Digitally Integrated Primary Care and Behavioral Health

January 10, 2019, 12-1pm

David M. Bergman, MPA
Principal, Health Management Associates

Lori Raney, MD
Principal, Health Management Associates
Telehealth Learning Lab Webinar Series

Telehealth program design and implementation aligns with behavioral health integration activities, addresses specialty care clinician shortages and concerns identified through the primary care collaborative and transformation work, and provides options for cost savings throughout the delivery system.

All practices and partners are encouraged to join!

Recorded webinars will be posted on https://www.choosehealthde.com/
<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Topic</th>
<th>Link</th>
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</thead>
<tbody>
<tr>
<td>Wednesday, December 19</td>
<td>Noon EST</td>
<td>Introduction to Telehealth and Opportunities in the Delaware Market</td>
<td><a href="https://healthmanagement.zoom.us/j/421874303">https://healthmanagement.zoom.us/j/421874303</a></td>
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<tr>
<td>Thursday, January 19</td>
<td>Noon EST</td>
<td>Digitally Integrated Primary Care and Behavioral Health</td>
<td><a href="https://healthmanagement.zoom.us/j/715946640">https://healthmanagement.zoom.us/j/715946640</a></td>
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<tr>
<td>Wednesday, January 19</td>
<td>Noon EST</td>
<td>Additional Technology Enhanced Solutions in Health Care Delivery</td>
<td><a href="https://healthmanagement.zoom.us/j/343202752">https://healthmanagement.zoom.us/j/343202752</a></td>
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<tr>
<td>Friday, January 18</td>
<td>Noon EST</td>
<td>Telehealth Reimbursement and Payment Models</td>
<td><a href="https://healthmanagement.zoom.us/j/368434599">https://healthmanagement.zoom.us/j/368434599</a></td>
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<tr>
<td>Tuesday, January 22</td>
<td>Noon EST</td>
<td>Telehealth Business Plan Development and Readiness Assessment</td>
<td><a href="https://healthmanagement.zoom.us/j/368526663">https://healthmanagement.zoom.us/j/368526663</a></td>
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<td>Thursday, January 24</td>
<td>Noon EST</td>
<td>Vendor and Equipment Selection</td>
<td><a href="https://healthmanagement.zoom.us/j/562927139">https://healthmanagement.zoom.us/j/562927139</a></td>
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<tr>
<td>Tuesday, January 29</td>
<td>Noon EST</td>
<td>Use Cases from the Field</td>
<td><a href="https://healthmanagement.zoom.us/j/733628596">https://healthmanagement.zoom.us/j/733628596</a></td>
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HMA does not endorse any specific vendors for telehealth (or digital health) platforms or equipment, though we do endorse the idea that telehealth (digital health) is important and impactful in healthcare transformation. For this reason, we do work with a number of companies in the digital health space.
TODAY’S AGENDA

▪ Spectrum of Digital Possibilities to use in Integrated Settings
▪ Focus on: Patient-Facing Technology, ProjectECHO, eConsult, Tele-hubs
▪ Using Technology for Addressing Behavioral Health in Primary Care Settings
▪ Telepsychiatry Overview
▪ Next Steps
  ▪ Action items for participants
  ▪ Next Webinar
  ▪ Options for follow-up Technical Assistance with speakers
SPECTRUM OF DIGITAL POSSIBILITIES TO USE IN INTEGRATED SETTINGS

LORI RANEY, MD
EFFECTIVE INTEGRATED CARE

Informed, Activated Patient

PCP supported by Behavioral Health Care Manager

Measurement-guided Treat to Target

Psychiatric Consultation

Caseload-focused Registry review

Education

Modified from uwaims.edu and used with permission
# TELEHEALTH IN INTEGRATED CARE

<table>
<thead>
<tr>
<th>Task</th>
<th>Technology</th>
<th>Ideal</th>
<th>Staff</th>
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<tbody>
<tr>
<td>Screening</td>
<td>Secure patient portal</td>
<td>Interfaces with EMR – avoid double entry</td>
<td>Paraprofessional</td>
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<td></td>
<td>Automated voice response</td>
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<tr>
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<td>Pre-Formatted Screening Tool</td>
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<tr>
<td>Outreach and Engagement</td>
<td>Above plus: Remote wearable sensors</td>
<td>Reduce phone tag</td>
<td>Paraprofessional</td>
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<td></td>
<td>Text messaging (SMS/HIPPA compliant ap)</td>
<td>Two or more contacts/month</td>
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<td>Treatments</td>
<td>Decision supports</td>
<td>Practice extenders</td>
<td>Professional (licensed),</td>
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<td>Text messaging apps (SMS/HIPPA compliant apps)</td>
<td>Interface with EMR</td>
<td>Paraprofessional</td>
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<td></td>
<td>Automated voice response</td>
<td>Prompts for next contact</td>
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<tr>
<td></td>
<td>Online therapy</td>
<td>Remote telehub</td>
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<td>Virtual visit - telepsychiatry</td>
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<tr>
<td>Measure</td>
<td>Patient portal, SMS, apps</td>
<td>Interface with EMR</td>
<td>Paraprofessional</td>
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<tr>
<td>Psychiatric Consultation</td>
<td>eConsult</td>
<td>Online registry, access to EMR</td>
<td>Professional (licensed)</td>
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<td></td>
<td>Store and forward</td>
<td>Prompt for next consult interval</td>
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<td></td>
<td>Secure messaging</td>
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<tr>
<td>Registry Review</td>
<td>Online</td>
<td>Online and EMR compatible</td>
<td>Professional (licensed)</td>
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<tr>
<td>Education</td>
<td>Project ECHO</td>
<td>CME, RVU credit</td>
<td>Professional (licensed)</td>
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<tr>
<td></td>
<td>eConsult</td>
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Raney, Bergman, Hasselberg, Torous: Digitally Driven Primary Care and Behavioral Health: How Technology Can Expand Access to Effective Treatment. Current Psych Rep, 19 (86), 2017
PATIENT-FACING TECHNOLOGY

DAVID BERGMAN, MPA
TECHNOLOGY ENABLED BEHAVIORAL HEALTH IN PRIMARY CARE

Patient Facing Technology

Apps and Web Services
Text Messaging and Apps
Digital Therapeutics

Self Management
self-help, fitness, affirmative prompts, relaxation, steps, personal exploration

Practice Extenders
remote monitoring, reminders, follow up assessments, reduce phone tag

Practice Extenders
variety of approaches including online therapies (like CBT) and coaching modules

Build PCP Capacity to Treat
Mild to Moderate Behavioral Conditions

Decision Supports

e-Consult

Project ECHO®

Remote Tele-Hub

Telepsychiatry

Virtual Visit

Embedded In EHR
treatment pathways, clinical formulation, prescribing and treatment algorithms

Consultation Platform
primary care to specialist, all cases with consultation input, education

Telementoring and Education
didactics and case presentations, "hub" and "spokes", collaborative learning

Collaborative Care
curbsides, outreach and treatment, registry review, Child Access Projects

Direct Evaluation
evaluation by specialist, documentation, asynchronous model, teletherapy

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Health Management Associates
Digital Therapeutics

- Use of the tool causes behavioral/emotional changes
- Condition-Specific
  - Depression
  - Anxiety

Examples:
- Online Cognitive Behavioral Therapy
- Mood/Symptom Tracker
- Behavioral Goal Tracking
Text Messaging & Communication Apps

- Patient ↔ Provider Communication
  - Text, audio, video, structured formats (i.e. screening tools)
PATIENT FACING TECHNOLOGY

Apps and Web Services
- Activity Trackers
- Smart Watches
- Medication Alarms/Reminders

Resources:
- https://www.psycom.net/25-best-mental-health-apps
Deep Dive: Digital Health Tool at Montefiore Medical Center*

- Communication platform including screening tools with remote monitoring (activity, distance traveled, etc.)
- Implemented in 2015 as part of Montefiore’s Collaborative Care Model in a Primary Care/Behavioral Health integrated setting
  - “Using patient-reported data and other inputs, managers can track patients making little progress and deliver more timely coaching support and communicate with the PCP and psychiatric consultant to make prompt treatment adjustments when needed.”
  - “The...application helped care managers maintain increased caseloads by supporting patient engagement, symptom monitoring, timely follow up, and promotion of patient self-management.”

*From Leavitt Health Case Study Brief, “Leveraging Digital Technology to Improve Behavioral Health Integration with Primary Care”, March 2018
Deep Dive: Digital Health Tool at Montefiore Medical Center*

- Deployed with 429 Patients from 9/2016 to 1/2018

- Outcomes:
  - Care managers increased their caseload from 60-70 to 90-100 patients
  - Patients using the app showed higher engagement and follow-up rates compared to patients not using the application
  - App users received a follow-up at 8 days (average), while non-app users had their first follow up at 19 days (average)
  - More enrolled patients had higher baseline PHQ-9 scores, and more than one episode of care suggesting greater clinical needs; yet app users demonstrated similar clinical outcomes: ~50% improvement from baseline PHQ-9 score or a nonclinical score of < 10.

*From Leavitt Health Case Study Brief, “Leveraging Digital Technology to Improve Behavioral Health Integration with Primary Care”, March 2018
APA APP EVALUATION FRAMEWORK

The American Psychiatric Association App Evaluation Model

- Interoperability: Meaningful data use and sharing
- Usability and adherence
- Potential for benefit
- Assessing for harm
- Context and background
- Evidence
- Risk
- Ground
- Ease of use

USING TECHNOLOGY FOR ADDRESSING BH IN PRIMARY CARE SETTINGS:

PSYCHIATRIC E-CONSULT

LORI RANEY, MD
TECHNOLOGY ENABLED BEHAVIORAL HEALTH IN PRIMARY CARE

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Psychiatric eConsult – Why do this for Behavioral Health?

- 96% of U.S. counties had at least some unmet need for psychiatric prescribers.
- 77% of U.S. counties had a severe shortage of mental health prescribers or non-prescribers, with over half their need unmet.

Thomas, K., et al. Psychiatric Services 2009
Psychiatric eConsult

“We define electronic consultations (‘e-consults’) as asynchronous, consultative, provider-to-provider communications within a shared electronic health record (EHR) or web-based platform.”

Primary Care Provider
- Has question
- Completes template, attaches note, labs
- Sends to psychiatrist
- Checks for results
- Decides if will implement

Psychiatric Provider
- Reviews consult
- Responds 24-48 hrs.
- Provides several suggestions including referral for direct care
- Attaches educational material

EMR or Commercial E-Consult Platform

Psychiatric eConsult – Why do it?

- Decreases patient waiting times for specialist input. (2,3)
- **Reduces costs to patients and payers** (4,5).
- Increases communication between PCP’s and specialists (2,3)
- Allow for non-visit collaboration between providers, reducing inconsistencies. (3)
- **Open up staff time to see patients who benefit the most from face-to-face expertise.** (3)
- Shortens specialist visit duration. (3)
- Reduce travel for non-local patients. (3)
- **Reduces unnecessary referrals to specialists** (4)
- High PCP, Specialist and Patient satisfaction (1,5)

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2. AAMC News 2017
3. Mayo Clinic CFI
Psychiatry e-Consult Template for Depression

**Identifying Information**

*Name, age, sex*

Prior failed medication trials include: *(failure is defined as at least six weeks continuous use of an adequate dose). (could have check box)_

- Fluoxetine/Prozac (>30mg)
- Paroxetine/Paxil (>30mg)
- Sertraline/Zoloft (>100mg)
- Celexa/Lexapro (>20mg)
- Venlafaxine/Effexor (>150mg)
- Duloxetine/Cymbalta (60mg)
- Buproprion/Wellbutrin (>150mg)

Patient has a history of trauma/PTSD - Y/N DROP DOWN FORMAT

Patient has a history or active Substance use disorder - Y/N DROP DOWN FORMAT

If yes, please check all that apply (CHECK BOX FORMAT)

- Alcohol, Marijuana, Opiates, Benzodiazepines
- Stimulants/Cocaine, Other

**Rating Scales:**

- PHQ9
- AUDIT
- GAD7
- Other

**Current Medications:**

Last PCP or other note, labs attached? Y/N

**Clinical Question:**

(Current Text box)
Psychiatric eConsult - LA County Example

- Division of Mental Health has psychiatrists and eConsult platform
- Utilized by Division of Health Services primary care practices for behavioral health consultation
- Used by DMH psychiatric providers for physical health questions
USING TECHNOLOGY FOR ADDRESSING BH IN PRIMARY CARE SETTINGS:
PSYCHIATRIC MED PROJECT ECHO
LORI RANEY, MD
How it Works

Methods:

Use Technology to leverage scarce resources such as psychiatric expertise

Sharing “best practices” to reduce disparities

Case based learning to master complexity – PCPs learn to manage patients with mild to moderate psychiatric disorders

Web-based database to monitor outcomes

Develops tele-mentoring supports for PCPs
Psych ECHO: Examples

**Oregon**
- OHSU – hub
  - Psychiatrist, psychologist, social worker, nurse, PCP, naturopath
  - 30 minutes didactics
  - 60 minutes case presentations
- CCO practices – spokes
  - 15 primary care practices
  - 60 minutes a week for 16 weeks

**Colorado**
- Behavioral Health Provider – 8 week ECHO brief interventions
- PCP – psychiatric treatment of depression and anxiety
USING TECHNOLOGY FOR ADDRESSING BH IN PRIMARY CARE SETTINGS: BEHAVIORAL HEALTH TELE-HUBS

LORI RANEY, MD
**Specialty Behavioral Health Consultation “Hub”**

**A la carte menu:**

- Telepsychiatry
- Teletherapy
- Project ECHO
- eConsult
- Registry review
- PCP consultation
- Care management
- Case management
• Pediatric Access Lines – PALs
• 28 states – Delaware new awardee – 5 year grant!
• Child Psychiatrists
• Care Management – some
• Therapy – some
Behavioral Health Telehub Potential

Raney, Lasky, Scott: Integrated Care: A Guide for Effective Implementation
American Psychiatric Press, 2017
Modern Day Health Care First Envisioned in 1962
Telepsychiatry

✓ Increases ACCESS to psychiatric/behavioral health services
✓ Increases REACH to larger populations
Locations for Telepsychiatry

Outpatient

Correctional Settings

Emergency Rooms

International

Inpatient

Nursing Homes
Populations Considerations for Telepsychiatry

- Adults (veterans)
- Child – younger and adolescents
- Geriatric – a little more difficult but can be done – SNF projects
- Different ethnic groups – can also use for interpreters
- Synchronous and asynchronous telepsychiatry (ATP, store and forward)
- Collaborative Care – several studies – use for off-side care manager team, telehealth bunker

** Collaborative Care + Telepsychiatry = Access**
TELE-TEAMING – NEW APPROACH FOR TELEPSYCHIATRY

- Psychiatric provider joins team meetings – routine, complex care
- Diagnosis and Assessment
- Case Formulation and Treatment Planning
- Supervision, Education
- Therapy and Psychopharmacology

'Doc in a box' vs. 'tele-teaming': Contending models of ... - MDedge
https://www.mdedge.com/psychiatry/article/115329/practice...box-vstele-teaming.../1 Jay Shore, MD
Oct 25, 2016 - The real promise of telepsychiatry in the form of tele-teaming is how it can begin to fundamentally change how care is delivered.
Questions? Comments?

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Health Management Associates
NEXT STEPS
**NEXT STEPS**

- Contact us to get on our list for future webinar invites.
- Reach out to the speakers to request additional assistance.
- Look for a follow-up email:
  - Provide input for this and future sessions using the evaluation form.
  - Check the website for the webinar recording – coming soon.
- Save the dates for the next webinars.
  - **Additional Technology Enhanced Solutions in Health Care Delivery**
    - *Wednesday, January 16, Noon*
  - **Telehealth Reimbursement and Payment Models**
    - *Friday, January 18, Noon*

*Thank you!*