator



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



SAMHSA-HRSA
Center for Integrated Health Solutions



NATIONAL COUNCIL
FOR COMMUNITY BEHAVIORAL HEALTHCARE



www.integration.samhsa.gov

Please utilize the Listserv for communication on issues

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Attend Session V Implementation

When: August 7, 2013 @ 12:00 PM EST

Register Here: <https://www2.gotomeeting.com/register/120615058>

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