

# REDESIGNING CARE

A How-To Guide for Hospitals and Health Systems Seeking to Implement, Strengthen and Sustain Telebehavioral Health



NATIONAL  
QUALITY FORUM

AHA CENTER FOR HEALTH  
**INNOVATION**

## ABOUT NATIONAL QUALITY FORUM

Founded in 1999 and based in Washington, D.C., the National Quality Forum (NQF) is the nation's resource for health care quality measurement and improvement. NQF is an independent, not-for-profit, membership-based organization that brings health care stakeholders together to recommend quality measures and improvement strategies that reduce costs and help patients get better care. Through its multistakeholder membership of more than 400 organizations, NQF facilitates dialogue on health care measurement and improvement and strives to lead national collaboration to improve health and health care quality for all Americans.

## ABOUT AHA CENTER FOR HEALTH INNOVATION

The AHA Center for Health Innovation, created by the American Hospital Association (AHA), enhances hospital and health system transformation and accelerates innovation at scale. The Center was formed in September 2018 from the merger of the AHA's Health Forum, Health Research & Educational Trust, Data Center and The Value Initiative. The Center serves as a key partner to AHA members, supporting their innovation and transformation journey with new tools, data products and analytics, learning collaboratives, conferences and virtual expeditions, market intelligence and advisory services.

## A PARTNERSHIP TO ADVANCE TELEBEHAVIORAL HEALTH

NQF and AHA share a common goal to advance health in America, in part through guidance, resources and tools that improve health care quality and outcomes with smarter spending. This Guide builds on historic work by both organizations to improve telehealth and behavioral health care services, including AHA's market intelligence on behavioral health and **telehealth** trends, and NQF's work in **telehealth** and **serious mental illness** that highlights how to use quality measurement and best practices to enhance access to care and improve outcomes. Leveraging NQF's uniquely trusted ability to bring together all stakeholders to advance quality, and AHA's vast network of hospitals, health systems, providers of care, and their patients and communities, along with expertise in field engagement, public policy and innovation, this Guide provides a practical tool built on a foundation of multistakeholder expertise. It will support efforts to deliver innovative, high-quality telebehavioral health services to patients and communities across the nation.

## ACKNOWLEDGMENTS

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The conclusions, findings and opinions expressed by project participants who contributed to this publication do not necessarily reflect the official position of any contributor's affiliated organization.

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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.<sup>1</sup>

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.<sup>2</sup>

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 billion<sup>3</sup> to more than \$444 billion per year.<sup>4</sup>

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.<sup>5</sup> 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.<sup>6</sup> 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.<sup>7</sup> 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.<sup>8,9</sup>

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.<sup>10,11,12</sup>

## Improved Outcomes with 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.



Bashshur R.L., Shannon G.W., Bashshur N., Yellowlees P.M. (2016) The Empirical Evidence for Telemedicine Interventions in Mental Disorders. *Telemed J E Health*. 22(2),87-113.

Studies have shown a correlation between the use of telebehavioral health and decreased hospital admissions and costs, thus demonstrating that telebehavioral health can contribute to a hospital or health system's overall cost-savings.<sup>13,14</sup>

Despite the evidence base demonstrating the quality and value of telebehavioral health care, and consumerism driving demand for virtual care, telebehavioral health care utilization by patients and adoption in health systems and hospitals remain relatively low.<sup>15,16</sup>

#### FROM 2010-2017

**BEHAVIORAL HEALTH** visits accounted for 34.5% telemedicine visits. **34.5%**

**1.4%** **SUBSTANCE USE DISORDER** visits accounted for 1.4% telemedicine visits.

Shigekawa E., Fix M., Corbett G., Roby, D.H., Coffman, J. (2018) The Current State of Telehealth Evidence: A Rapid Review. *Health Affairs*. 37(12), 1975-1982.

#### Challenges hospitals and health systems face implementing telebehavioral health:

- Not knowing where to begin
- Cost of initiating and implementing telebehavioral health services
- How to design clear processes for implementation
- How to overcome resistance to change
- How to engage leadership, staff, patients and caregivers to ensure adoption and sustained use of telebehavioral health services
- How to navigate the regulatory and payment landscape; it can be complex as new legislation is introduced and regulations vary across states

Legislation and regulations within your state will shape the program decisions you may need to make to start, strengthen and sustain your telebehavioral health program. Online tools provided by the **National Consortium of Telehealth Resource Centers** and the **Center for Connected Health Policy (CCHP)** can help organizations determine telehealth-related legislation and regulations in each state and the District of Columbia. These resources can help your hospital or health system increase awareness and understanding of applicable laws, regulations and reimbursement policies.

## USING THIS HOW-TO GUIDE

This Guide provides concrete strategies and actions for hospitals and health systems seeking to implement, strengthen and sustain telebehavioral health programs. The Guide is not a list of “must-do’s,” but rather offers options from which to choose, depending on organizational context, resources and needs. While intended primarily for hospitals and health systems, a broad set of stakeholders, including payers, community-based provider organizations, and policy and regulatory bodies may find it valuable in helping to encourage increased adoption of telebehavioral health.

The Guide is organized by six elements for successful telebehavioral health implementation. Each element of success includes a brief description, implementation examples, potential barriers and suggested solutions, and curated tools and resources that provide more in-depth information and guidance on relevant topics. **Appendix B** includes hyperlinks to all tools and resources by each element of success. The Guide also includes information, strategies and resources on key drivers of change, specifically payment, policy and workforce issues.

Your organization can use the implementation examples to design, launch, refine and extend your organization's approach to telebehavioral health and increase the potential for success. Many of the strategies build on those used to successfully implement telehealth within hospitals and health systems, while considering specific issues that arise in applying telehealth to service lines that would benefit from greater access to behavioral health care.

The implementation examples detail strategies for hospitals and health systems that are starting new programs, and for those that are strengthening or sustaining their progress. These categories are approximate based on likely resource-intensiveness and organizational effort. A hospital or health system that is just starting out need not limit itself to strategies in this category before moving to strategies for strengthening or sustaining progress. Rather, determine which approaches are best for your organization based on context and available resources. The implementation examples include a broad range of options to use and increase the likelihood of success.

With growing recognition of the opportunity for telebehavioral health, many groups have

developed resources and toolkits to guide telebehavioral health service delivery, telebehavioral health implementation and telehealth program development. This Guide does not replace the guidance that professional societies, associations and other agencies have produced. Rather, it builds on work the American Telemedicine Association (ATA), American Psychiatric Association (APA), Substance Abuse and Mental Health Services Administration (SAMHSA), National Council for Behavioral Health (NCBH) and others have done to move the field and practice of telebehavioral health forward. You'll find links to guidance and tools from these organizations throughout the body of this Guide.

This Guide uses multistakeholder input from experts representing patient and caregiver advocates, family caregivers, health care administrators, behavioral health directors, front-line clinicians, payers and telemedicine vendors to provide practical strategies to use across your organization to start, strengthen and sustain telebehavioral health programs. From this Guide, hospitals and health systems can gain insights on lessons learned, leading practices and solutions to common implementation barriers in order to provide patients with the right care, in the right place, at the right time.

## ELEMENTS OF SUCCESS FOR TELEBEHAVIORAL HEALTH IMPLEMENTATION

National Quality Forum and the AHA Center for Health Innovation identified six elements for successful telebehavioral health implementation by hospitals and health systems:

[Leadership commitment](#)

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[Organizational policies and clinical workflows](#)

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[Staff education and training](#)

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[Patient, family and caregiver engagement](#)

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[Measurement](#)

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[Community partnerships](#)

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# 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,

billing procedures and rates, and funding mechanisms

- Dedicate a multidisciplinary team, including a project manager, quality improvement leaders, IT leaders, clinical leads and an executive sponsor, to

develop and implement the startup telebehavioral health plan

- Set priorities and targets for telebehavioral health adoption and use across service lines and sites

### STRENGTHENING AND SUSTAINING

- Hire leaders at the C-suite who have expertise in behavioral health and telehealth implementation
- Ensure adequate staffing resources are dedicated to sustaining the program
- Centralize operations for the telebehavioral health program to realize efficiencies in administrative and operational functions
- Scale up from pilots or single service lines to other service lines (e.g., general medicine) and sites (e.g., ED) to design a system of care in which telebehavioral health is embedded
- Invest in centralized infrastructure and resources, such as schedulers, trainers and other administrative and operational-focused staff, to enhance capabilities and streamline adoption of telebehavioral health systemwide
- Dedicate resources for IT infrastructure, monitoring, continuous quality improvement and patient satisfaction with telebehavioral health services
- Establish recognition and/or financial incentives for staff, clinical leaders and service lines to promote the use of telebehavioral health
- Test approaches to use telebehavioral health as an alternative to in-person care to meet patient needs (e.g., close clinic to in-person visits for a set time each week to focus on telebehavioral health services)
- Share stories of successes, failures and lessons learned across service lines and settings and with other health systems and hospitals, to encourage and support continuous quality improvement
- Create mechanisms such as organizational reporting to hold service lines and sites accountable for meeting priorities and targets for telebehavioral health use
- Set performance expectations for the percentage of time devoted to virtual care
- Explore integration of direct-to-consumer mobile applications as a next step in the evolution of the telebehavioral health program

## Potential Barriers and Suggested Solutions

### Lack of resources or limited budgets

#### *Suggested Solutions*

- Integrate telebehavioral health into service lines that generate revenue, or seek ways to implement in value-based care or shared savings programs
- Emphasize how telebehavioral health can help differentiate the organization from competitors, lead to new consumer acquisition, and retain top talent through flexible work arrangements
- Identify and apply for grants to support startup costs, including co-investment with payers to support telebehavioral health implementation
- Use a small-scale pilot or proof of concept to demonstrate ROI
- Explore lower-cost software-based technology that works within the existing IT infrastructure
- and still meets security guidelines, rather than investing in new hardware
- Highlight the potential to address workforce shortages through access to an array of mental health professionals since behavioral health practitioners can work under many different types of licenses, such as licensed clinical social worker (LCSW), doctor of psychology (PsyD), peer counselor, psychiatric and mental health nurse practitioner
- Identify potential partners that can share already established resources or invest jointly in new structures for delivering telebehavioral health services
- Emphasize cost savings achieved through reducing clinician travel and brick-and-mortar overhead costs

## Leadership lacks the appetite for change

### *Suggested Solutions*

- Create a burning platform for change by emphasizing that the status quo is unacceptable and communicating an inspiring vision for the future that aligns with the existing strategic plan
- Educate hospital and health system trustees on the importance of behavioral health and engage them in the shift to telebehavioral health services
- Review organizational actuarial malpractice data to understand differences, if any, between risks of using virtual versus in-person behavioral health services
- Share qualitative data on exceptional clinician and patient experiences, such as patient testimonials about the benefits of using telebehavioral health services
- Provide leaders with data on value of telebehavioral health such as decreased costs of care, particularly for chronic illness management, reduced ED utilization, enhanced market share and improved patient and clinician experience
- Communicate the alternative: consumers and patients may not receive the care they need

without telebehavioral health

- Describe lost opportunity costs of not offering telebehavioral health to patients who are increasingly demanding easy and convenient access to services

## Lack of leadership and clinician understanding or discomfort with federal and state policies and regulations (e.g., 42 Code of Federal Regulations [CFR] Part 2)

### *Suggested Solutions*

- Understand the actual policy and regulatory requirements specific to providing virtual care and telebehavioral health services by the organization and within the state (see Resources on Legislation, Regulations and Policies next page)
- Partner with other organizations and tap into consumer demand to advocate for changes to policy on a national or state level
- Consult regional and/or national telehealth resource centers to increase understanding of applicable state and federal policies
- Develop a Part 2 consent registry to manage consent and provider access

## Suggested Tools and Resources

### Tools to Support Business Case Development

- American Medical Association Digital Health Implementation Playbook Step 5: Making the Case
- California Telehealth Resource Center, Sustainability Worksheet to Assist Business Development (Excel)
- Proforma Tool to Build a Sample Business Case for Behavioral Health Integration
- Telebehavioral Health Care: A Solution to Improve Cost, Access, and Quality of Care

### Telebehavioral Health and Telehealth Startup Toolkits

- American Medical Association Digital Health Implementation Playbook
- APA and ATA Best Practices in Videoconferencing-Based Telemental Health April 2018

- California Telehealth Resource Center, Telehealth Program Developer Kit
- California Telehealth Resource Center, Best Practices
- Conducting a Telehealth Needs Assessment
- Indian Health Service Telebehavioral Health Center of Excellence Step-By-Step Guide for Setting Up Telebehavioral Health Services
- SAMHSA-HRSA Center Telebehavioral Health Training and Technical Assistance Series
- Telehealth Needs and Organizational Readiness Guide
- Telligen and gpTRAC Telehealth Start-Up and Resource Guide

### Literature Supporting the Business Case for Telebehavioral Health

- Exploring the Business Case for Children's Telebehavioral Health



## Table 1: Potential Business Models for Telebehavioral Health

The National Council for Behavioral Health and the Substance Abuse and Mental Health Services Administration have previously described three potential business models for telebehavioral health services, outlined below.<sup>17</sup> Hospitals and health systems may employ a combination of these models when implementing their telebehavioral health programs.

Model Type	Hub & Spoke	Site-to-Site Within a Health System	Direct Remote Specialist Hiring
<b>Description</b>	Hospital or health system partners with remote specialists at a different hospital or health system.	Hospital or health system uses their own specialists to provide services virtually.	Hospital or health system recruits behavioral health specialists from any location, either directly or through a third-party recruiting or staffing company.
<b>Patient location</b>	Originating site or spoke site (e.g., rural hospital) schedules the telebehavioral health visit and hosts the patient on-site. Remote specialist at hub site evaluates or treats the patient via technology.	Site where the patient is located schedules the telebehavioral health visit and hosts the patient on-site. Remote specialist evaluates or treats the patient via technology.	Remote specialist evaluates or treats the patient via technology. Patient need not be present at the hospital or health system.
<b>Payment Considerations</b>	Standard professional fee payment goes to the specialist at the remote site, and originating site where patient is seen receives a facility fee.	Facility fees are potentially excluded.	“Undefined” under Medicare and some Medicaid programs, meaning it complies with applicable regulations but may not be what the law intended.
<b>Challenges</b>	Potential payer-mix challenges and patient no-shows.	Requires an existing workforce with capacity to evaluate and treat additional patients.	Need to ensure remote specialists are licensed in the state where the patient is located.
<b>Benefits</b>	Able to treat more patients and provide greater access to more timely care.	Reduces clinicians’ travel time across sites, leading to increased capacity and efficiency within the system.	Retains clinicians if they move, so supports continuity of care and relationship building with patients and care teams.



## Success Factor 2: Organizational Policies and Clinical Workflows

Engaging all stakeholders in developing organizational policies and clinical workflows will support the implementation, uptake and continued use of telebehavioral health and encourage innovative use of technology.

To support telebehavioral health implementation and sustainability, at a minimum, organizational policies should address: 1) information technology (IT), 2) staffing (e.g., credentialing) and multidisciplinary care, and 3) patient care protocols.

### Key Takeaways:

- Ensure that new and existing policies do not exclude telebehavioral health services by implying that patients only receive care in a brick-and-mortar setting. However, policies will need to address considerations for the physical environment where clinicians provide and patients receive care.
- In organizational policies, do not hold telebehavioral health to a different standard than in-person care, and ensure policies support clinicians to work at the top of their licenses.
- Make sure policies address interpretations of external regulations and coverage requirements to clarify organizational expectations and provide clear direction to staff.
- When multistakeholder groups with broad representation design clinical workflows, tailor workflows to the local context and take into account available community resources; they can help embed telebehavioral health into the system of care.
- Integrate workflows into the electronic health record (EHR) to help to ensure telebehavioral health is scalable across the organization.

## Implementation Strategies

### STARTING OUT

- Engage front-line clinician and staff champions, patients and caregivers in the initial development of policies and workflows to increase buy-in and understand barriers and unintended consequences of policies
- Engage in-house experts and external consultants for areas where specific expertise is needed to develop policies (e.g., clinical software, security, documentation, privacy)
- Integrate and codevelop policies with IT and related departments, recognizing that policies do not need to start in the IT department and can be developed simultaneously
- Ensure there are policies in place to address issues that would have traditionally been addressed through physical location of behavioral health care (e.g., potential violence, crisis care)
- Lay out physical space considerations for specific target populations (e.g., sitters, volume and noise adjustments for psychiatric patient populations)
- Understand how telebehavioral health scales up and scales down, and what type of technology solution is right for the organization
- Begin the credentialing and privileging process early to ensure clinicians can legally practice within your facility
- Use “proxy credentialing” to rely on information from another hospital or health system in making credentialing decisions and thus reduce the administrative burden of this process
- Convene representatives from across the organization—including legal, finance, clinical departments—and an executive sponsor with a can-do attitude, to develop and implement policies
- Talk to as many people as possible within the hospital/health system and field prior to

- developing a request for proposal (RFP) or having discussions with vendors
- Design workflows to achieve programmatic objectives that align with the hospital's or health system's overall business and service

delivery objectives

- Ensure workflows are designed in-house; only consult with vendors in an advisory role on how they have seen others incorporate technology into workflows

## STRENGTHENING AND SUSTAINING

- Dedicate a team of clinical staff and operational stakeholders (e.g., legal, compliance) to review and refine policies and workflows
- Engage patients and families in ongoing policy review and evaluation to protect against negative unintended consequences
- Develop policies on compensation and payment for synchronous and asynchronous modalities
- Implement a policy to require proxy credentialing as the default for telebehavioral health
- Standardize use of telehealth follow-up actions when individuals drop out of care or are at risk of lost to follow-up (e.g., text messages, peer support social networks, instant messaging)
- Align clinician compensation with strategic goals to ensure that clinicians are not penalized for providing virtual rather than in-person behavioral health services
- Ensure clinical policies and/or protocols address appropriate handoffs between telebehavioral health and other care settings
- Challenge current processes and workflows by thinking about how technology can enhance or improve them, rather than simply embedding technology into current workflows
- Integrate workflows into EHRs to support data collection, increase productivity and reduce burden
- Ensure policies and workflows emphasize multidisciplinary care teams to support clinicians practicing at the top of their licenses and achieve potential cost-savings through using lower cost care
- Address cybersecurity issues within the organization and work with external partners to ensure they have robust cybersecurity policies in place
- Proactively identify process and outcome data to collect in piloting the workflow to inform care delivery and demonstrate workflow effectiveness
- Explore the use of artificial intelligence and machine learning to help identify how best to move patients through the system of care

## Potential Barriers and Suggested Solutions

### Lack of support for organizational change

#### *Suggested Solutions*

- Build telebehavioral health into the organization's health care access strategy and align workflow to organizational strategy and vision
- Engage board of directors and/or trustees to obtain top-down support for the program
- Emphasize ROI and that patients lost to follow-up will go elsewhere for services or not get the care they need
- Obtain buy-in from front-line clinicians and work upward to administrators and executives
- Share stories of how telebehavioral health was used to care for patients and maximize clinician time and expertise

### Inconsistent policies and practices across the organization

#### *Suggested Solutions*

- Convene leaders and champions from across the organization to agree on policy and workflow requirements
- Obtain buy-in from necessary stakeholders and create governance structures for policy development and review
- Clarify organizational goals and desired outcomes, and review policies to ensure alignment, relevance and currency
- Conduct a readiness assessment to identify areas where policies need to be strengthened or aligned
-

- Develop protocols for policy and workflow review and revisions
- Standardize processes for using telebehavioral health across the organization, care settings, services lines and sites; share standard processes with external partners as appropriate

### **Historic lack of understanding of behavioral health by leadership, clinicians and staff within the hospital or health system**

#### ***Suggested Solutions***

- Raise awareness of the value of behavioral health by disseminating white papers, sharing compelling

patient stories, and communicating improved patient and system outcomes associated with both behavioral and telebehavioral health

- Educate staff on the intersection of behavioral health and chronic conditions
- Engage in an organizational and/or community campaign to reduce the stigma of mental illness
- Incentivize clinicians to work with patients with behavioral health needs through recruitment and professional development opportunities
- Use existing standard lexicons<sup>18</sup> for telebehavioral health and behavioral health care

## Suggested Tools and Resources

### **Information Technology (IT), Legal and Regulatory Resources**

- American Health Information Management Association Telemedicine Toolkit
- California Telehealth Resource Center Webinar: Mapping and Designing Telehealth Clinic Workflows
- Center for Connected Health Policy HIPAA and Telehealth
- Health Resources & Services Administration Medicare Telehealth Payment Eligibility Analyzer
- Legal, Regulatory, and Risk Management Issues in the Use of Technology to Deliver Mental Health Care
- Preparing for the Telehealth World: Navigating Legal, Regulatory, Reimbursement, and Ethical Issues in an Electronic Age
- SAMHSA Consent2Share Application
- Telebehavioral Health Institute HIPAA Risk Assessment Template
- Telehealth Resource Centers HIPAA & Telehealth, A Stepwise Guide to Compliance

### **Proxy Credentialing Information**

- CMS Memorandum on Streamlined Credentialing & Privileging for Telemedicine Physicians & Practitioners
- Joint Commission, Final Telemedicine Revisions

### **Interstate Licensing Compacts**

- Interstate Medical Licensure Compact (Physicians)
- Nurse Licensure Compact
- Physical Therapy Compact
- Psychology Interjurisdictional Compact (PSYPACT)
- Recognition of EMS Personnel Licensure Interstate CompAct (REPLICA)

### **Sample Policies and Protocols**

- Sample Crisis Protocol for Telebehavioral Health Services
- Sample Privileging and Credentialing Agreement
- Telemental Health Toolkit, Chapter 2: Policy and Protocol

### **Selecting Vendors**

- California Telehealth Resource Center Telehealth Technology Toolkit (see PDF page 125)
- A Guide for Telemedicine Service Vendor Contracting: Applying Traditional Contracting Considerations in a New Arena
- Telemental Health Comparisons

### **Tools and Resources to Combat Stigma**

- AHA Behavioral Health - Combating Stigma
- CEOs Against Stigma
- National Alliance on Mental Illness (NAMI) In Our Own Voice Program
- NAMI StigmaFree Program







## Success Factor 3: Staff Education and Training

Hospitals and health systems should dedicate resources to train and educate staff across the organization on the benefits, availability and use of telebehavioral health.

Given the links between mental disorders and chronic disease<sup>19</sup>, clinicians in physical medicine service lines can benefit from using telebehavioral health to check on patients' compliance and progress on physical conditions and comorbidities such as managing diabetes or congestive heart failure.

### Key Takeaways:

- Use organizational training to address the stigma of mental illness, emphasizing the importance of behavioral health care.
- For service lines where staff will use telebehavioral health with their patients, train every team member on how to integrate telebehavioral health into usual care.
- Each team member must know the process for initiating and completing a telebehavioral health encounter, including how to use and troubleshoot issues with the technology.
- Tailor training to address each profession and role, including how to work with a multidisciplinary virtual care team with a mix of skills.
- Base training on the most up-to-date evidence-based practice guidelines, while remaining flexible to account for emerging guidance and innovative practices.
- Using effective education and training, stimulate the uptake of telebehavioral health by increasing provider and patient comfort with the technology, and securing stakeholder buy-in.
- Leverage telebehavioral health for supervising and mentoring staff at originating and remote locations to support continuing education and professional development efforts.

## Implementation Strategies

### STARTING OUT

- Set expectations for using telebehavioral health during orientation and onboarding of staff across the organization, including physical medicine service lines
- Ensure staff have access to training on troubleshooting, addressing common issues and responding to behavioral health crises
- Incorporate telebehavioral health training into pre- and post-licensure training requirements
- Ensure adequate infrastructure and resources to train staff on standard operating procedures
- Provide in-depth training “just-in-time” only to those who will have an immediate opportunity to use the technology
- Standardize training across service lines utilizing telebehavioral health to ensure the service is seen as equivalent to in-person behavioral health care
- Integrate telebehavioral health into physical medicine service lines to address and treat comorbidities and other physical health conditions
- Monitor and track patient outcomes and experience to identify opportunities where training and educating providers could improve care or experience with telebehavioral health services
- Celebrate exemplars who successfully use telebehavioral health services to improve patient access and outcomes
- Freely disseminate metrics on telebehavioral health utilization and quality dashboards to front-line staff and clinical leaders on a consistent and frequent basis

## STRENGTHENING AND SUSTAINING

- Create processes for staff to stay current on technology, evidenced-based care and best practices overall
- Designate an individual or group of individuals who are responsible for assisting staff with using the technology, managing challenging cases and staying current on technology and best practices
- Clarify roles and responsibilities through a job protocol redesign and ensure work is appropriately distributed across care teams
- Ensure training incorporates evidence to demonstrate when telebehavioral health care is superior and/or preferred to in-person care
- Incorporate peer-to-peer training on using telebehavioral health and addressing common challenges into professional development
- Use regular communication channels (e.g., newsletters, monthly videos) to feature clinical champions showcasing innovative uses of telebehavioral health
- Share protocols across the organization and broader system, and educate staff across each service line within the organization on how to use telebehavioral health
- Incorporate coordinating clinical, technical and administrative components into training
- Ensure focus on interprofessional care delivery rather than on independent “silos,” supporting providers to work at the top of their license
- Evaluate competencies through performance assessments and interprofessional peer review

## Potential Barriers and Suggested Solutions

### Limited resources to train and educate staff on telebehavioral health

#### **Suggested Solutions**

- Use existing training and learning resources to incorporate telebehavioral health into annual training for clinicians
- Leverage existing educational tools and resources, particularly web-based and virtual training (e.g., online training modules, learning management system)
- Support staff to operate at the top of their licenses by tailoring training for various care team members based on their profession, roles and responsibilities
- Integrate telehealth training into other educational offerings (e.g., orientation, virtual brown bag lunches)
- Explore train-the-trainer models, training a few key clinical champions to subsequently train their staff and colleagues

### Lack of clinician buy-in

#### **Suggested Solutions**

- Expose clinicians to telebehavioral health through virtual rounds and videos

- Share stories from clinician champions, highlighting their use and successes with telebehavioral health
- Incorporate the patient voice to make the case for why this matters
- Offer incentives to clinicians, such as continuing medical education credits, to encourage uptake and usage
- Provide flexible training options, including remote training, multiple time offerings and peer-to-peer learning
- Demonstrate connections between behavioral health and physical health, including chronic disease management

### Challenges engaging remote staff

#### **Suggested Solutions**

- Ensure equipment across locations is similar to what’s used during training
- Engage clinical champions to communicate and train across care teams
- Host virtual team huddles and focus on sharing challenges and lessons learned to create a support network

- Implement a user engagement team to follow up, troubleshoot issues and share testimonials
- Require completion of training by all staff, regardless of physical location, and align training goals and incentives across sites
- Educate staff in a synchronous and asynchronous curriculum and ensure curriculum is consistent with on-site care
- Use virtual brown bag lunch and learns to build team relationships and encourage team learning

### **Discomfort with the technology or something “new”**

#### ***Suggested Solutions***

- Introduce telebehavioral health in small tests

of change (e.g., pilot testing, Plan-Do-Study-Act cycles) to increase comfort with the new technology and processes

- Encourage clinicians to use telebehavioral health with established patients who could benefit from and are interested in the service
- Ensure staff are engaged in redesigning new workflows
- Support and celebrate early adopters of telebehavioral health
- Compare to something new that was successfully introduced and made work and life better for staff
- Engage clinical champions to generate excitement and build trust in the new technology

## Suggested Tools and Resources

### **Competencies and Practice Guidelines**

- American Academy of Child and Adolescent Psychiatry Practice Parameter for Telepsychiatry with Children and Adolescents
- American Telemedicine Association (ATA) Practice Guidelines for Telemental Health with Children and Adolescents
- ATA Practice Guidelines For Video-Based Online Mental Health Services
- A Framework of Interprofessional Telebehavioral Health Competencies: Implementation and Challenges Moving Forward
- The Need to Implement and Evaluate Telehealth Competency Frameworks to Ensure Quality Care across Behavioral Health Professions

### **Practice Tools**

- American Psychiatric Association (APA) Clinical Practice Guidelines
- APA and ATA Best Practices in Videoconferencing-Based Telemental Health April 2018

- Best Practices for Remote Psychological Assessment via Telehealth Technologies
- SAMHSA Treatment Improvement Protocol: Using Technology-Based Therapeutic Tools in Behavioral Health Services
- Transcultural Psychiatry Made Simple: Asynchronous Telepsychiatry as an Approach to Providing Culturally Relevant Care

### **Training Programs**

- American Hospital Association’s Team Training Program: Team Strategies and Tools to Enhance Performance and Patient Safety (TeamSTEPPS®)
- ATA Accredited Telemedicine Training Programs

### **Common Terminology for Training**

- A Comparison of Telemental Health Terminology used Across Mental Health State Licensure Boards
- Telebehavioral Health Institute Informed Consent Library

Taking Action			
TYPES OF TRAINING	WHO?	WHEN?	HOW?
Importance of addressing behavioral health needs and overcoming stigma			
Availability of telebehavioral health services and who could benefit			
Using the technology with clinicians and patients, including initiating and completing a telebehavioral health encounter			

TYPES OF TRAINING	WHO?	WHEN?	HOW?
Integrating telebehavioral health into usual care			
Working with a multidisciplinary virtual care team with a mix of skills			
Staying up to date on relevant evidence-based practice guidelines			
Other topics?			



## Success Factor 4: Patient, Family and Caregiver Engagement

Telebehavioral health provides patients with private, timely and convenient access to needed behavioral health services and care. It also provides an opportunity to reach patients who may not otherwise access health care resources due to social isolation or lack of transportation to in-person care.

Your hospital or health system can use telebehavioral health to follow up with individuals who miss appointments and can support keeping patients in care by eliminating many existing barriers to accessing high-quality behavioral health services. Patients and caregivers who use telebehavioral health are generally satisfied with the service and report positive experiences.<sup>20,21</sup>

### Key Takeaways:

- Engage all patients who could benefit—regardless of their age, socioeconomic status or other demographic factors—in discussions about their preferences to receive care through telebehavioral health.
  - Many patients and caregivers may wish to use the technology, but may not know it is available as an option for how to receive care.
- Use shared decision-making with patients, family and caregivers to discuss their goals, values and preferences, and also the benefits, risks, costs and alternatives to telebehavioral health as a treatment option.
- Work with patients and caregivers to increase their confidence in the reliability, confidentiality and user-friendliness of the technology.
- Provide opportunities for ongoing engagement between care teams and patients to share progress, comfort level and any issues with using telebehavioral health, to ensure care remains appropriate.
- Engage patients who support and those who are skeptical of telebehavioral health to help design telebehavioral health programs and ensure they are truly patient centered.
  - By engaging patients and caregivers up front in service planning and design, the services are more likely to be accepted and to work in real life.

## Implementation Strategies

### STARTING OUT

- Engage patients and caregivers in early discussions about telebehavioral health program design
- Use existing communications and educational materials to support conversations with patients on what to expect from telebehavioral health care
- Equip clinicians offering telebehavioral health to patients and caregivers with answers to common questions about effectiveness, security, privacy and protocols (e.g., what happens if...)
- Ensure there are secure, Health Insurance Portability and Accountability Act of 1996 (HIPAA) compliant mechanisms to share patient records and information gathered through telebehavioral health visits with appropriate providers, to support coordination and continuity of care
- Provide evidence-based training, resources and tools for all staff to support patient and caregiver engagement in telebehavioral health care
- Ensure the patient and family advisory council (PFAC) is familiar with telebehavioral health and informs implementation
- Create tailored patient and caregiver educational materials for various patient populations and

- common services that use telebehavioral health
- Empower patients and caregivers by providing them with tools to initiate a telebehavioral health visit without first requiring an in-person visit

- Ensure compliance with state-specific informed consent regulations regarding telehealth interactions

### STRENGTHENING AND SUSTAINING

- Embed engagement in the organizational culture to help ensure all clinicians have ownership over engaging patients, families and caregivers in patient care
- Establish peer support groups for patients, families and caregivers using telebehavioral health to encourage uptake and sustain patient engagement
- Include patients, families and caregivers in designing new organizational and patient-facing resources to support use of telebehavioral health
- In newsletters and presentations, feature lessons learned from engaging an array of patient populations in telebehavioral health care (e.g., children and adolescents, guardians,

older adults, nonverbal adults)

- Conduct patient, family and caregiver surveys and focus groups to assess perceptions, utilization and opportunities for improvement
- Collect patient, family and caregiver stories of positive experiences and outcomes using telebehavioral health and share in monthly newsletters and other published materials
- Engage the patient and family advisory council (PFAC) in identifying areas, service lines and sites that could benefit from the use of telebehavioral health
- Create a digital front door that is easy for patients to access and provides up-to-date information on telebehavioral health services and benefits

## Potential Barriers and Suggested Solutions

### **Patient, family and caregiver skepticism about the effectiveness of or hesitance to use telebehavioral health care**

#### ***Suggested Solutions***

- Collect and share patient and caregiver stories that demonstrate the value of using telebehavioral health care, including data that demonstrate the equivalency to in-person care
- Create short resources (e.g., one-pager with frequently asked questions) that highlight the equivalency of telebehavioral health to in-person care
- Ensure patients and caregivers understand that this is an option and they can change their mind and decide later not to receive care virtually
- Build trusting relationships through in-person care then transition to using telebehavioral health

### **Patients, families and caregivers may not be offered telebehavioral health because of assumptions about their preferences based on demographic and socioeconomic factors**

#### ***Suggested Solutions***

- Assess patient needs and understanding of

telebehavioral health to ensure all patients who can benefit from accessing care in this way have the opportunity to use it

- Encourage clinicians to use telebehavioral services, through financial incentives and patient success stories
- Use case studies to demonstrate the variety of patients that can and have benefited from telebehavioral health services (e.g., children and adolescents, mothers with postpartum depression, older adults) and the variety of ways patients can access telebehavioral health services (e.g., smartphone, laptop, tablet)
- Share published evidence supporting the use of telebehavioral health with all patient subgroups (e.g., **ATA Practice Guidelines** note that no studies to date have identified subgroups that do not benefit from, or are harmed by, remote videoconferencing as a telebehavioral health modality.)
- Use patient navigators and/or discharge coordinators who understand local resources to set up initial appointments for all eligible patients and connect to community supports

- Implement patient engagement metrics within telebehavioral health service lines (e.g., through patient experience surveys)
- Provide technical assistance for providers and patients to support access to payment and reimbursement to encourage usage

**Patients, families and caregivers experience technical difficulties (e.g., poor connections), limiting desire for future use**

***Suggested Solutions***

- Ensure clinicians have guidance for troubleshooting technical issues during a telebehavioral health encounter, including contingency plans (e.g., telephone call if video is spotty)

- Have an IT support plan in place that includes a 24-hour help desk or contract for support services with vendors
- Ensure there is sufficient broadband for the patient volume
- Check patient ZIP codes to determine cell service strength
- Establish and use a checklist for initially connecting a patient to a clinician that clearly outlines what to do and who should do it
- Have a documented plan for crisis escalation (e.g., patient expresses suicidality in session), and practice the emergency protocol

**Suggested Tools and Resources**

**Caregiver Resources on Behavioral Health**

- NAMI Family-to-Family Program
- NAMI Homefront Program for Family, Caregivers, and Friends of Service Members and Veterans

**Tools to Support Patient, Family and Caregiver Engagement**

- AHRQ Engaging Patients and Families in Their Health Care
- Health Research & Educational Trust (HRET) Patient and Family Engagement Resource Compendium
- NAMI Provider Education
- National Quality Partners Playbook™: Shared Decision Making in Healthcare

- SAMHSA Shared Decision Making in Mental Health

- Telehealth and Patient Satisfaction: A Systematic Review and Narrative Analysis

**Videos on Engaging Patients, Families and Caregivers in Telebehavioral Health**

- Telemental Health Toolkit, Chapter 4: Engaging the Client on Video
- Telemental Health Toolkit, Chapter 5: Cognitive/Interpersonal Approaches
- Telemental Health Toolkit, Chapter 7: Family and Group Therapy

Taking Action
How can we build telebehavioral health into our patient and family engagement strategy?



## Success Factor 5: Measurement

It is important to identify measures specific to your organization and use them to determine whether the telebehavioral health program is meeting the system's and program's goals and objectives, and where opportunities for improvement exist.

Clear and standard definitions for data and quality will support efficient tracking, monitoring and reporting within the organization and to external stakeholders for learning and quality improvement. This can support information sharing to avoid fragmentation in care.

### Key Takeaways:

- Prior to selecting measures, understand what data sources are available and think proactively about what data can be collected. Data and measurement can be powerful tools for understanding an organization's current needs, strengths and opportunities.
- Use measurement to help demonstrate the value of telebehavioral health to internal and external stakeholders.
- Start with structural measures (i.e., assessments of whether the organization has specific capabilities), and then move to process measures and finally clinical outcome measures to assess the effectiveness of telebehavioral health programs.
- Whether working to improve access, improve the patient and clinician experience, retain staff, reduce the total costs of care or any combination of these goals, select measures that are:
  - meaningful to patients, clinicians and administrators;
  - improvable;
  - feasible to deploy;
  - broadly usable; and
  - aligned with the overall system goals for telebehavioral health.<sup>22</sup>

## Implementation Strategies

### STARTING OUT

- Define the purpose for data collection and measurement
- Obtain input from front-line staff and patients to identify outcomes of interest prior to implementation
- Implement a measurement framework (i.e., the **NQF Telehealth Measurement Framework**) to identify which quality measures should be used to assess progress, selecting measures that are most relevant to your hospital or health system
- Begin using operational measures such as adoption of technology, provider training volume, or no-show rates, then assess processes such as time to first appointment and medication adherence
- Obtain agreement from stakeholders across the care continuum on what quality measures will be used to measure progress
- Ensure measure results are used to drive quality improvement and inform decision-making, particularly about where to offer services, to whom services should be offered and how to improve service delivery
- Design and implement EHRs within the organization with an eye toward real-time data collection and clinical decision-making for patients with behavioral health needs
- Incorporate telehealth as an encounter into the specifications of existing behavioral health measures

- Use measurement results in newsletters, town halls, virtual brown bags and other

communication channels to highlight early adopters and encourage uptake

### STRENGTHENING AND SUSTAINING

- Create patient, caregiver and clinician experience surveys, and use the data to improve service delivery and program design
- Employ outcome measures, including patient-reported outcome performance measures, to assess outcomes of interest such as improved symptomatology, recovery, aggregate improvement on depression scores, and improved quality of life
- Centralize ownership of tracking, assessing and interpreting quality measures to a department or team within your hospital or health system
- Designate staff to lead organizational quality improvement initiatives based on measure results
- Design workflows to capture routine data within the EHR to guide program improvement
- Frequently use data to inform organizational decisions about where to expand or reduce telebehavioral health services, and what workflow changes are required
- Share key performance metrics across the organization and with senior leadership (e.g., publish data on dashboards) on a consistent and frequent basis, and identify strategies to address any metrics that are below target
- Publish results and share lessons publicly in literature and at conferences to encourage others to adopt telebehavioral health and to eventually benchmark performance against others

## Potential Barriers and Suggested Solutions

### Measurement burden and competing measurement priorities across stakeholder groups

#### *Suggested Solutions*

- Use the multistakeholder groups involved in program, policy and workflow design to prioritize a subset of telebehavioral health measures within the health system or hospital
- Communicate the value and evidence for measurement across the organization, building a culture of data-driven continuous quality improvement
- Implement common measures for telebehavioral health across service lines and sites
- Ensure there is a strong evidence base for selected measures, selecting those that are actionable and inform clinical decision-making
- Leverage technology (e.g., EHR, patient portals,

mobile applications) to automate data collection, measurement and reporting

- Explore the use of nonclinical staff to collect data for measurement purposes

### Limited adoption of telebehavioral health may lead to denominator challenges

#### *Suggested Solutions*

- Use measures to help understand operational delivery of telebehavioral health
- Investigate the reasons why there is limited adoption and employ relevant change management strategies to increase uptake
- Ensure all staff understand how to code telebehavioral health activities to avoid the “if it’s not coded, it doesn’t exist” mentality
- Measure appropriateness of the modality of care for clinical conditions where telebehavioral health was used

## Suggested Tools and Resources

### Behavioral Health Quality Measures and Measurement Information

- 2019 Core Set of Behavioral Health Measures for Medicaid and CHIP

- Measures Required for Certified Community Behavioral Health Clinic (CCBHC) Demonstration Program

- NQF Behavioral Health and Substance Use Standing Committee Reports
- Pragmatic Characteristics of Patient-Reported Outcome Measures Are Important for Use in Clinical Practice

**Telehealth and Telebehavioral Health Quality Measurement Resources**

- Ensuring Clinical Quality in Telemedicine
- A Lexicon of Assessment and Outcome Measures for Telemental Health
- Medical Technology in the Value-Based Environment: An Assessment of Quality Measure Gaps
- NQF Telehealth Measurement Framework

**Taking Action**

What measures make the most sense for our organization to assess our telebehavioral health services?

How can we ensure the measures we select are meaningful to stakeholders and do not overly burden patients, caregivers and clinicians?

MEASUREMENT DOMAIN	MEASURE DESCRIPTIONS	DATA SOURCES
Access to care		
Financial impact / cost		
Experience		
Effectiveness		



## Success Factor 6: Community Partnerships

Communities are key to successfully implementing and sustaining telebehavioral health programs.

Community partners can help patients and caregivers access telebehavioral health by providing a trusted point of entry and access to technology.<sup>23</sup>

### Key Takeaways:

- To effectively partner with the community, understand:
  - the behavioral health needs within your community;
  - key community stakeholders (e.g., local government, safety-net providers, local community leaders, community-based organizations); and
  - the gaps in current community resources and services.
- Use community health needs assessments and collaborate with community organizations to build a shared vision and goal for telebehavioral health.
- Identify the critical partnership(s) needed to ensure telebehavioral health programs are successful and sustainable. Community-based clinicians, community agencies, faith-based organizations, law enforcement agencies, first responders, emergency medical technicians and more—all play an important role in connecting patients and caregivers to appropriate services.
- Ensure that community partners are aware of the telebehavioral health services your hospital or health system offers and the ways in which patients, caregivers and partners can access the services.
- Provide partners and community members with ongoing opportunities to offer feedback on the telebehavioral health services available, including opportunities to improve and strengthen existing programs and partnerships.
- Collaborate with community leaders or advocate to build trust in the community to increase the likelihood that the community will accept and embrace the telebehavioral health program.

## Implementation Strategies

### STARTING OUT

- Conduct a community health needs assessment to understand the behavioral health needs and identify gaps in current and desired levels of services available in the community
- Educate the community (e.g., first responders, clergy, community agency staff) on telebehavioral health availability, expectations and use, including treatment for substance use disorder and other conditions or illness that may be prevalent within the community
- Provide resources to the community on reducing the stigma of mental illness
- Be accessible to community leaders and build trust with them through community meetings and town halls, including holding such meetings virtually to highlight the ease of the interactions
- Identify community points of access (e.g., churches, barbershops, community centers) where patients and caregivers may feel comfortable accessing behavioral health resources or support
- Identify an existing inventory of community resources and make this available to patients, caregivers and clinicians
- Collaborate with community partners to raise consumer awareness of the availability of telebehavioral health services and connect patients to care
- Explore the use of social media platforms as a community engagement tool

## STRENGTHENING AND SUSTAINING

- Partner with the community's trusted points of access to offer telebehavioral health services to patients and caregivers
- Build partnerships with the judicial system, law enforcement, other hospitals in the area without existing behavioral health services, and shelters, (among others) to provide support for addressing behavioral health disorders in the community prior to ED or hospitalization
- Dedicate an on-site resource for identifying and connecting with community resources to establish relationships for warm handoffs
- Develop coalitions at the local, regional and state levels (e.g., work with your state or metro hospital association) to offer telebehavioral health services
- Engage community partners in advocacy efforts for improved benefit parity and telebehavioral health reimbursement
- Partner with schools to educate them on early recognition and identification of behavioral health needs, and create an access point in schools for telebehavioral health
- Hold community open forums to elicit input and suggestions on how to improve telebehavioral health care access, cost and quality
- Work with community partners to design marketing campaigns to raise awareness of this valuable service

## Potential Barriers and Suggested Solutions

### Community partners mistrust new approaches and/or the hospital or health system

#### *Suggested Solutions*

- Establish trust early in the process through community engagement and outreach
- Bring community partners to the table for early program design conversations
- Create a mechanism for community partners to obtain information and provide ongoing and frequent feedback to the hospital or health system
- Practice humility, removing any personal agenda and building relationships with community partners around their needs

### Fear of overidentification of patients who need services and lack of capacity to address all of their needs

#### *Suggested Solutions*

- Set expectations on service capacity and help front-line clinicians understand what additional resources may be available in the community and where they can go for help
- Emphasize how gathering critical information from patients will improve the hospital's or health system's ability to address needs upstream

- Maintain an up-to-date list of community resources and contacts, and integrate into referral and/or discharge workflows
- Create a process for anyone involved in delivering telebehavioral health services can identify resource gaps and create and implement solutions

### Concern that collaborating with competitors will negatively impact financial sustainability

#### *Suggested Solutions*

- Draft memorandums of understanding (MOUs) with community partners that outline realistic cost-sharing opportunities and set clear goals and responsibilities for both parties
- Begin with one use case to demonstrate success, e.g., collaborating with community-based organizations for smooth transitions of care
- Partner with community organizations and other provider groups to offer services that are not offered internally within the organization
- Build community collaboration into the business case, establishing cost savings to the system through investments in community partnerships
- Provide information on how timely access to care will free up physical and financial resources

## Suggested Tools and Resources

### Community Health Needs Assessment

- Association for Community Health Improvement Community Health Assessment Toolkit
- Centers for Disease Control and Prevention Community Health Improvement Navigator
- Health Research & Educational Trust Engaging Patients and Communities in the Community Health Needs Assessment Process
- National Consumer Supporter Technical Assistance Center’s Community Needs Assessment Tool
- SAMHSA How States Can Conduct a Needs Assessment

### Community Partnerships Toolkits

- AHA Ensuring Access to Vulnerable Communities, Community Conversations Toolkit
- Increasing Access to Behavioral Health Care Through Technology

- A Playbook for Fostering Hospital-Community Partnerships to Build a Culture of Health

### Community and Social Support Resources

- Certified Community Behavioral Health Clinics (CCBHCs)
- Community Access resources and services
- SAMHSA’s Behavioral Health Treatment Services Locator

### Sample Memorandums of Understanding for Use with Community Partners

- Memorandums of Understanding (MOU) and Medical Center Memorandums (MCM) for Telemental Health Clinics and Traditional Healers/Healing Services
- Sample Memorandum of Understanding for Telemedicine Services and Equipment

## Taking Action

Which community partners do we need to engage?

- Community centers
- Community clinics
- Community health centers
- Faith-based organizations
- First responders
- Law enforcement
- Schools
- Shelters
- Workforce development
- Others?

## DRIVERS OF CHANGE

Some of the most commonly cited barriers to the widespread implementation and adoption of telebehavioral health in hospitals and health systems are:

- Lack of payment and reimbursement models that support telebehavioral health as a modality of care
- Policy restrictions that limit where and how clinicians deliver care
- Persistent behavioral health workforce shortages

In the shift to value-based care, redesigning systems of care to fully integrate and sustain telebehavioral health will require hospitals, health systems, payers, professional societies, state and federal agencies, advocacy groups and other stakeholders to work together to take action in these domains.

### Payment Models, Reimbursement and the Shift to Value

Payment models that include telebehavioral health can facilitate access to the right care, at the right time and in the right place. Reimbursement should support patients to participate in and use telebehavioral health. However, affordability and lack of adequate insurance coverage for telebehavioral health services prevent patients from accessing the care they need in a cost-effective way. Despite federal legislation and state mandates focused on parity for behavioral health services and reimbursement for telehealth, payment and coverage for both behavioral health and telebehavioral health services remain inconsistent across health plans and states.<sup>24</sup>

Several states have mandated reimbursement for telebehavioral health by commercial payers, but commercial reimbursement remains variable by payer.<sup>25</sup> As of January 2019, Medicare reimburses for a number of telehealth services focused on behavioral health including screening, behavior counseling and psychotherapy.<sup>26</sup> Despite recent legislation to expand Medicare access to telehealth services for the treatment of substance use disorders or co-occurring mental health disorders, restrictions on patient originating site—that is, where the

Medicare beneficiary is physically located at the time of service—currently limit hospital and health system abilities to invest in and scale telebehavioral health. Removing limitations to allow patients' homes to serve as sites of care for telemedicine reimbursement purposes, and to allow urban and metropolitan hospitals and health systems to seek reimbursement from Medicare for telebehavioral health services, may help increase adoption of telebehavioral health across the U.S.<sup>27</sup> Medicaid reimbursement for telebehavioral health varies by state, and although at least 48 state Medicaid programs reimburse for some telebehavioral health services, reimbursement rates differ and may not adequately cover the costs of services.<sup>28</sup>

Ideally, payment models should include coverage for the costs of starting a service. Hospitals and health systems may be able to access funding through demonstration projects and grant programs to support needs assessments, infrastructure development and pilot testing (e.g., Center for Medicare & Medicaid Innovation, Community Benefit programs, U.S. Department of Agriculture grants). Your hospital or health system also may find success in integrating telebehavioral health into covered services rather than using “carve-outs” (i.e., separating behavioral health from physical health care) for payment.

### Value-Based Care Models

While telebehavioral health is feasible in existing fee-for-service models, opportunities for greater impact exist when telebehavioral health is integrated into value-based care models where specialty care, primary care and behavioral health care are coordinated in a fully integrated service line. In such models, payers, hospitals, health systems and clinicians agree to meaningful outcomes to which payers can tie payment. Telebehavioral health in value-based care models supports multidisciplinary care teams to integrate care, share information and focus on health outcomes rather than volume of services. Hospitals and health systems implementing telebehavioral health have found that it provides sufficient return on investment (ROI) in a variety of

settings, as the costs of virtual services are lower than in-person care.<sup>29,30,31</sup> Using tools to calculate costs and ROI can help with discussions with payers and support advocacy efforts for reimbursement model changes at the state level.

## Federal and State Policy

The federal and state policy landscape for telebehavioral health continues to evolve in the United States. Complex regulations and inconsistencies across states limit the adoption and utilization of telebehavioral health services. Federal efforts by Medicare and U.S. Department of Veterans Affairs to expand reimbursement and coverage may help hospitals and health systems deliver behavioral health services via telehealth.

As new policies and regulations that support the use of telehealth are proposed and take effect, your hospital and health system may see greater opportunities and fewer barriers to implementing telebehavioral health programs. For instance, physicians now no longer need to meet with a patient in person prior to delivering services via telehealth.<sup>32</sup>

Changes to policies at the federal and state levels, however, should be approached holistically, taking into account a systems view of telebehavioral health. Policies should ensure that telebehavioral health is integrated into the broader care delivery system. Carving out telebehavioral health and addressing it separately as a care delivery model—rather than as a critical component of a high-quality health system—will limit the achievement of optimal health outcomes. In addition to payment and reimbursement changes noted above, changes to licensing and prescribing policies would help support implementing and sustaining telebehavioral health in hospitals and health systems.

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### Licensing

Most states require clinicians to obtain a license to practice in the state where the patient is physically located.<sup>33</sup> For telebehavioral health, this means that clinicians may be limited in their ability to treat

patients across state lines. In areas with a shortage of behavioral health professionals or where patients have to travel long distances to access behavioral health services, state licensing limitations may contribute to lengthy wait times for services or patients going without the care they need.

A critical policy change that could support an increased uptake in telebehavioral health and improve the ability of the current workforce to provide behavioral health services at a distance is national licensure and/or licensure portability across states. Policymakers are exploring mechanisms such as reciprocity across states to facilitate telebehavioral health care delivery.<sup>34</sup>

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### Prescribing

The U.S. Congress passed the Ryan Haight Online Pharmacy Consumer Protection Act in 2008. The Ryan Haight Act regulates online prescriptions for controlled substances, including through telebehavioral health, requiring a prescriber to have previously assessed a patient in person prior to prescribing a controlled substance.<sup>35</sup>

While the Ryan Haight Act aims to protect patients by restricting access to inappropriate medications, it also has unintentionally served as a barrier to patients gaining access to required medications via telebehavioral health, particularly patients who may not have the ability to travel to a prescriber in person.

Some states have begun to review and refine their remote prescribing laws to improve clinicians' abilities to treat patients remotely.<sup>36</sup> Examples of revisions include allowing remote prescriptions of controlled substances for patients with psychiatric disorders or substance use disorders, and expanding state databases to support prescribers' abilities to identify patients who may be inappropriately seeking the same prescriptions from multiple clinicians.<sup>37</sup>

As your hospital or health system implements and evaluates telebehavioral health, be sure to review state policies to determine whether and to what extent your state legislature allows remote prescribing.

## Workforce Development

There is a shortage of psychiatrists and other behavioral health clinicians across the United States.<sup>38</sup> While technology can increase the reach and accessibility of behavioral health services, it is not a panacea for workforce and staffing challenges. Telebehavioral health still requires a dedicated and knowledgeable workforce behind the technology.

From an operational perspective, centralizing the workforce at a systems level and standardizing processes can remove much of the administrative burden for each hospital or site within a health system. For example, a core team dedicated to licensing and credentialing can build the competencies, expertise and relationships required

to get telebehavioral health services up and running faster and sustain progress.

Longer-term efforts are required to promote and recruit individuals into behavioral health careers. Graduate medical education is an opportunity to develop skills in delivering behavioral health services through technology and prepare the next generation of behavioral health clinicians to meet the growing demand for telebehavioral health services.

At your hospital or health system, consider using telebehavioral health programs as a recruiting and retention tool for top talent. Telebehavioral health offers behavioral health clinicians flexibility and better work-life balance, as they do not need to be restricted to one setting or geographic area.

## A PATH FORWARD

Given the impact of behavioral health disorders in the United States, it is becoming even more critical for hospitals and health systems to focus on expanding access, improving patient outcomes and experience, and redesigning systems of care.

Telebehavioral health care offers hospitals and health systems a viable solution for overcoming historic barriers to access. Telebehavioral health:

- Provides patients with timely and convenient access.
- Increases the capacity of hospitals and health systems to deliver high-quality behavioral health services.

Broad recognition that 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 should encourage the uptake and adoption of telebehavioral health on a national scale.

Using the strategies and tactics outlined in this Guide, your hospital or health system can begin the journey of implementing a sustainable telebehavioral health program or strengthening a program your organization already has in place, moving the field and practice of telebehavioral health even further. Ultimately, this journey will achieve better health, better care, lower cost, and joy at work.

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## APPENDIX A: Participating Experts

### **Jeffrey Buck**

Centers for Medicare & Medicaid Services

### **Flavio Casoy**

JSA California / SOC Telemed

### **David Cohn**

Regroup Therapy

### **Adam Darkins**

AristaMD

### **Christopher Dennis**

Landmark Health / Teladoc Health

### **Seth Feuerstein**

Magellan Healthcare

### **Matthew Goldman**

Substance Abuse and Mental Health Services Administration

### **Ann Griep**

Excellus Blue Cross and Blue Shield

### **Julie Hall-Barrow**

Children's Health System of Texas

### **Michael Hasselberg**

University of Rochester Medical Center

### **Kristi Henderson**

Ascension Healthcare

### **Phil Hirsch**

Forefront TeleCare

### **Judd Hollander**

Thomas Jefferson University

### **Theresa Hyer**

Adventist Health and Rideout

### **Joanna G. Katzman**

Project ECHO

### **Michael R. Lardieri**

Advanced Health Network

### **Natassja Manzanero**

Health Resources and Services Administration

### **Cody Mullen**

Patient & Family Centered Care Partners, Inc

### **Peggy O'Brien**

IBM Watson

### **Jay Ostrowski**

Behavioral Health Innovation and Adaptive Telehealth

### **Andy Penn**

Cerner Corporation

### **Todd Peters**

Sheppard Pratt Health System

### **Carlos Reines**

RubiconMD

### **Bruce Retterath**

Pine Rest Christian Mental Health Services

### **Sylvia Romm**

American Well

### **Jennifer Snow**

National Alliance on Mental Illness

### **Christopher Tavella**

New York Office of Mental Health

### **Ian Tong**

Doctor on Demand

### **Thomas Tsang**

Valera Health

### **Arpan Waghray**

Providence Health and Services

### **Shang Wang**

RubiconMD

## APPENDIX B: Tools and Resources by Success Factor

### Success Factor 1: Leadership Commitment

Resource	Address
American Medical Association Digital Health Implementation Playbook Step 5: Making the Case	<a href="https://www.ama-assn.org/practice-management/digital/digital-health-implementation-playbook-step-5-making-case">https://www.ama-assn.org/practice-management/digital/digital-health-implementation-playbook-step-5-making-case</a>
California Telehealth Resource Center, Sustainability Worksheet to Assist Business Development (Excel)	<a href="http://www.caltrc.org/wp-content/uploads/2018/10/CTRC-sustainability-worksheet-IHC-FQHC-RHC.xlsx">http://www.caltrc.org/wp-content/uploads/2018/10/CTRC-sustainability-worksheet-IHC-FQHC-RHC.xlsx</a>
Proforma Tool to Build a Sample Business Case	<a href="http://integration.samhsa.gov/integrated-care-models/Business_Case_for_Behavioral_Health_Pro_Forma_Model.xlsx">http://integration.samhsa.gov/integrated-care-models/Business_Case_for_Behavioral_Health_Pro_Forma_Model.xlsx</a>
Telebehavioral Health Care: A Solution to Improve Cost, Access, and Quality of Care	<a href="http://www.abhw.org/publications/pdf/ABHWTelehealthWhitePaper.pdf">http://www.abhw.org/publications/pdf/ABHWTelehealthWhitePaper.pdf</a>
American Medical Association Digital Health Implementation Playbook	<a href="https://www.ama-assn.org/system/files/2018-12/digital-health-implementation-playbook.pdf">https://www.ama-assn.org/system/files/2018-12/digital-health-implementation-playbook.pdf</a>
APA and ATA Best Practices in Videoconferencing-Based Telemental Health April 2018.	<a href="https://www.liebertpub.com/doi/full/10.1089/tmj.2018.0237">https://www.liebertpub.com/doi/full/10.1089/tmj.2018.0237</a>
California Telehealth Resource Center, Telehealth Program Developer Kit	<a href="https://www.telehealthresourcecenter.org/wp-content/uploads/2018/09/Complete-Program-Developer-Kit-2014.pdf">https://www.telehealthresourcecenter.org/wp-content/uploads/2018/09/Complete-Program-Developer-Kit-2014.pdf</a>
California Telehealth Resource Center, Best Practices	<a href="http://www.caltrc.org/knowledge-center/best-practices/">http://www.caltrc.org/knowledge-center/best-practices/</a>
Conducting a Telehealth Needs Assessment	<a href="https://link.springer.com/chapter/10.1007/978-3-319-08765-8_2">https://link.springer.com/chapter/10.1007/978-3-319-08765-8_2</a>
Indian Health Service Telebehavioral Health Center of Excellence Step-By-Step Guide for Setting Up Telebehavioral Health Services	<a href="https://www.ihs.gov/telebehavioral/includes/themes/responsive2017/display_objects/documents/tbhcetoolkit2018.pdf">https://www.ihs.gov/telebehavioral/includes/themes/responsive2017/display_objects/documents/tbhcetoolkit2018.pdf</a>
SAMHSA-HRSA Center Telebehavioral Health Training and Technical Assistance Series	<a href="https://www.integration.samhsa.gov/operations-administration/telebehavioral-health">https://www.integration.samhsa.gov/operations-administration/telebehavioral-health</a>
Telehealth Needs and Organizational Readiness Guide	<a href="http://www.caltrc.org/knowledge-center/ctrc-publications/program-guides/organizational-readiness-guide/">http://www.caltrc.org/knowledge-center/ctrc-publications/program-guides/organizational-readiness-guide/</a>
Telligen and gpTRAC Telehealth Start-Up and Resource Guide	<a href="https://www.ruralcenter.org/resource-library/telehealth-start-up-and-resource-guide">https://www.ruralcenter.org/resource-library/telehealth-start-up-and-resource-guide</a>
Exploring the Business Case for Children's Telebehavioral Health	<a href="https://www.scribd.com/document/288520754/Exploring-the-Business-Case-for-Children-s-Telebehavioral-Health">https://www.scribd.com/document/288520754/Exploring-the-Business-Case-for-Children-s-Telebehavioral-Health</a>
Milliman American Psychiatric Association Report, Economic Impact of Integrated Medical-Behavioral Health Care	<a href="https://www.psychiatry.org/File%20Library/Psychiatrists/Practice/Professional-Topics/Integrated-Care/Milliman-Report-Economic-Impact-Integrated-Implications-Psychiatry.pdf">https://www.psychiatry.org/File Library/Psychiatrists/Practice/Professional-Topics/Integrated-Care/Milliman-Report-Economic-Impact-Integrated-Implications-Psychiatry.pdf</a>
Telebehavioral Health: The ROI for Long-Term Care	<a href="https://www.hfma.org/Content.aspx?id=59161">https://www.hfma.org/Content.aspx?id=59161</a>
Telemental Health Care, an Effective Alternative to Conventional Mental Care: a Systematic Review	<a href="https://www.ejmanager.com/mnstemps/6/6-1511433290.pdf?t=1542376537">https://www.ejmanager.com/mnstemps/6/6-1511433290.pdf?t=1542376537</a>
AHA Fact Sheet: Telehealth	<a href="https://www.aha.org/system/files/2018-01/fs-telehealth.pdf">https://www.aha.org/system/files/2018-01/fs-telehealth.pdf</a>

Resource	Address
AHA Issue Brief on Telehealth: Helping Hospitals Deliver Cost-Effective Care	<a href="https://www.aha.org/system/files/content/16/16telehealthissuebrief.pdf">https://www.aha.org/system/files/content/16/16telehealthissuebrief.pdf</a>
AHA TrendWatch: Bringing Behavioral Health into the Care Continuum	<a href="https://www.aha.org/system/files/research/reports/tw/12jan-tw-behavhealth.pdf">https://www.aha.org/system/files/research/reports/tw/12jan-tw-behavhealth.pdf</a>
AHA TrendWatch: Realizing the Promise of Telehealth - Understanding the Legal and Regulatory Challenges	<a href="https://www.aha.org/system/files/research/reports/tw/15may-tw-telehealth.pdf">https://www.aha.org/system/files/research/reports/tw/15may-tw-telehealth.pdf</a>
Center for Connected Health Policy Tools	<a href="https://www.cchpca.org/">https://www.cchpca.org/</a>
CMS Rules for Telehealth Services	<a href="https://www.integration.samhsa.gov/operations-administration/CMS_New_Rules_Expand_Telehealth_coverage_July_2013-16547_PI.pdf">https://www.integration.samhsa.gov/operations-administration/CMS_New_Rules_Expand_Telehealth_coverage_July_2013-16547_PI.pdf</a>
Improving Behavioral Health Access & Integration Using Telehealth & Teleconsultation: A Health Care System for the 21st Century	<a href="https://nashp.org/wp-content/uploads/2015/11/Telemedicine1.pdf">https://nashp.org/wp-content/uploads/2015/11/Telemedicine1.pdf</a>
Health Resources and Services Administration (HRSA) Telehealth Compendium	<a href="https://www.telehealthresourcecenter.org/wp-content/uploads/2018/07/HRSA-Telehealth-Compendium_March2018_v4.pdf">https://www.telehealthresourcecenter.org/wp-content/uploads/2018/07/HRSA-Telehealth-Compendium_March2018_v4.pdf</a>
Regional Telehealth Resource Centers	<a href="https://www.telehealthresourcecenter.org/">https://www.telehealthresourcecenter.org/</a>

## Success Factor 2: Organizational Policies and Clinical Workflows

Resource	Address
American Health Information Management Association Telemedicine Toolkit	<a href="https://healthsectorcouncil.org/wp-content/uploads/2018/08/AHIMA-Telemedicine-Toolkit.pdf">https://healthsectorcouncil.org/wp-content/uploads/2018/08/AHIMA-Telemedicine-Toolkit.pdf</a>
California Telehealth Resource Center Webinar: Mapping and Designing Telehealth Clinic Workflows	<a href="http://www.caltrc.org/upcoming-webinar-mapping-and-designing-telehealth-clinic-workflows/">http://www.caltrc.org/upcoming-webinar-mapping-and-designing-telehealth-clinic-workflows/</a>
Center for Connected Health Policy HIPAA and Telehealth	<a href="https://www.cchpca.org/sites/default/files/2018-09/HIPAAandTelehealth.pdf">https://www.cchpca.org/sites/default/files/2018-09/HIPAAandTelehealth.pdf</a>
Health Resources & Services Administration Medicare Telehealth Payment Eligibility Analyzer	<a href="https://data.hrsa.gov/tools/medicare/telehealth">https://data.hrsa.gov/tools/medicare/telehealth</a>
Legal, Regulatory, and Risk Management Issues in the Use of Technology to Deliver Mental Health Care	<a href="https://www.sciencedirect.com/science/article/pii/S1077722914000807">https://www.sciencedirect.com/science/article/pii/S1077722914000807</a>
Preparing for the Telehealth World: Navigating Legal, Regulatory, Reimbursement, and Ethical Issues in an Electronic Age	<a href="http://psycnet.apa.org/record/2011-28096-001">http://psycnet.apa.org/record/2011-28096-001</a>
SAMHSA Consent2Share Application	<a href="https://bhits.github.io/consent2share/">https://bhits.github.io/consent2share/</a>
Telebehavioral Health Institute HIPAA Risk Assessment Template	<a href="https://telehealth.org/blog/hipaa-risk-assessment-template/">https://telehealth.org/blog/hipaa-risk-assessment-template/</a>
Telehealth Resource Centers HIPAA & Telehealth, A Stepwise Guide to Compliance	<a href="https://cdn.zephyrcms.com/38b774e3-2cb5-4629-84cdfcd39fd908e/-/inline/yes/hipaa-project-version-1.1forPrinting.pdf">https://cdn.zephyrcms.com/38b774e3-2cb5-4629-84cdfcd39fd908e/-/inline/yes/hipaa-project-version-1.1forPrinting.pdf</a>
CMS Memorandum on Streamlined Credentialing & Privileging for Telemedicine Physicians & Practitioners	<a href="https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/downloads/SCLetter11_32.pdf">https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/downloads/SCLetter11_32.pdf</a>
Joint Commission, Final Telemedicine Revisions	<a href="https://www.jointcommission.org/assets/1/6/Revisions_telemedicine_standards.pdf">https://www.jointcommission.org/assets/1/6/Revisions_telemedicine_standards.pdf</a>
Interstate Medical Licensure Compact (Physicians)	<a href="https://imlcc.org/">https://imlcc.org/</a>

Resource	Address
Nurse Licensure Compact	<a href="https://www.ncsbn.org/compacts.htm">https://www.ncsbn.org/compacts.htm</a>
Physical Therapy Compact	<a href="http://ptcompact.org/ptc-states">http://ptcompact.org/ptc-states</a>
Psychology Interjurisdictional Compact (PSYPACT)	<a href="https://www.asppb.net/mpage/micrositehp">https://www.asppb.net/mpage/micrositehp</a>
Recognition of EMS Personnel Licensure Interstate CompAct (REPLICA)	<a href="http://www.emsreplica.org/">http://www.emsreplica.org/</a>
Sample Crisis Protocol for Telebehavioral Health Services	<a href="https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4079762/#APP1">https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4079762/#APP1</a>
Sample Privileging and Credentialing Agreement	<a href="http://www.caltrc.org/wp-content/uploads/2014/04/SAMPLE-PRIVILEGING-AND-CREDENTIALING-AGREEMENT.pdf">http://www.caltrc.org/wp-content/uploads/2014/04/SAMPLE-PRIVILEGING-AND-CREDENTIALING-AGREEMENT.pdf</a>
Telemental Health Toolkit, Chapter 2: Policy and Protocol	<a href="https://vimeo.com/115672434">https://vimeo.com/115672434</a>
California Telehealth Resource Center Telehealth Technology Toolkit (see PDF page 125)	<a href="https://www.nrtrc.org/content/article-files/BusinessPlans/2012ProgramDeveloperKit-Part2.pdf">https://www.nrtrc.org/content/article-files/BusinessPlans/2012ProgramDeveloperKit-Part2.pdf</a>
A Guide for Telemedicine Service Vendor Contracting: Applying Traditional Contracting Considerations in a New Arena	<a href="https://www.bakerdonelson.com/a-guide-for-telemedicine-service-vendor-contracting-applying-traditional-contracting-considerations-in-a-new-arena">https://www.bakerdonelson.com/a-guide-for-telemedicine-service-vendor-contracting-applying-traditional-contracting-considerations-in-a-new-arena</a>
Telemental Health Comparisons	<a href="https://telementalhealthcomparisons.com/">https://telementalhealthcomparisons.com/</a>
AHA Behavioral Health - Combating Stigma	<a href="https://www.aha.org/2017-12-11-behavioral-health-combating-stigma">https://www.aha.org/2017-12-11-behavioral-health-combating-stigma</a>
CEOs Against Stigma	<a href="http://ceos.namimass.org/">http://ceos.namimass.org/</a>
NAMI) In Our Own Voice Program	<a href="https://www.nami.org/find-support/nami-programs/nami-in-our-own-voice">https://www.nami.org/find-support/nami-programs/nami-in-our-own-voice</a>
NAMI StigmaFree Program	<a href="https://www.nami.org/stigmfree">https://www.nami.org/stigmfree</a>

### Success Factor 3: Staff Education and Training

Resource	Address
American Academy of Child and Adolescent Psychiatry Practice Parameter for Telepsychiatry with Children and Adolescents	<a href="http://www.jaacap.com/article/S0890-8567(08)60154-9/pdf">http://www.jaacap.com/article/S0890-8567(08)60154-9/pdf</a>
American Telemedicine Association (ATA) Practice Guidelines for Telemental Health with Children and Adolescents	<a href="https://www.liebertpub.com/doi/abs/10.1089/tmj.2017.0177?rfr_dat=cr_pub%3Dpubmed&amp;url_ver=Z39.88-2003&amp;rfr_id=ori%3Arid%3Acrossref.org&amp;journalCode=tmj">https://www.liebertpub.com/doi/abs/10.1089/tmj.2017.0177?rfr_dat=cr_pub%3Dpubmed&amp;url_ver=Z39.88-2003&amp;rfr_id=ori%3Arid%3Acrossref.org&amp;journalCode=tmj</a>
ATA Practice Guidelines For Video-Based Online Mental Health Services	<a href="https://www.integration.samhsa.gov/operations-administration/practice-guidelines-for-video-based-online-mental-health-services_ATA_5_29_13.pdf">https://www.integration.samhsa.gov/operations-administration/practice-guidelines-for-video-based-online-mental-health-services_ATA_5_29_13.pdf</a>
A Framework of Interprofessional Telebehavioral Health Competencies: Implementation and Challenges Moving Forward	<a href="https://www.ncbi.nlm.nih.gov/pubmed/30284147">https://www.ncbi.nlm.nih.gov/pubmed/30284147</a>
The Need to Implement and Evaluate Telehealth Competency Framework to Ensure Quality Care across Behavioral Health Professions	<a href="https://www.ehdc.org/sites/default/files/resources/files/EvaluatingTelehealthCompetencyFrameworks.pdf">https://www.ehdc.org/sites/default/files/resources/files/EvaluatingTelehealthCompetencyFrameworks.pdf</a>
American Psychiatric Association (APA) Clinical Practice	<a href="https://www.psychiatry.org/psychiatrists/practice/clinical-practice-guidelines">https://www.psychiatry.org/psychiatrists/practice/clinical-practice-guidelines</a>

Resource	Address
APA and ATA Best Practices in Videoconferencing-Based Telemental Health April 2018	<a href="https://www.liebertpub.com/doi/full/10.1089/tmj.2018.0237">https://www.liebertpub.com/doi/full/10.1089/tmj.2018.0237</a>
Best Practices for Remote Psychological Assessment via Telehealth Technologies	<a href="http://www.davidluxton.com/publications/Luxton_Pruitt_Osenbach_2014_PRRP.pdf">http://www.davidluxton.com/publications/Luxton Pruitt Osenbach 2014 PRRP.pdf</a>
SAMHSA Treatment Improvement Protocol: Using Technology-Based Therapeutic Tools in Behavioral Health Services	<a href="https://store.samhsa.gov/system/files/sma15-4924.pdf">https://store.samhsa.gov/system/files/sma15-4924.pdf</a>
Transcultural Psychiatry Made Simple: Asynchronous Telepsychiatry as an Approach to Providing Culturally Relevant Care	<a href="https://www.ncbi.nlm.nih.gov/pubmed/23451812">https://www.ncbi.nlm.nih.gov/pubmed/23451812</a>
American Hospital Association's Team Training Program: Team Strategies and Tools to Enhance Performance and Patient Safety (TeamSTEPPS®)	<a href="https://www.aha.org/center/performance-improvement/team-training">https://www.aha.org/center/performance-improvement/team-training</a>
ATA Accredited Telemedicine Training Programs	<a href="http://www.americantelemed.org/main/ata-accreditation/training-programs">http://www.americantelemed.org/main/ata-accreditation/training-programs</a>
A Comparison of Telemental Health Terminology used Across Mental Health State Licensure Boards	<a href="http://tpcjournal.nbcc.org/wp-content/uploads/2016/11/Pages387-396-OstrowskiCollins-TelementalHealth.pdf">http://tpcjournal.nbcc.org/wp-content/uploads/2016/11/Pages387-396-OstrowskiCollins-TelementalHealth.pdf</a>
Telebehavioral Health Institute Informed Consent Library	<a href="https://www.naadac.org/assets/2416/marlene_maheu_ac17ho2.pdf">https://www.naadac.org/assets/2416/marlene_maheu_ac17ho2.pdf</a>

## Success Factor 4: Patient, Family and Caregiver Engagement

Resource	Address
NAMI Family-to-Family Program	<a href="https://www.nami.org/Find-Support/NAMI-Programs/NAMI-Family-to-Family">https://www.nami.org/Find-Support/NAMI-Programs/NAMI-Family-to-Family</a>
NAMI Homefront Program for Family, Caregivers, and Friends of Service Members and Veterans	<a href="https://www.nami.org/Find-Support/NAMI-Programs/NAMI-Homefront">https://www.nami.org/Find-Support/NAMI-Programs/NAMI-Homefront</a>
AHRQ Engaging Patients and Families in Their Health Care	<a href="https://www.ahrq.gov/professionals/quality-patient-safety/patient-family-engagement/index.html">https://www.ahrq.gov/professionals/quality-patient-safety/patient-family-engagement/index.html</a>
Health Research & Educational Trust (HRET) Patient and Family Engagement Resource Compendium	<a href="http://www.hret-hiin.org/Resources/pfe/16/patient-and-family-engagement-pfe-resource-compendium.pdf">http://www.hret-hiin.org/Resources/pfe/16/patient-and-family-engagement-pfe-resource-compendium.pdf</a>
NAMI Provider Education	<a href="https://www.nami.org/Find-Support/NAMI-Programs/NAMI-Provider-Education">https://www.nami.org/Find-Support/NAMI-Programs/NAMI-Provider-Education</a>
National Quality Partners Playbook™: Shared Decision Making in Healthcare	<a href="https://store.qualityforum.org/products/national-quality-partners-playbook%E2%84%A2-shared-decision-making">https://store.qualityforum.org/products/national-quality-partners-playbook%E2%84%A2-shared-decision-making</a>
SAMHSA Shared Decision Making in Mental Health	<a href="http://brss-tacs-decision-tool.samhsa.gov/">http://brss-tacs-decision-tool.samhsa.gov/</a>
Telehealth and Patient Satisfaction: A Systematic Review and Narrative Analysis	<a href="https://bmjopen.bmj.com/content/7/8/e016242">https://bmjopen.bmj.com/content/7/8/e016242</a>
Telemental Health Toolkit, Chapter 4: Engaging the Client on Video	<a href="https://vimeo.com/115713828">https://vimeo.com/115713828</a>
Telemental Health Toolkit, Chapter 5: Cognitive/Interpersonal Approaches	<a href="https://vimeo.com/115717945">https://vimeo.com/115717945</a>
Telemental Health Toolkit, Chapter 7: Family and Group Therapy	<a href="https://vimeo.com/115726492">https://vimeo.com/115726492</a>

## Success Factor 5: Measurement

Resource	Address
2019 Core Set of Behavioral Health Measures for Medicaid and CHIP	<a href="https://www.medicaid.gov/medicaid/quality-of-care/downloads/performance-measurement/2019-bh-core-set.pdf">https://www.medicaid.gov/medicaid/quality-of-care/downloads/performance-measurement/2019-bh-core-set.pdf</a>
Measures Required for Certified Community Behavioral Health Clinic (CCBHC) Demonstration Program	<a href="https://www.samhsa.gov/section-223/quality-measures">https://www.samhsa.gov/section-223/quality-measures</a>
NQF Behavioral Health and Substance Use Standing Committee Reports	<a href="https://www.qualityforum.org/Publications/2018/07/Behavioral_Health_and_Substance_Use_Fall_2017_Final_Report.aspx">https://www.qualityforum.org/Publications/2018/07/Behavioral_Health_and_Substance_Use_Fall_2017_Final_Report.aspx</a>
Pragmatic Characteristics of Patient-Reported Outcome Measures Are Important for Use in Clinical Practice	<a href="https://www.sciencedirect.com/science/article/pii/S0895435615001730">https://www.sciencedirect.com/science/article/pii/S0895435615001730</a>
Ensuring Clinical Quality in Telemedicine	<a href="https://catalyst.nejm.org/clinical-quality-telemedicine-online-care/">https://catalyst.nejm.org/clinical-quality-telemedicine-online-care/</a>
A Lexicon of Assessment and Outcome Measures for Telemental Health	<a href="https://www.liebertpub.com/doi/abs/10.1089/tmj.2013.0357">https://www.liebertpub.com/doi/abs/10.1089/tmj.2013.0357</a>
Medical Technology in the Value-Based Environment: An Assessment of Quality Measure Gaps	<a href="https://www.advamed.org/sites/default/files/resource/medical_technology_in_the_value_based_environment_-_assessment_of_quality_measure_gaps.pdf">https://www.advamed.org/sites/default/files/resource/medical_technology_in_the_value_based_environment_-_assessment_of_quality_measure_gaps.pdf</a>
NQF Telehealth Measurement Framework	<a href="http://www.qualityforum.org/Publications/2017/08/Creating_a_Framework_to_Support_Measure_Development_for_Telehealth.aspx">http://www.qualityforum.org/Publications/2017/08/Creating_a_Framework_to_Support_Measure_Development_for_Telehealth.aspx</a>

## Success Factor 6: Community Partnerships

Resource	Address
Association for Community Health Improvement Community Health Assessment Toolkit	<a href="http://www.healthycommunities.org/Resources/toolkit.shtml">http://www.healthycommunities.org/Resources/toolkit.shtml</a>
Centers for Disease Control and Prevention Community Health Improvement Navigator	<a href="https://www.cdc.gov/chinav/index.html">https://www.cdc.gov/chinav/index.html</a>
Health Research & Educational Trust Engaging Patients and Communities in the Community Health Needs Assessment Process	<a href="https://www.aha.org/ahahret-guides/2016-06-09-engaging-patients-and-communities-community-health-needs-assessment">https://www.aha.org/ahahret-guides/2016-06-09-engaging-patients-and-communities-community-health-needs-assessment</a>
National Consumer Supporter Technical Assistance Center's Community Community Needs Assessment Tool	<a href="http://www.mha-sc.org/resources/Community-Needs-Assessment.pdf">http://www.mha-sc.org/resources/Community-Needs-Assessment.pdf</a>
SAMHSA How States Can Conduct a Needs Assessment	<a href="https://www.samhsa.gov/section-223/certification-resource-guides/conduct-needs-assessment">https://www.samhsa.gov/section-223/certification-resource-guides/conduct-needs-assessment</a>
A Playbook for Fostering Hospital-Community Partnerships to Build a Culture of Health	<a href="https://www.aha.org/ahahret-guides/2017-07-27-playbook-fostering-hospital-community-partnerships-build-culture-health">https://www.aha.org/ahahret-guides/2017-07-27-playbook-fostering-hospital-community-partnerships-build-culture-health</a>
AHA Ensuring Access to Vulnerable Communities, Community Conversation Toolkit	<a href="https://www.aha.org/toolkitsmethodology/2017-07-27-community-conversations-toolkit">https://www.aha.org/toolkitsmethodology/2017-07-27-community-conversations-toolkit</a>
Increasing Access to Behavioral Health Care Through Technology	<a href="https://www.hrsa.gov/sites/default/files/publichealth/guidelines/BehavioralHealth/behavioralhealthcareaccess.pdf">https://www.hrsa.gov/sites/default/files/publichealth/guidelines/BehavioralHealth/behavioralhealthcareaccess.pdf</a>
Certified Community Behavioral Health Clinics (CCBHCs)	<a href="https://www.thenationalcouncil.org/topics/certified-community-behavioral-health-clinics/">https://www.thenationalcouncil.org/topics/certified-community-behavioral-health-clinics/</a>
Community Access resources and services	<a href="http://www.communityaccess.org/our-story/about">http://www.communityaccess.org/our-story/about</a>
Behavioral Health Treatment Services Locator	<a href="https://findtreatment.samhsa.gov/">https://findtreatment.samhsa.gov/</a>
Memorandums of Understanding (MOU) and Medical Center Memorandums (MCM) for Telemental Health Clinics and Traditional Healers/Healing Services	<a href="https://www.ruralhealth.va.gov/docs/MOUs-and-MCMs-for-telemental-clinics.pdf">https://www.ruralhealth.va.gov/docs/MOUs-and-MCMs-for-telemental-clinics.pdf</a>
Sample Memorandum of Understanding for Telemedicine Services and Equipment	<a href="https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4079762/#APP1">https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4079762/#APP1</a>

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