

Community-Based Providers Push to Continue Behavioral Health Reforms

As reimbursement and waivers for virtual care take center stage during the pandemic, community-based providers are advocating the continuation of such reforms, especially when it comes to behavioral health services for the most vulnerable patients.

Coordinated Behavioral Care, a network of dozens of nonprofit agencies in the city that serve more than 100,000 Medicaid clients, said new data show tele-mental health is yielding positive results and should be continued after the pandemic subsidies. The organization, based in Lower Manhattan, has put forth a set of recommendations for policymakers that it thinks will aid in sustaining critical care.

Continued access to such services is essential for individuals with moderate to severe mental illness and substance-use disorders, CBC noted in a new report, as well as for minors with serious emotional disturbances, people with multiple comorbidities and those negatively affected by the social determinants of health.

"These individuals generally benefit from a high-touch approach, requiring frequent communication and contact with care managers, therapists and psychiatrists, [and] tele-mental health can quickly connect individuals with providers and deliver timely services, thereby limiting emergency room visits," the organization wrote.

CBC recommended expanding the use of both audiovisual and audio-only technology for care, through payment rates that are sufficient to pay for service delivery and investment in new equipment. That should include capturing and analyzing data to allow for pivoting from less promising service delivery methods when necessary.

Until new payment models focused on outcomes are determined, the organization said telehealth should be reimbursed at the same rate as in-person treatment.

The organization called on state and federal agencies to continue to allow tele-mental health services, regardless of where clients and providers are, and to remove the requirement for an in-person visit before being eligible for virtual care. Greater flexibility in prescribing and dispensing medications for opioid-use disorder should continue, it said.

CBC further suggested additional administrative and workflow flexibilities. Those should build on the state Office of Mental Health's efforts to extend timeframes for treatment plan reviews and remove provider signature requirements at periodic reviews when treatment plans haven't changed, it said.

Finally, CBC recommended that the clinician workforce be bolstered through measures, such as permitting providers who are approved to bill for in-person services to be similarly approved to bill for telehealth services and allowing them to bill for the provision of technical literacy training that enables clients to participate in virtual care. New ways for payers to reimburse for the purchases of devices, phones or internet service for clients to participate in telehealth services should also be established, the organization said.

New care delivery methods have "proven to be very effective for a large portion of the population that needs the type of support that you can get from tele-mental health," said Dr. Jorge Petit, president and CEO of CBC.

Though not everyone should receive virtual services, it has been very helpful for continuity of care and access to treatment, Petit said. It should be left to consumers and providers to determine when, where and how to use the tool.

Data from CBC's Independent Practice Association shows that, in a cross-section of outpatient clinic settings, the proportion of psychiatry sessions conducted via telehealth increased by nearly 95 percentage points during the pandemic. In addition, the follow-up rate increased from 78% before the public health crisis (predominantly in-person) to 83% after it (predominantly tele-mental health).

Among the clinics' mental health providers, scheduled virtual appointments increased by almost 92%, with a 77% follow-up rate compared with 59% before the outbreak.

CBC's Health Home program, which consists of 47 care management agencies with nearly 18,000 members, collected data that yielded similar results, the organization said. And an analysis of CBC's care transition program Pathway Home showed a dramatic across-the-board increase in overall engagement and encounter efforts between February and March, ranging from 60% to 192%.

CBC noted that, while it is advocating for greater virtual care opportunities, providers should still perform due diligence and select tele-mental health technology that meets privacy, security, quality and cost standards for patients.