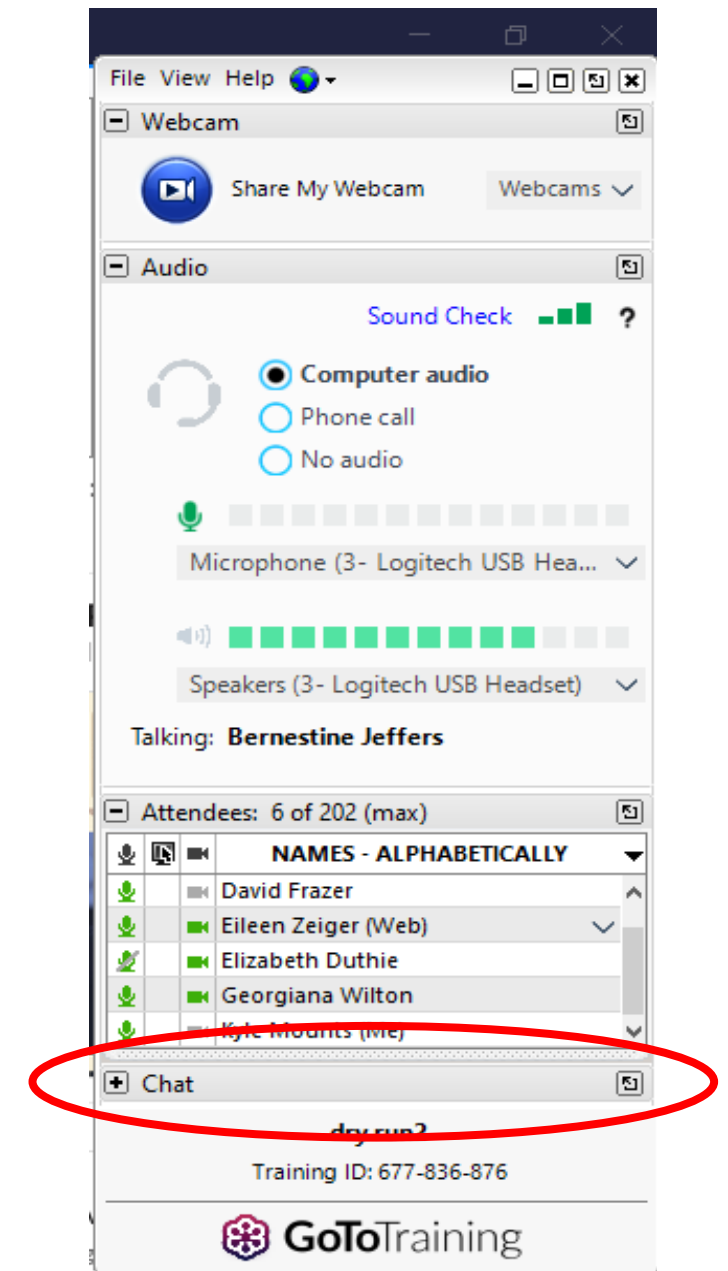# Introductions

- Thank you for joining us today.
- To introduce yourself, please enter your name and agency/organization in the chat box and send to all.

ECHO Etiquette

- Stay muted when we are not speaking to reduce extraneous noise
- Use the "raise hand" function to ask a question or make a comment, or put it in the Chat Room
- Be respectful of everybody, even if their ideas don't resonate with you
- Never disclose protected health information or any identifying information regarding the case study
- Help us keep the learning environment productive, positive, helpful, and safe

Accreditation for CME and CNE

- CME
  - The Wisconsin Association for Perinatal Care (WAPC) is accredited by the Wisconsin Medical Society to provide continuing medical education for physicians.
  - The Wisconsin Association for Perinatal Care (WAPC) designates this internet live course for a maximum of 1 *AMA PRA Category 1 Credit*^{TM}. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

- CNE
  - The Wisconsin Association for Perinatal Care (WAPC) is approved as a provider of nursing continuing professional development by the Wisconsin Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.
  - This internet live activity meets the criteria for a maximum of 1 contact hour.

WISCONSIN
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Wisconsin Collaborative of Treatment Professionals
FOR EDUCATION AND CAPACITY TRAINING

Reminders

- If you ever have questions or comments about any of our programs, please use the "Contact" function on the Wisconsin CONNECT website
- The didactic will be recorded and posted on the website along with responses to your questions.
- This is your last chance to **"introduce yourself"** to your colleagues in the **chat room**. Once the didactic begins, we'll reserve that space for questions.
- If the PowerPoint slides aren't large enough on your screen, drag the "gray bar" above the slide up or down to change the size–and you can remove the webcam coverage to just see the slides.
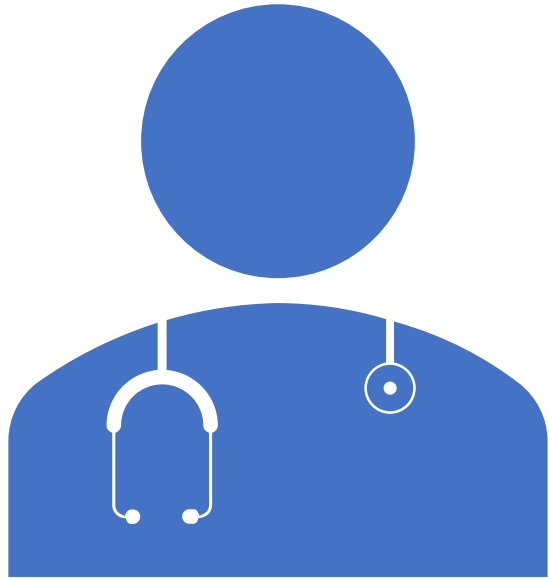
"Behavioral Health and Substance Use Treatment in the Telehealth Platform: Providing **Be**st **C**are on the Virtual Frontline."

Maria Elena Perez, PhD

Sixteenth Street Community Health Centers

Learning objectives:

- Validate Tele Health as a modality that is here to stay in the world of BH and SUD treatment

- Understand barriers to the establishing and delivery of Tele Health practices

- Recognize at least three best practices for TeleHealth practices

- Understand important aspects to include in TeleHealth Policies and Procedures

**Enhanced options in Health Care Delivery
A VERY Brief History**

- First used in the late 1800s with the invention of the telephone

- 1920s: Haukeland University Hospital in Norway began using two-way radio communications with ships to consult with physicians and to direct treatment.

- By 1925, the theoretical concept of the "radio doctor" providing distance care using audio and video was described in an often-cited article in *Science and Invention* magazine

- 1990s: the "developmental years" of telemedicine.
  - more available and affordable
  - passage of state and federal legislation as a reimbursable mode of care provision.
  - large hub-and-spoke networks
  - Several programs were subsidized

- Balanced Budget Act of 1997 (BBA) mandated Medicare reimbursements for telehealth care and funding for telehealth demonstration projects

Enhanced options in Health Care Delivery
A VERY Brief History

- 2000-2010: telehealth outpatient services included nearly every conceivable outpatient clinical service across the 50 states

- Development and innovation in telehealth continues at an exponential rate.

- Increasingly accepted as a legitimate and, in some cases, the preferred method of care delivery.

History of Telehealth | Understanding Telehealth | AccessMedicine | McGraw-Hill Medical (mhmedical.com)
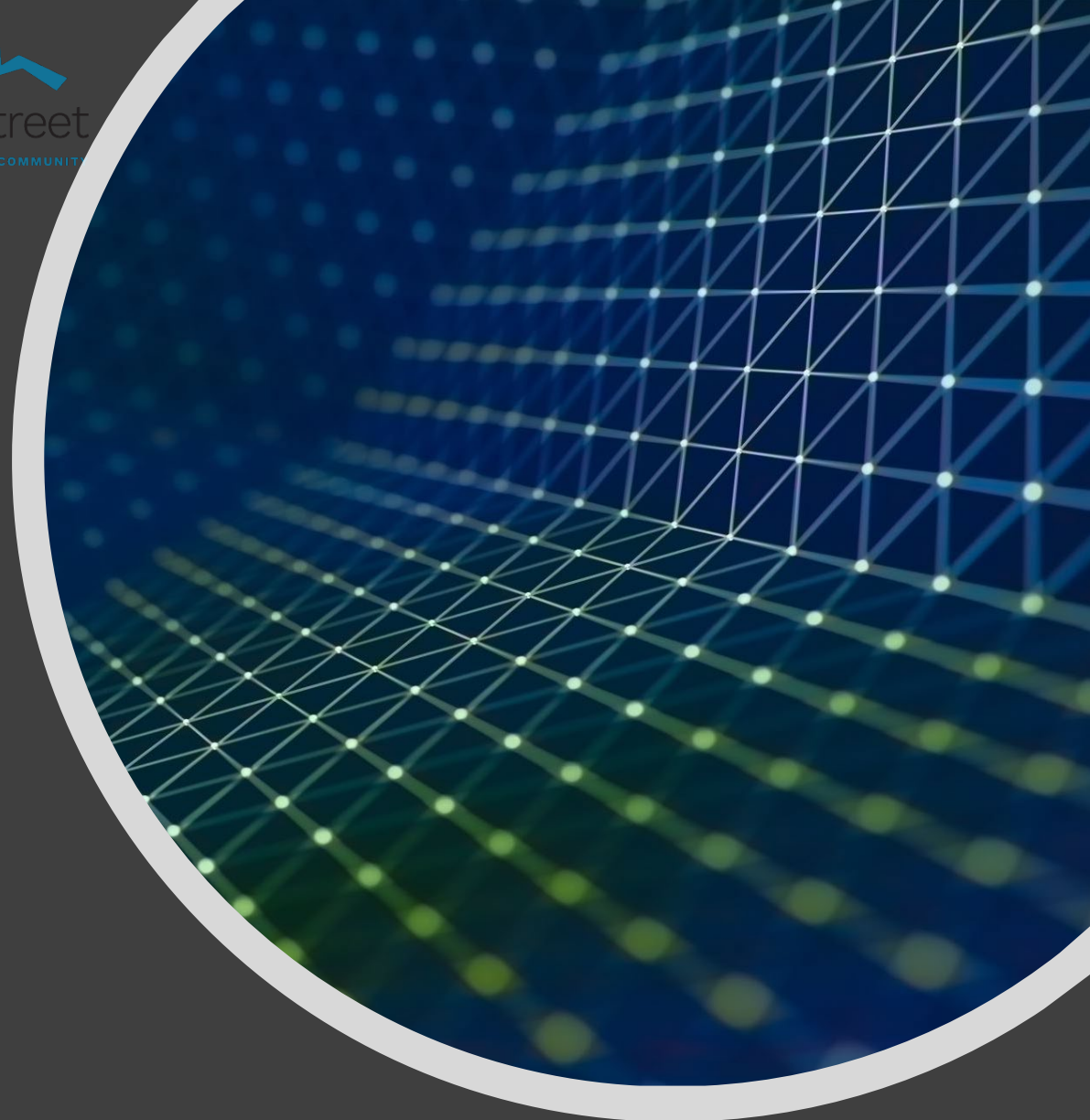
The Advent of COVID-19

Statewide response

Impact on the field of mental health and substance use treatment

Provider adjustments
- Paradigm shift
- Modified practices
- Management of client adjustment….

Re-Entry

Extending our Reach to Address Community needs

Since 2016

- Over 216,685 encounters
- 186,099 BH encounters
- 24,731 SUD encounters
- 5855 MAT encounters

- Since adopting telehealth at SSCHC BH/SUD: Jan 2020-April 2021 (reflective of COVID)

  - Telephonic: 6359 distinctive patients
  - Total visits = 41,191!!

  - TeleHealth: 1,962 distinctive
  - Total visits = 7,055

Barriers to the Delivery of TeleHealth

- **Funding for TeleHealth equipment**

- **Community readiness**

- **Selecting the right platform**

- **Provider competency and sense of self-efficacy**

- **Patient resistance**

- Training in how to use interactive measures (whiteboard technology, etc to translate therapeutic resources or activities to online platform)

- How to use effectively document sharing and other HIPPA approved platform functions.

- **Logging in for patients with vision problems**

- **Running virtual groups**

- Not being able to get vitals for prescribing meds or seeing the whole person to do an objective test to rule out any side effects.

- **Workflows for collecting signatures**

- **Trouble-shooting IT and connectivity issues**

- **Access to a private location for the appointment (patient)**

- **Change management**

- **Coding the appointments properly in order to collect good data on TeleHealth Utilization**

- **Apprehension about the future of TeleHealth reimbursement**

Best Practices

APPLY THE SAME ETHICAL AND PROFESSIONAL STANDARDS OF CARE AND PROFESSIONAL PRACTICE THAT ARE REQUIRED WHEN PROVIDING IN-PERSON PSYCHOLOGICAL SERVICES.

EXAMINATION OF THE POTENTIAL RISKS AND BENEFITS FOR THE CLIENT'S/PATIENT'S PARTICULAR NEEDS

MOST APPROPRIATE MEDIUM (E.G., VIDEO TELECONFERENCE, TEXT, EMAIL, ETC.)

CONSIDERING WHETHER COMPARABLE IN-PERSON SERVICES ARE AVAILABLE, AND WHY SERVICES DELIVERED VIA TELEHEALTH ARE EQUIVALENT OR PREFERABLE TO SUCH SERVICES.

CONTINUED ASSESSMENT OF THE APPROPRIATENESS OF PROVIDING TELEHEALTH SERVICES THROUGHOUT THE DURATION OF THE SERVICE DELIVERY.

Best Practices

Take reasonable steps to ensure competence with both the technologies used and the potential impact of the technologies on clients/patients

Carefully assess the remote environment in which services will be provided, to determine what impact, if any, there might be to efficacy, privacy and/or safety

Obtain and document informed consent that specifically addresses the unique concerns related to telehealth services

Maximize effort to protect and maintain the confidentiality of the data and information relating to clients/patients and inform them of the potentially increased risks to loss of confidentiality inherent in the use of the telecommunication technologies, if any.

Best Practices

- Ensure that security measures are in place to protect data and information related to their clients/patients from unintended access or disclosure.

- Comply with all relevant laws and regulations when providing telehealth services to clients/patients across jurisdictional borders.

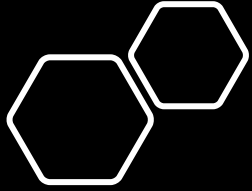https://www.apa.org/practice/guidelines/telepsychology

Other aspects...

- Adequate internet connection to support streaming video
- Ease of documentation into EMR
- Must have private location to conduct telehealth visits; HIPAA privacy precautions still apply

Policies and Procedures

- Clear statement of purpose for the policy
- Statement of qualification of providers performing telehealth
- Statement of basic proficiency in teleconferencing and use of EMR
- If work is remote from home, should include expectation of home office environment and assurance of privacy
- Adherence to IT requirements and recommendations
- Clear description of workflows
- Emergency protocol
- Scheduling protocol
- Process for informed consent and release of information

Closing

- Thank you for participating today.

- Plan to attend the next ECHO
  - Thursday, June 10, 2021
  - Topic: *Women with Disabilities: Implications for Treatment and Recovery*
  - Speaker: Georgiana Wilton, PhD
  - Case presentation: If you have a case to present, let us know!

- We will put a link to this session's evaluation in the chat box now. Please take the time to fill it out and help us make this ECHO as useful to you as possible. If you want CE credits, an evaluation is required.