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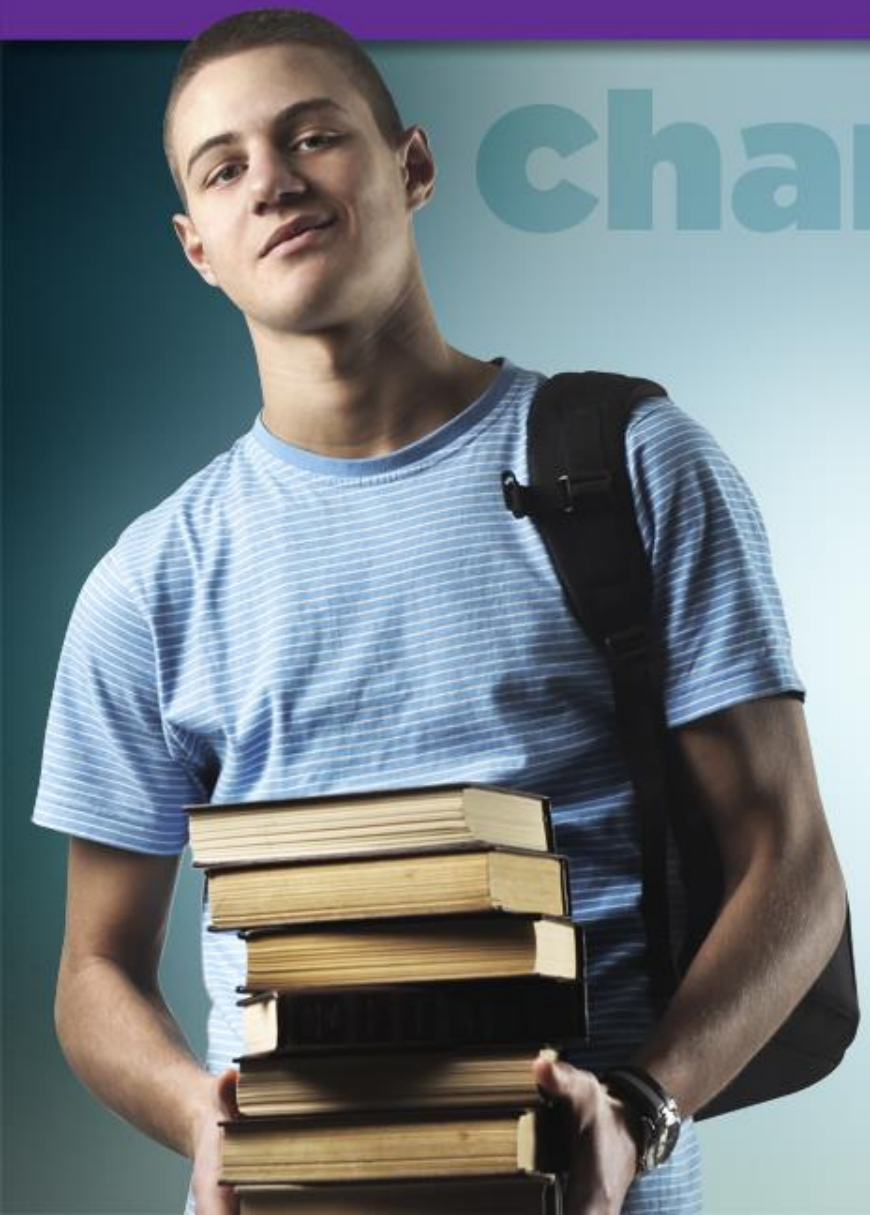

changing lives

TELEHEALTH

Anna M. Baznik
President/CEO

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ABOUT US

- Leading non-profit mental health and child well-being organization founded in 1994 rooted in Central Florida
- Florida's leading provider of TELEHEALTH Services
- Services delivered STATEWIDE
- Primary services include mental health, substance abuse, & psychiatric treatment, prevention, case management, adoptions, and independent living
- Serve more than 11,000 individuals and families via telehealth, home, school and community-based settings
- Primary Funding streams: AHCA (MMAs), DCF/Managing Entities, Medicare, FQHC, Cigna, Aetna, FL Blue, TriCare, Humana, United.

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MERGER

- Merger Completed July 1, 2018
- 70-Bed Substance Abuse Residential Treatment Facility for Adolescents
- SA Counseling
- Prevention Programs

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Shortages in Mental Health Practitioners

- 89.3 million Americans live in federally-designated Mental Health Professional Shortage Areas
- Data show a need for 25.9 Psychiatrists per 100,000 people to meet current mental health crisis. National average is 10 per 100,000 people. Florida has only 7 per 100,000 people.
- Average age of U.S. Psychiatrist is over 55

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Mental Health Needs Unmet

- 1 in 4 adults (approx. 61.5 million Americans) experiences mental illness in a given year
- 1 in 5 youth ages 13 to 18 have severe mental health disorders in a given year
- 50% of all chronic mental illness begins by age 14
- Approx. 60 % of adults & 50% of youth with mental illness received no mental health services in the previous year

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Why Telehealth? Why Now?

- Lack of Access to Treatment
- Rural / Geographic Challenges
- Insufficient Transportation
- Long Wait Lists
- Behavioral Health Well-Suited

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What is Telehealth?

Telehealth is the use of electronic information and telecommunications technologies to deliver healthcare from a distance.

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TELEHEALTH IS A SOLUTION

Kiosk

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Smart Phone/Tablet

Telephone

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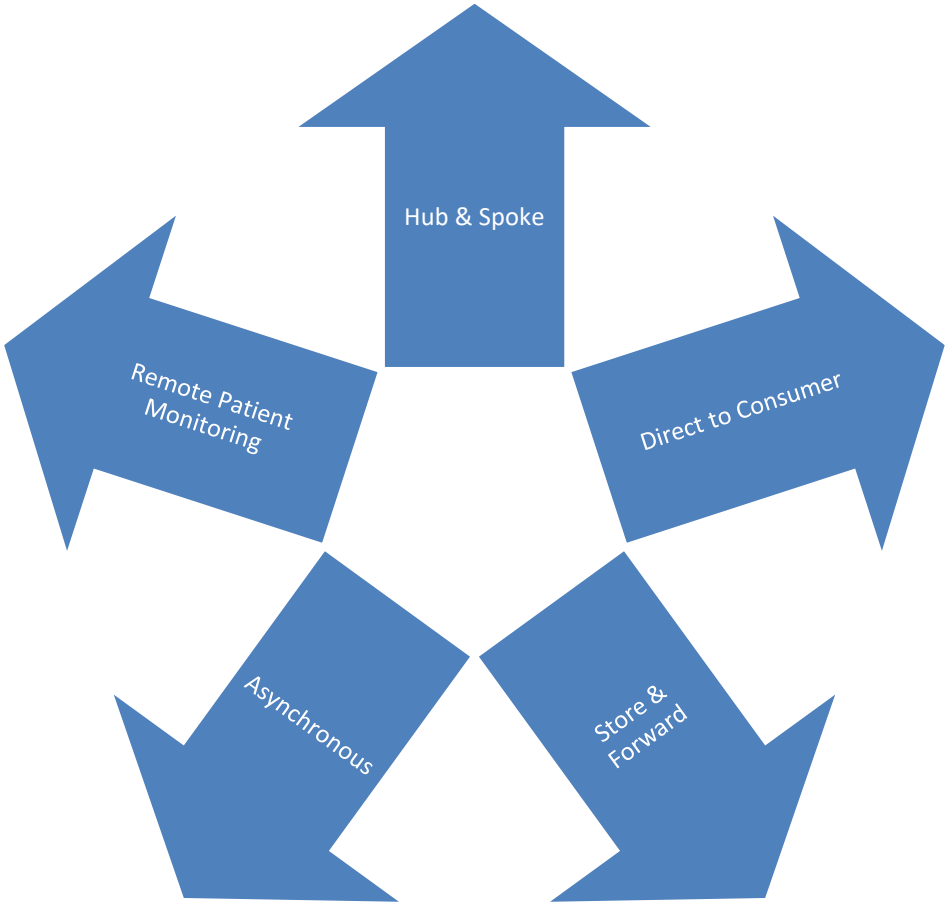
Common Types of Telehealth



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Our Pilot

- The Haven Home
- Developed P&Ps & Best Practices
- Informed Consent & Training Acknowledgement
- HIPAA Compliant Platform
- Trained Psychiatrists to use Telehealth
- Went "live" in March 2013
- In accordance w/ American Telemedicine Assoc.

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IMPOWER's FIRST TELEHEALTH RECIPIENT
March 29, 2013

"Allie" - Age 9

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Capacity & Practitioners

- Over 130,000 Telehealth Services Provided
  - 800/week (over 50 Practitioners)
- Board Certified and/or Board Eligible Adult & Child Psychiatrists
- Psychiatric ARNPs
- Psychiatric Physician Assistants
- Physician Assistants (PA-C) LCSWs, LMFTs, & LMHCs and Masters Level Therapists
- Virtual Treatment Teams

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Telehealth Services

- Individual Therapy
- Family / Group Therapy
- Behavioral Health Assessments
- Psychiatric Evaluations
- Psychiatric Medication Management
- Substance Abuse OP and IOP
- Child Well-Being Services (Child Welfare)

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Multi-Participant Platform

- When it is clinically appropriate for others to participate
- Can include other family members, practitioners, caseworkers, etc.
- Various Services (case consultation , treatment team)
- Connections occur through secure URL link

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Collaboration among Practitioners

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Top 10 Diagnoses

		Top 10 Telemedicine Diagnoses
	Axis Code	**Diagnoses**
1	314	Attention-Deficit/Hyperactivity Disorder, Predominantly Inattentive Type
2	314.01	Attention-Deficit/Hyperactivity Disorder, Combined Type or Predominantly Hyperactive-Impulsive Type
3	296	Bipolar I Disorder, Single Manic Episode, unspecified
4	296.9	Mood Disorder NOS
5	309	Adjustment Disorder with Depressed Mood
6	300	Anxiety Disorder NOS
7	313.81	Oppositional Defiant Disorder
8	296.3	Major Depressive Disorder, Recurrent, unspecified
9	309.81	Posttraumatic Stress Disorder
10	296.8	Bipolar Disorder NOS

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WHEN & WHERE ?

- Individuals may be seen from home, work, or anywhere they have privacy
- Practitioners may conduct from home/office
- Evenings and weekends available
  - M-F 8 a.m.- 8p.m., Sat. 9 a.m.-1p.m.
- 24/7 Virtual Crisis Response Team

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Equipment Needed

- Smartphone/tablet
- PC or Mac w/ Camera
- Internet connection

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FLORIDA | Board of Medicine

- Spring of 2014, Rule 64B8-9.0141(4) F.A.C., prohibited physicians to prescribe controlled substances via telehealth
- Problem: Many therapeutic drugs for mental illness are in controlled drug classes
- Sought legal counsel, petitioned for variance, acquired waiver to resume provision of med. mgt. services via telehealth in Oct. 2014.
- **IMPOWER was granted a waiver as the only entity in FL whose practitioners can legally prescribe non-narcotic controlled substances via telehealth**

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FLORIDA | Board of Medicine

OUTCOMES

- Clients More Likely to Seek Treatment Due to Convenience Factor
- Clients More Likely to Stay in Treatment - Less Likely to Cancel or No Show
- New Client Evals More Timely (Reduction in wait time from 8 weeks to 2 days)
- 98% Patients Satisfied w/ Their Telehealth Services
- 10% Fewer Prescriptions Written to Telehealth Group

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University of North Florida Study

UNF
UNIVERSITY of NORTH FLORIDA.

- **Two year study of IMPOWER Telehealth Services**
  - Cohorts Matched in age, gender, diagnosis & clinician
  - Study of services provided over a five year span
  - 557 client files were reviewed
  - Outcomes:
    - Quality – both cohorts improved similarly
    - Access to care – Telehealth cohort = increased access to care
    - Medication Adherence – Telehealth cohort = increased medication compliance

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Prescriptions

- All completed electronically
- Dr. First – Surescripts Hx
- Controlled – Schedules II- V
- Cooperating Pharmacies
- 24-hour delivery to Px – free of charge
- Authorizations
- Enrollment in free and discounted med programs

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Publix

- Clients go to nearest Publix
- Complete Testing
- Data Uploaded into IMPOWER EHR nightly
- Biometric Data Available to Practitioners

Health Check Kiosk, custom-built to measure biometrics such as blood pressure, weight, height, BMI, respiration, and blood oxygen

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BENEFITS

- More Likely to Seek Help
- Brings Care to Patient
- Increases Practitioner Selection
- Reduces Travel Time and Costs
- Improves Satisfaction in Health Care
- Improved Medication Compliance
- Reduces Stigma
- Reduces No Shows
- Reduces DCM Travel / Mileage costs
- Allows greater SOC partner participation
- Reduced school / work absences
- Streamlined permanency

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Multi-Observer Feature – SOC access

- When it is clinically appropriate for others to participate
- Can include other family members, practitioners, caseworkers, etc.
- Various Services (case consultation , treatment team)
- Connects occur through secure URL link
- FTCs & STCs
- Case Transfer staffings
- Mediation & Case Plan Conferencing

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How to Access Services

- All Electronic
- Online Referral
- Download App & Testing
- Online Appointment
- Increased Appointment Options
- Client Reminder
- Decreased Client No Shows

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Refer Myself or My Child

Refer Another Person

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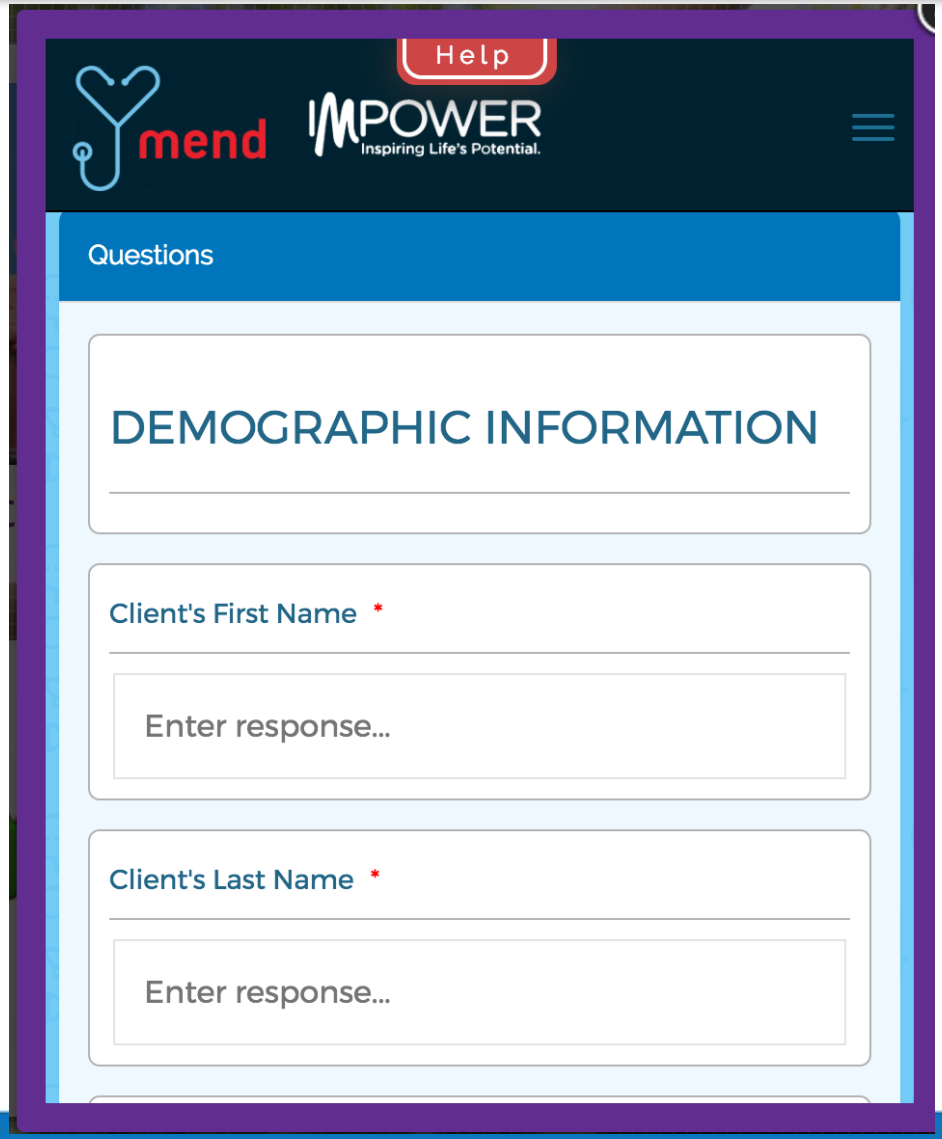

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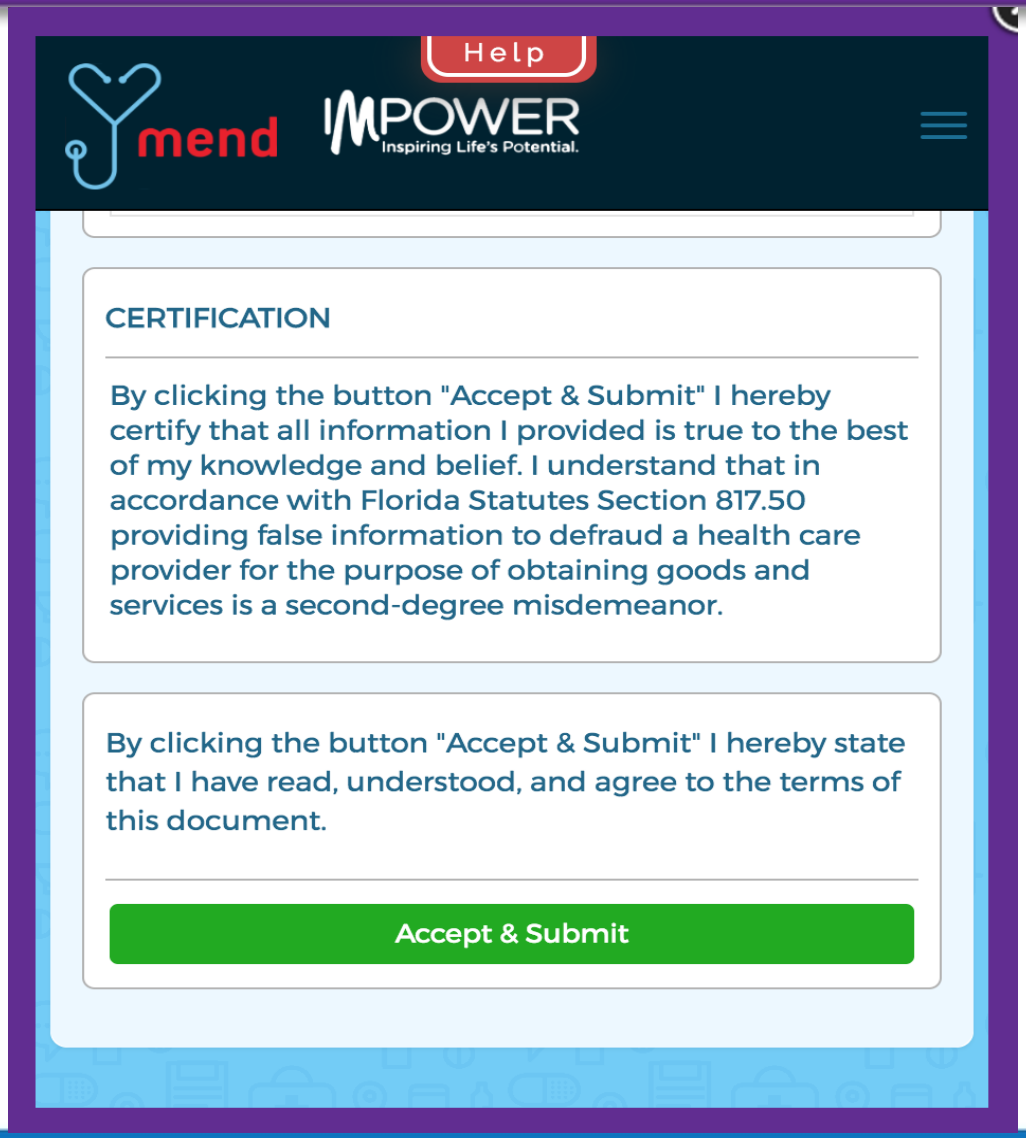

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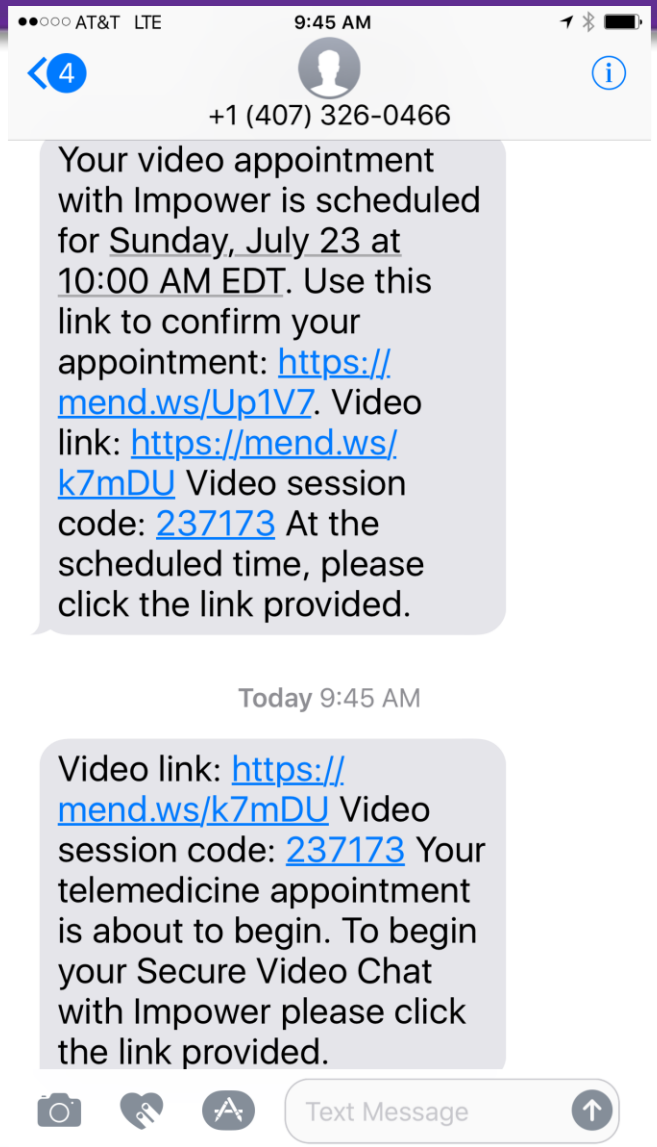

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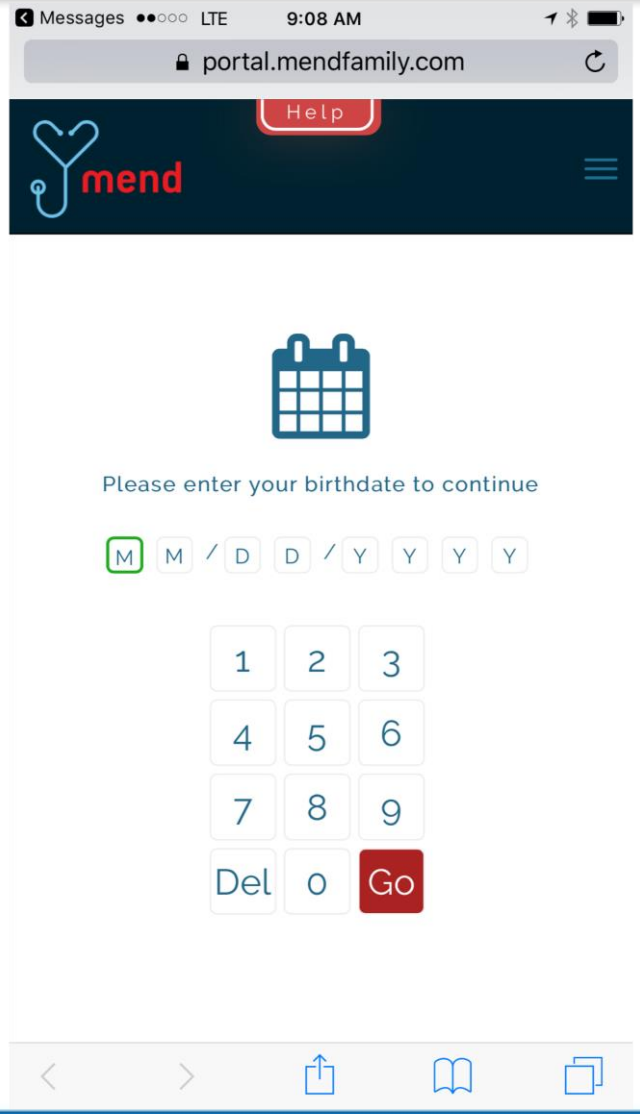

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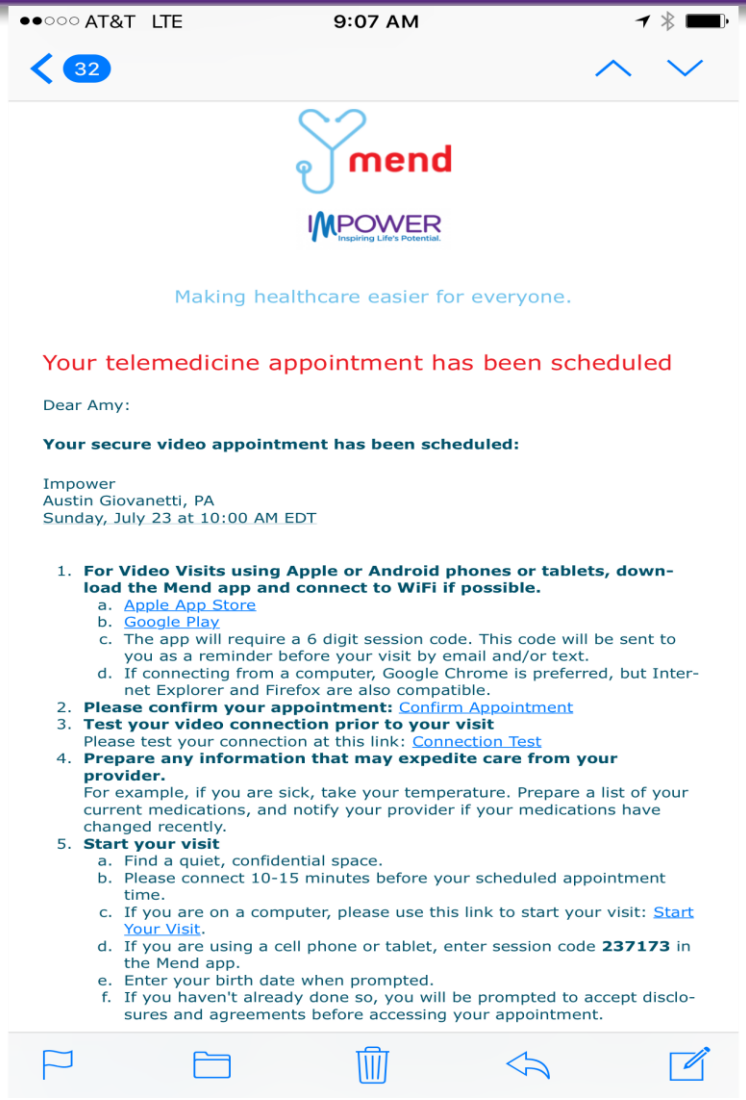

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TELEHEALTH INVESTMENT

NECESSITY	COST
Telehealth Consultant	$452,000.00
Internet/IT Upgrades	$7,200.00
Hardware (laptops, etc.)	$6,000.00
ATA/Trainings	$2,400.00
Platform Usage	$100,000.00
EMR Linkages	$4,000.00
Board of Medicine	$15,000.00
TOTAL	$586,600.00 (6 years)

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Where are We Now?

- Virtual Crisis Response Teams
- Over 130,000 Telehealth Services Delivered To Date
- Partnerships with State/County Government, Law Enforcement, Community Organizations, Physician Practices, Hospitals, Universities, & Group Care Facilities
- Integrating General Medicine
- Influencing Telehealth Legislation – Telehealth Advisory Council
- Projects with CBCs, MEs and major insurance
- Impacting Statewide HEDIS
- Providing AHCA Expertise to Change Regulations
- Hiring Practitioners Statewide
- Implementing comprehensive SA OP Program

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Questions?

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