REDESIGNING CARE
A How-To Guide for Hospitals and Health Systems Seeking to Implement, Strengthen and Sustain Telebehavioral Health
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TRANSFORMING CARE DELIVERY WITH TELEBEHAVIORAL HEALTH

Each year, behavioral health disorders affect millions of Americans. Yet fewer than half of the 44 million adults who have a mental illness receive the treatment they need.1

Behavioral health disorders include mental illness and substance use disorders. Mental illnesses are specific, diagnosable disorders characterized by intense alterations in thinking, mood and/or behavior over time. Substance use disorders are conditions resulting from the inappropriate use of alcohol or drugs, including medications. Persons with behavioral health care needs may suffer from either or both types of conditions, as well as physical comorbidities.2

There are myriad reasons that behavioral health needs go unmet. The stigma of mental illness, the lack of coverage and inadequate reimbursement, and a significant shortage of behavioral health professionals prevent those with behavioral health needs from seeking and receiving care. With a national shortage of psychiatrists, many of those who are practicing psychiatrists nearing retirement, and a general lack of mental health professionals across the United States, health systems and hospitals face challenges providing behavioral health care to those in need. Overcoming these barriers to access and delivering high-quality behavioral health care is essential for improving patient outcomes and reducing the cost of untreated behavioral health disorders, currently estimated in the range of $200 billion3 to more than $444 billion per year.4

Telebehavioral health offers tremendous potential to improve patient outcomes and experience by transforming care delivery, overcoming geographic distances, and enhancing access to care, particularly for those in underserved and/or rural areas. Telebehavioral health involves the use of technology to provide behavioral health care services at a distance for individuals who are at risk for or suffer from mental illness, or behavioral or addictive disorders, ranging from mood and anxiety disorders, to substance use disorders, to post-traumatic stress disorder, and suicidality.

Telebehavioral health can encompass:

• Patient-to-provider interactions
• Direct-to-consumer interactions initiated by the patient
• Provider-to-provider interactions

It can involve:

• Synchronous (real-time) video communication through computers and mobile devices
• Asynchronous transmission of video and images
  – Through a secure electronic system, commonly referred to as store and forward
• Remote patient monitoring (RPM)
  – Personal health data is transmitted from an individual in one location to a clinician in a different location
• Mobile health (mhealth) applications
  – Designed to foster health and well-being
• Any combination of these modalities

Behavioral health care is well-suited to telehealth as talk therapy is a primary method of care.5 In this way, telebehavioral health can be used to deliver services such as depression screening, follow-up care after hospitalization, behavioral counseling for
substance use disorders, and/or psychotherapy for mood disorders. Health systems and hospitals can leverage telebehavioral health care to engage in upstream prevention strategies for chronic conditions. Telehealth can be applied to support medication management and monitoring for patients with behavioral health needs, including text-based or mobile app reminders to take medications; continuing care group chat and social media support groups to prevent relapse; and collaboration and professional development for clinicians through emergency department (ED) consultations and virtual rounds. Early adoption of telebehavioral health in hospitals and health systems can help position organizations to capitalize on advancements in data and technology with respect to artificial intelligence and machine learning.

Benefits of telebehavioral health are well-documented:

For patients and families:
- Timelier, more convenient access to care and treatment
- Improved outcomes and experience
- Remain in care continuum, avoiding high-cost setting

For hospitals, health systems, providers and payers:
- More timely care
- Enhanced capacity to deliver initial and follow-up care
- Reduced utilization of higher-cost services.

The quality of clinical interactions, the reliability of clinical assessment, and the treatment outcomes associated with telebehavioral health services are generally equivalent to, if not better than, the quality of those associated with in-person care. Research has also demonstrated the clinical efficacy and cost-effectiveness of telebehavioral health care across populations and settings.

Improvised Outcomes with Telebehavioral Health

- OVER 70% of rural and urban patients reported moderate to extreme satisfaction with using telebehavioral health.
- Patients with schizophrenia using telemonitoring for medical adherence had fewer emergency visits, fewer medical appointments and improved symptoms.
- Web-based cognitive behavioral therapy improved symptoms, quality of life and happiness among students at risk for depression.
- Reduction of days in inpatient length of stay.

Having a telepsychiatry consult in the ED led to a reduction of days in inpatient length of stay.

Success Factor 1: Leadership Commitment

Strong and committed leadership that champions the use of telebehavioral health is essential to successfully implementing and sustaining telebehavioral programs.

Key Takeaways:

- Build an organizational culture that welcomes innovation and technology to support implementation efforts.
- Get buy-in from leaders at all levels, including the board of directors, health system executives, service line directors, and clinical and operational team leaders.
- Ask that leaders demonstrate a commitment to improving access to and quality of behavioral health care through integration of telehealth solutions across the system of care by:
  - supporting telebehavioral health as a supplement and an alternative to in-person care, and
  - offering the right types of support and incentives to clinicians and patients for using telebehavioral health services.
- Help drive and sustain implementation efforts by recognizing the potential for telebehavioral health to:
  - increase timely access to appropriate behavioral health care,
  - improve outcomes,
  - decrease costs,
  - create a new revenue stream, and
  - ensure hospital and health system sustainability.
- Invest time and resources into planning, implementing and integrating telebehavioral health throughout the system.
- Consider not only the business model but also the financial and operational staffing model for telebehavioral health within their own context.

Implementation Strategies

STARTING OUT

- Identify what optimal care and patient experience are, regardless of setting or modality
- Determine the purpose and goals of implementing telebehavioral health and align the value proposition for telebehavioral health with the organizational mission and strategic plan
- Identify the organization’s and patients’ biggest pain points in behavioral health (e.g., ED staff burnout, patient lack of transportation) and use these as potential areas to explore where to start the telebehavioral health service
- Emphasize how telebehavioral health services address quality, cost, and patient and clinician experience
- Identify and define the target population(s) that will benefit from telebehavioral health
- Demonstrate return on investment (ROI) through proof of concepts and small tests of change
- Engage multistakeholders, including a clinical and administrative champion, in building the business case for telebehavioral health integration across the system of care
- Promote grassroots initiatives and early adopters within the health system to implement telebehavioral health
- Understand the potential business models (see Table 1) for telebehavioral health, and identify which model best fits the needs of the organization
- Develop the business case for implementing telebehavioral health for a single service line, detailing need and demand, infrastructure and workforce, levels and hours required for training,