

innovaTel Telepsychiatry: The CCBHC Staffing Solution

Dr. Liberty Eberly, Chief Medical Officer & Co-Founder, innovaTel Telepsychiatry

Lauren Lashbrook, Director of Strategic Partnerships, innovaTel Telepsychiatry

Rebecca Farley David, Senior Advisor, Public Policy & Special Initiatives, National Council for Behavioral Health

Webinar Overview

- Now that clinics across the country are eligible to apply for CCBHC Expansion grants, this creates an exciting opportunity for organizations to increase access to care.
- Leaders are looking for ways to ensure that their organizations are able to meet the standards outlined to achieve and maintain this certification.
- This webinar will explore how telepsychiatry can be an innovative workforce development solution to help you achieve your CCBHC goals specific to patient access and how telepsychiatry removes the geographic recruitment barriers, allowing you to augment your on-site clinical team with specialty clinicians from around the country.



Agenda

- innovaTel Overview
- CCBHC Review with Rebecca Farley David, Senior Advisor, National Council for Behavioral Health
- Telepsychiatry as a Staffing Solution
- How innovaTel is Currently Partnering with CCBHCs
- Psychiatry and Patient Satisfaction with innovaTel Chief Medical Officer
- Questions



Our Mission

Re-imagining the delivery of psychiatric care through advanced technology.



Clinician Owned & Operated-We Are You

- innovaTel was founded by a clinical team with 30+ years of behavioral health experience.
- The founders started the first CMHC in NW Pennsylvania and through a small SAMSHA grant developed a successful telepsychiatry program.
 - Psychiatric recruitment and retention was a constant challenge.
- Through word of mouth the clinic's adoption and success using telepsychiatry spread quickly throughout Pennsylvania and the country.
- As a result of the success and need to establish an independent company, innovaTel was founded in April 2014.



We want to hear from you!

- What is your experience with the CCBHC program?
Select all that apply.
 - My organization is currently a CCBHC.
 - My organization is applying for a FY 2020 CCBHC expansion grant.
 - I'm here to learn, we're not applying to be a CCBHC but might one day.



We want to hear from you!

- If you were to become a CCBHC tomorrow, would you have sufficient clinical staff to meet the increased demand?
 - Yes
 - No





UNITE

FOR BEHAVIORAL HEALTH

Lack of access to timely, high-quality treatment is the greatest barrier to a healthier America. We are **fighting to build a nation** that recognizes:

CCBHCs: A New Model

Built on the concept that the way to expand care is to pay for it

Without mental health, there is no health. Without access to addiction treatment, recovery will be out of reach for many.

—Chuck Ingoglia, National Council President & CEO



CCBHC Successes, 2.5 Years In

-  Increased hiring / recruitment
-  Greater staff satisfaction & retention
-  Redesigning care teams
-  Improved access to care
 - More clients served
 - Clients accessing greater scope of services (e.g. addiction care)
-  Launch of new service lines to meet community need
-  Deploying outreach, chronic health management outside the four walls of the clinic
-  Improved partnerships with schools, primary care, law enforcement, hospitals
-  Outcome-driven treatment

What Goes Into Being a CCBHC?

CCBHC Criteria

- Organizational Authority
- Staffing
- Access to Care
- Scope of Services
- Care Coordination
- Quality Reporting

CCBHC Payment

- Cost-related Medicaid reimbursement rate (demonstration participants)

OR

- Grant funds: \$2 million/year for 2 years (expansion grantees)

Availability & Accessibility Standards

- Access required at times and places convenient for those served
- Prompt intake and engagement in services
- **Access regardless of ability to pay** and place of residence
 - Sliding fee scales used for clients without ability to pay
- Crisis management services available 24 hours per day



CCBHC Timely Access Requirements

- If a **crisis need** is identified, care must be provided **immediately or within 3 hours** at the latest.
- If an **urgent need** is identified, clinical services must be provided **within 1 business day**.
- If **routine needs** are identified, services must be provided **within 10 business days**.
- Subject to more stringent state standards, **all new consumers** must receive a person-centered diagnostic and treatment planning evaluation **within 60 days** of their first request for services.

How do the CCBHC criteria and payment affect clinics' opportunities and obligations for developing their workforce?

CCBHC Staffing Requirements

- CCBHC staff includes:
 - Clinical and peer staff
 - A psychiatrist as medical director
 - A medically trained behavioral health care provider, either employed or available through formal arrangement, who can prescribe and manage medications independently under state law
 - Individuals with expertise in **addressing trauma** and **promoting the recovery of children and adolescents** with serious emotional disturbance (SED) and adults with **serious mental illness (SMI)** and those with **substance use disorders**.
- CCBHCs may utilize telehealth and on-line services to alleviate shortages

Behavioral Health Workforce Shortage



Current workforce only able to meet **26%** of the need for services



Projected shortage of **250,000** behavioral health professionals by 2025

In the first 6 months of implementation:

87%

of CCBHCs report an increased number of patients served, representing up to a **25% increase** in total patient caseloads for most clinics

Within 1 year of implementation:

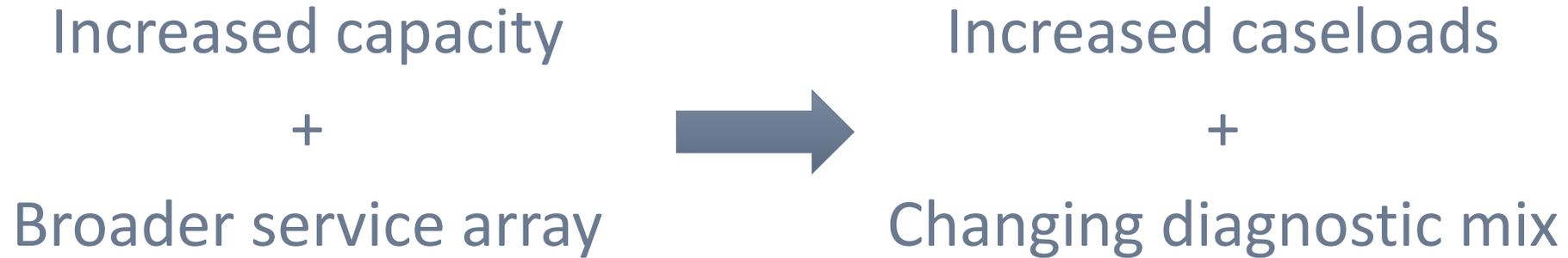


94% of CCBHCs reported an increase in the number of patients treated for addiction



17% of CCBHCs have seen a >50% increase in their number of new patients with addiction

Adapting to Changing Caseloads



Engage patients via telehealth to fill the gaps
(2/3 of CCBHCs offer telehealth, most commonly telepsychiatry.
And those that do not yet, plan to.)



Dream Big

- As a CCBHC, you have opportunities to leverage funds you've never had before for resources including telehealth.
- Think critically about how these technologies can enhance the required service array.

We want to hear from you!

- Has psychiatric clinician recruitment been a challenge?
 - Yes
 - No
- Have you done anything with telehealth historically?
 - Yes
 - No



Staffing Options



With the psychiatric provider shortage, the recruitment of behavioral health clinicians has been a challenge for many organizations.

Telepsychiatry has proven to be an extremely effective solution to grow your on-site clinical team **without traditional staffing expenses.**

Grow Your Clinical Team Without Geographic Limitations

- innovaTel partners with organizations by offering contracted hours (part-time or full-time) for clinicians including:



- Board Certified or Board Eligible Psychiatrists
 - Child & Adolescent
 - Substance Use Disorder
 - Lifespan
 - Bi-Lingual
 - Remote Medical Directors
 - Psychiatric Nurse Practitioners
 - Licensed Clinical Social Workers
- We manage all recruitment, licensing, DEA, benefits and malpractice. You have the final choice in who your provider will be.
 - There are no placement fees like with a recruitment firm.
 - **We believe continuity of care is critical in behavioral health.**
 - Partnering with innovaTel, your selected provider becomes a virtual member of your team. Your patients will see the same provider each and every time.



Integration Into Your Existing Workflows

The goal is to mirror your existing workflows with the only difference being that the clinician is on screen and not on site.

- Designate a room(s) for telepsychiatry and setup with the appropriate technology
- Determine hours that telepsychiatry will be utilized and schedule those appointments in your EMR as you would an in-person appointment
- Patient will be greeted by a nurse or medical assistant, vitals taken, and the patient will be escorted to the dedicated telepsychiatry room
- innovaTel provider will document directly and concurrently in your EMR and electronically prescribe any medications
- Insurance claims will be billed by your organization



Clinician Matching & Retention

- innovaTel does not assign clinicians to work in your organization.
- You get to **interview and choose** the clinician(s) that will be joining your team.
- Because of this thorough matchmaking process, **we are proud to have a 95% clinician retention rate.**
- innovaTel is also extremely selective with the clinicians we hire, extending offers **to less than 20% of those that apply with us.**
 - innovaTel's thorough screening process for hiring specific to working with SMI population.



CCBHC Partner: Northwestern Mental Health Center



Shauna Reitmeier
CEO

- NWMHC is a Certified Community Behavioral Health Clinic serving individuals and families from birth to end of life through a comprehensive integrated healthcare system. Their mission is to Promote Wellness and Instill Hope across their region of rural and frontier Northwest Minnesota through collaboration, partnership and innovative models of care.
 - They were one of the first agencies in MN to utilize telepsychiatry when it became allowable through MN Medicaid and other health plans.
- Clinical Partnership with innovaTel Telepsychiatry
 - Part-Time Child Psychiatrist for the last 5 years
 - Adding a Medical Director via innovaTel Telepsychiatry next month.

“Why Telepsychiatry?”

“Our agency covers 6 rural and frontier counties in NW MN where recruiting for the most challenging disciplines such as psychiatry was compounded by our location. We took the initiative to work with an existing provider who moved away from the area back in 2008 and we have grown to incorporate a child psychiatrist with innovaTel on our prescribing team.”



CCBHC Partner: Northwestern Mental Health Center



“What has telepsychiatry done for your clinic and your patients?”

“Telepsychiatry has allowed patients to access this needed service in locations where they live without having to drive to our primary clinics that can be upwards of 1 hour one way.

A great example was recently, we were able to have one of our RN Care Coordinators do a home visit and connect through telepsychiatry with one of our psychiatrists to address medical issues and medication changes where it was challenging for the client to come into the office.

Because of this technology, more clients are able to get the service they need at a time that works for them and prevent increased symptoms, it has increased coordinated care and overall meeting our mission.”



Psychiatrist & Patient Satisfaction with Telepsychiatry

"I haven't seen a patient in person in 10 years."

*Dr. Liberty Eberly, CMO & Co-Founder,
Telepsychiatrist & Remote Medical Director*

- Psychiatrist and Patient Satisfaction
- Serving As A Remote Medical Director
- Integration & Collaboration With On-Site Treatment Team



Support for Telepsychiatry

- “Telemedicine in psychiatry, using video conferencing, is a validated and effective practice of medicine that increases access to care. The American Psychiatric Association supports the use of telemedicine as a legitimate component of a mental health delivery system to the extent that its use is for the benefit of the patient, protects patient autonomy, confidentiality, and privacy; and when used consistent with APA policies on medical ethics and applicable governing law.” -American Psychiatric Association Telepsychiatry Policy (February 2018)
- Studies demonstrate comparable results to in-person care and in many cases, improved outcomes over the current standard of care.
- Telepsychiatry has also provided increases in clinic efficiency, a variety of available care, increased access, provider flexibility and positive outcomes.



Questions & Answers



Contact Information

Rebecca Farley David
Senior Advisor

National Council for Behavioral Health
RebeccaD@thenationalcouncil.org

Lauren Lashbrook
Director of Strategic Partnerships
innovaTel Telepsychiatry
Lauren.Lashbrook@innovatel.com

