# TELEHEALTH: A BRIDGE TO MENTAL HEALTH & ADDICTION TREATMENT SERVICES

Addressing Ohio's Greatest Health Challenges Through Technological Innovation
February 19, 2019

## **KEY POINTS**

 Telehealth can be used to provide mental and substance use disorder treatment services effectively and efficiently.

Where are there barriers to utilizing telehealth.

Where are the current opportunities to use telehealth.

#### TelehealthResourceCenter.org











## **DISCLAIMERS**

 Any information provided in today's talk is not to be regarded as legal advice. Today's talk is purely for informational purposes.

Always consult with legal counsel.

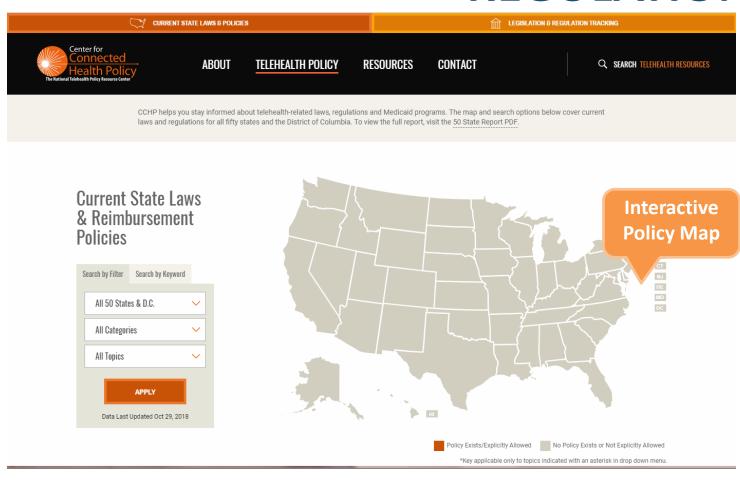
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CCHP is an independent, *public interest* organization that strives to advance state and national telehealth policies that promote better systems of care improved health outcomes and provide greater *health equity* of access to quality, affordable care and services.



# TELEHEALTH STATE-BY-STATE POLICIES, LAWS & REGULATIONS



#### **Search by Category & Topic**

#### **Medicaid Reimbursement**

- Live Video
- Store & Forward
- Remote Patient Monitoring Reimbursement

#### **Private Payer Reimbursement**

- Private Payer Laws
- Parity Requirements

# **Professional Regulation/Health** & Safety

- Cross-State Licensing
- Consent
- Prescribing
- Misc (Listing of Practice Standards)



#### **CENTER FOR CONNECTED HEALTH POLICY**

# WHAT IS TELEHEALTH?



A doctor's diagnosis "by radio" on the cover of the February, 1925 issue of Science and Invention magazine

## WHAT IS TELEHEALTH?



Telehealth is a <u>means</u> of enhancing health care, public health, and health education delivery and support using digital telecommunication technologies.

# **TELEHEALTH & ITS MODALITIES**



Synchronous or Live Video



Remote Patient Monitoring



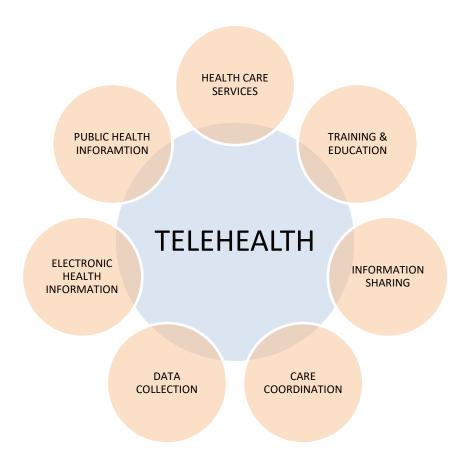
Asynchronous or Store-and-Forward



mHealth



# TELEHEALTH GOES BEYOND JUST PROVIDING HEALTH CARE SEVICES



### **TELEHEALTH UTILIZATION IN MEDICARE 2014-2016**

#### CMS NOV 2018 REPORT ON THE USE OF TELEHEALTH 2014-2016 IN MEDICARE

- In 2016 90,000 FFS Medicare beneficiaries used 275,199 telehealth services which is 0.25% of the total number of beneficiaries (35 million)
- Majority of the telehealth encounters were mental health
- 85.4% of the 90,000 had at least one mental health diagnosis
- White/Non-Latino beneficiaries received 80% of the telehealth delivered services

## **TYPES OF POLICY BARRIERS TO TELEHEALTH**

### REIMBURSEMENT

- The Provider
- The Modality
- The Location of the patient
- The Service

# LICENSING PRESCRIBING

# USING TELEHELATH FOR MENTAL/BEHAVIORAL HEALTH

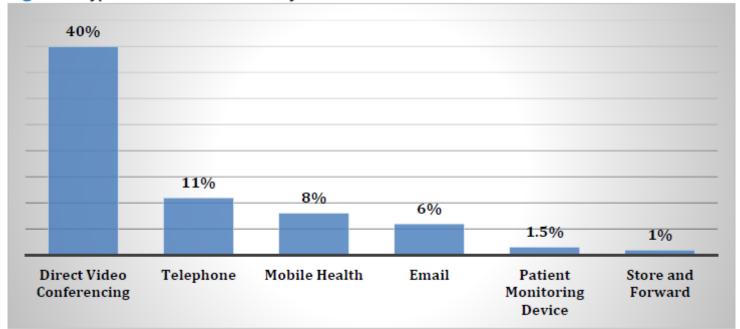
"The Use of Telehealth Within Behavioral Health Settings: Utilization, Opportunities, and Challenges" – School of Public Health: Behavioral Health Workforce Research Center, University of Michigan, March 2018

- Conducted a survey of 329 behavioral health provider organizations representing all 50 states
- Respondents overwhelmingly agree telehealth is important to success of organization
- It can reach more patients
- Allows for more efficient workflow
- But barriers still remain to in utilizing it

# USING TELEHELATH FOR MENTAL/BEHAVIORAL HEALTH

"The Use of Telehealth Within Behavioral Health Settings: Utilization, Opportunities, and Challenges" – School of Public Health: Behavioral Health Workforce Research Center, University of Michigan, March 2018



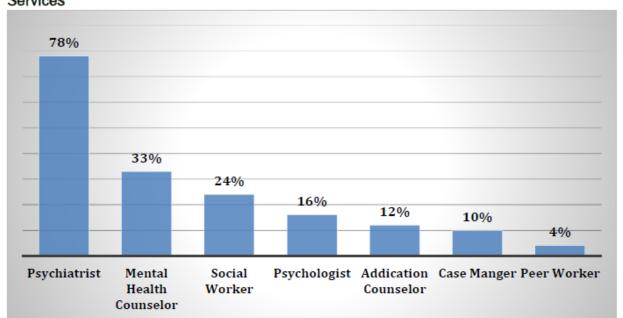




# USING TELEHELATH FOR MENTAL/BEHAVIORAL HEALTH

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Figure 3. Reported Types of Providers that Can Use Telehealth to Deliver Behavioral Health Services





### **MEDICATION ASSISTED THERAPY**

- Medication Assisted Treatment (MAT) considered a gold standard in treating SUD
- MAT uses both administration of medication (for example a controlled substance like buprenorphine) to wean a patient off their addiction and behavioral health therapy
- Telehealth has been used to provide mental/behavioral health therapy
- Use of telehealth for the prescribing and administration of medication is less common
  - For prescribing there are statutory barriers in prescribing the use of controlled substances
  - Concerns on using telehealth for administration (but less legal barriers)

## **MEDICARE - Telehealth**

#### SOCIAL SECURITY ACT OF 1835(m) or 42 USC 1395m

- Only Live Video reimbursed
- Store & Forward (Asynchronous) only for Alaska & Hawaii demonstration pilots
- Specific list of providers eligible for reimbursement
- Limited to rural HPSA, non-MSA, or telehealth demonstration projects
- Limited types of facilities eligible
- Limited list of reimbursable services, but CMS decides what can be delivered via telehealth and reimbursed

# OPIOIDS/SUBSTANCE USE DISORDER

- The SUPPORT for Patient and Communities Act required CMS to adjust their reimbursement policy of telehealth for treating individuals with SUDs or a cooccurring mental health disorder.
- Removed the originating site geographic requirements for telehealth services on or after July 1, 2019 for any existing Medicare telehealth originating site (except for a renal dialysis facility).
- Home was made an eligible originating site for purposes of treating these individuals, however the home would not qualify for the facility fee.
- Within 5 years a report of the impact of telehealth services on SUD must be submitted by the Secretary

# OPIOIDS/SUBSTANCE USE DISORDER

## OTHER SUD/OPIOID RELATED POLICIES

- Guidance by CMS given to states regarding options for receipt of federal funds for Medicaid covered treatment of SUD through telehealth
- Guidance by CMS on availability of federal funding in Medicaid coverage for SUD treatment services using telehealth through managed care and school-based health centers
- Within one year the DEA must have final regulations for a special registration to remotely prescribe Suboxone/Buprenorphine through telehealth

### STATE EXAMPLES OF USING TELEHEALTH TO TREAT SUD

#### **WEST VIRGINIA**

 Passed legislation that allowed a practitioner providing MAT to use telehealth if his/her scope of practice allowed for it. — Under Medication-Assisted Treatment Program Licensing Act.

#### **MINNESOTA**

- Medicaid covers alcohol and substance abuse structured assessment and intervention services.
- Some eligible originating sites: SUD treatment facility, withdrawal management facility, drug court office, community mental health facility, the home

#### **MISSOURI**

 Comprehensive Substance Treatment and Rehabilitation (CSTAR) program in MO Dept of Mental Health – full continuum of care approach to SUD. Allows medication services to be provided via telehealth.

## **OHIO TELEHEALTH POLICY**

- OH Medicaid will reimburse for live video for specific CPT Codes
  - 99201-99215, 99241-99245, 99251-99255, 90791-90792, 90832-09838, 90863
  - Eligible distant site provider (the specialist who is treating from a distance): physician, psychologist, FQHC – Medical and Mental Health
  - Originating sites limited excludes the home

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## **RESOURCES**

Center for Connected Health Policy www.cchpca.org

**UpperMidwest Telehealth Resource Center www.umtrc.org** 

Telehealth Resource Center www.telehealthresourcecenter.org

# **THANK YOU!**

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