TELEHEALTH BEFORE COVID-19

Telehealth is defined as the provision of healthcare services to patients by a provider from a remote location through the use of telecommunications technologies.*

It was originally utilized to enable long-distance access for those living in rural areas where healthcare resources were not readily accessible. It was found to be helpful for other circumstances as well, including situations where transportation was a barrier, patients lacked mobility, or access to certain medical specialists and expertise were not readily accessible.

Telehealth was quickly identified as a valued alternative when face-to-face care was unable to occur, with minimal impact to the quality of care a patient received.

In fact, health outcomes were shown to improve as a result of the use of Telehealth, and this, in turn, has led to reduced healthcare costs.*

Prior to March 2020, Telehealth was a novel and untried method of delivering services for Connecticut’s non-profit behavioral health agencies. Hospitals in the state had utilized this approach to treat medical conditions with certain patient groups.

However, for behavioral health purposes (intakes, psychotherapy services, medication management, and Medication Assisted Treatment or MAT), it had not yet been approved as a healthcare delivery platform.

The Coronavirus pandemic quickly changed all of that! *California Telehealth Resource Center
At Community Mental Health Affiliates Inc. (CMHA), more than 800 patients are seen in a typical week in outpatient behavioral health treatment programs, which offer individual, group and intensive outpatient group therapy services to adults, children and families.

When the COVID-19 crisis hit, the agency took quick action to implement prevention measures for the well-being and safety of clients and staff, including the practice of social distancing, posting CDC informational flyers in common areas, performing deep cleaning, and making hand sanitizers available to all staff and clients. More importantly, this also prompted a rapid mobilization of staff and limited resources to transition from face-to-face to remote delivery of care immediately following Governor Lamont’s executive order permitting Telehealth for behavioral health services.

Converting to Telehealth was no small feat. In the course of three short days, CMHA had to equip all staff with laptops and smartphones, adjust billing codes, train staff in the Telehealth platform, reschedule clients for Telehealth visits, and help clients navigate their appointments through their smartphones. With the guidance of Senior Leadership, the departments of Information Technology, Management Information Systems, clinical services, and front desk managers worked together to make the monumental change Telehealth possible in a short timeframe.
The first phase of the transition was for CMHA to provide Telehealth to existing clients, who were struggling with increased anxiety, depression and substance abuse due to the stress of the pandemic. This included temporarily transitioning its group therapy clients to individual Telehealth psychotherapy sessions. It was quickly discovered that patients responded positively to briefer, 30-minute individual Telehealth psychotherapy sessions. This was particularly instrumental in keeping the agency’s most vulnerable clients, those with opioid addiction, on vital, life-saving Medication Assisted Treatment. Telehealth also helped keep other high risk clients, such as those in residential and intensive community-based programs, at home and out of the hospital.

The second phase included expanding Telehealth coverage to new clients. Prior to COVID-19, CMHA’s Open Access Clinic saw roughly 125 new clients a month. The agency knew it was critical to quickly re-open Open Access to new clients in crisis and others in need during this troubling time, including families experiencing unemployment, financial stress, or who were at risk for domestic violence. With Telehealth, new clients are able to receive same-day scheduling of Telehealth appointments with a clinician and doctor.
To closely monitor its progress with Telehealth, CMHA quickly developed new aggregate reports in its Electronic Health Record. Initial results have been quite striking:

- With Telehealth, over the course of four weeks, the rate of kept appointments has increased dramatically from 50% to 74%.
- No show rates dropped to under 14% from a pre-Telehealth average of 25-30%.
- Since Telehealth began in March, the agency has served over 2,000 clients via remote visits, and has kept 87% of its clients engaged in care during the transition.

While group therapy and Intensive Outpatient Treatment (IOP) services were not initially permitted to be performed through Telehealth at the beginning of the pandemic, they have since been allowed. However, given client feedback and preference, as well as concerns about the inability to ensure confidentiality of group discussion content remotely, the agency has continued its focus on providing brief individual psychotherapy appointments. CMHA will resume group therapies and IOPs once the agency’s physical locations are open to staff and clients again.

THE RESULTS

<table>
<thead>
<tr>
<th>Rate of Kept Appointments</th>
<th>74%</th>
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<tbody>
<tr>
<td>No Show Rate</td>
<td>14%</td>
</tr>
<tr>
<td>Served in First Month of Telehealth</td>
<td>2,000</td>
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<tr>
<td>Of Clients Engaged</td>
<td>87%</td>
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POSITIVE FEEDBACK FROM CLIENTS & STAFF

Staff on the front lines have provided positive feedback for the transition to Telehealth. Angie Melendez, who manages the agency’s virtual call center, reported “Clients are reassured that we are there when they call.” She noted that clients seem to especially appreciate the near instant access to care.

For example, when clients are in need of a check-in appointment with their clinician or a medication refill, they are connected to their provider within minutes.

Of particular importance, she described that the agency’s clients have adjusted well to not only the increased access to care, but also to the new technology to receive their care. The quality of patient care has remained strong, if not improved as a result of this transition to Telehealth.

“The clients know we are doing the best we can. We set up a whole system for them. They can see the commitment we have.”

Laura Kuperman Corwin Outpatient Clinician

“Clients have less anxiety after Telehealth sessions.”

Bill Lonsdale Residential Supervisor
CMHA's swift transition to Telehealth services has already had a profound and lasting impact for individuals in need of behavioral health care in the wake of Covid-19.

The agency has kept high risk, vulnerable clients safe and ensured that those receiving Medication Assisted Treatment (MAT) for opioid addiction did not suffer from a lapse in life-saving therapy. In addition, new clients in need of treatment for increased anxiety, depression and stress due to the pandemic are now able to receive same-day scheduling for appointments.

Outcomes from the first month of CMHA's Telehealth implementation have been remarkable, showing a 24% increase in kept appointments and an 87% client retention rate, with over 2,000 people served. Indeed, patient care is stronger than ever, with staff adjusting admirably and clients appreciating the agency's commitment to high-quality and reliable care in an uncertain world.

As for the future, CMHA hopes that Telehealth remains an option for delivering behavioral health services far beyond the immediate crisis of the pandemic. Telehealth has clearly demonstrated its value in terms of quality of client care. It has also addressed what has historically been a significant barrier to accessing care: Transportation, which has been a challenge both logistically and from a cost perspective. Telehealth eliminates those concerns.

Telehealth will also be instrumental in bringing services to clients during times of inclement weather such as snow storms, when clients are out of town and need clinical supports, or for those families with child or elder care issues or who are tending to an ill family member and can’t make it into the office. Access to technology, however, remains an area of concern, as many clients currently do not have the equipment needed to participate in Telehealth. The agency has been seeking grant dollars and donations to help purchase the technology for clients to partake in this service delivery.

Going forward, CMHA will need additional partners and funding sources to assist in making the technology available for all clients to engage in Telehealth. The agency is confident in the rationale to support Telehealth, and hopes to continue its mission in bringing effective, evidence-based care to all clients in the community through this platform. Indeed, it is the commitment to its mission that drives CMHA staff to continuously seek ways to improve client care.

The past few months have demonstrated CMHA's ability to evolve and adapt seamlessly to a new and changing landscape of behavioral health care, which is one of many reasons why it is the provider of choice in the communities it serves.