

REGION II
Behavioral Health Board

Subcommittee: Telehealth

Date/Time of Meeting: December 13, 2018 10:00a.m. to 11:00AM

Location of Meeting: DHW Lewiston State Office Bld. 2nd Floor Conference Rm 208-799-4478
website: www.riibhb.idahopublichealth.com

Attendees:

	Deborah Lind, Chair	X	Sara Bennett			
	Beverly Fowler					
	Dean Allen	X				
	Melanie Scott	X				

Agenda	Meeting Minutes Discussion/Outcomes
Meeting Called to Order, Roll Call:	Called to order at 10:10 AM. Those present were Deborah Lind, Dean Allen and Melanie Scott
Approval of last meeting minutes (Action Item)	Motion to approve minutes made by: Dean Allen Second by: Melanie Scott Minutes approved
Topics to Discuss: 1. Identified Past accomplishments and ongoing needs to present to the BH Board and Legislators: (Action item) 2. Telehealth therapy with independently licensed Optum clinicians-update from Karen Kopf	<p>1. Telehealth subcommittee goal: Advocate for the increased use of Telebehavioral Health in Region 2.</p> <p>Accomplishments:</p> <ol style="list-style-type: none"> 1. Identified gaps/barriers to the use of Telehealth in Region 2 2. Encouraged Optum to develop a billing method for independently licensed Optum Clinicians to provide Telebehavioral Health Therapy. 3. Identified two primary Telehealth entities available to train practitioners: <ul style="list-style-type: none"> • Person Centered Tech info@personcenteredtec.com • TeleBehavior Health Institute, Inc. mmahea@telehealth.org <p>Need: Identify supports needed by our communities to address the impact and changing dynamics created by an increased use of Telehealth to provide behavioral health services not only for individual therapies but group work as well requiring the delivery of services from secure sights.</p> <p>Motion to approve Telehealth subcommittee past accomplishments and ongoing needs made by Dean Allen, seconded by Melanie Scott and motion approved.</p> <p>2. Karen Kopf, Optum Idaho Regional Network Manager sent information to the Telehealth Subcommittee on 21/4/18 stating, "While telehealth therapy provided by independently licensed clinicians is a service allowed under Optum, to date the providers in</p>

REGION II
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our area have not yet enrolled. I am happy to help any providers that wish to enroll”.

Deborah Lind, LCPC, asked if folks from Region 2 can access enrolled providers from other regions.

Karen replied, “Yes, clients can seek services with any provider in network, licensed in Idaho, for telehealth services.” Karen shared that Optum’s free platform is found on www.ProviderExpress.com However, Karen added this platform was designed for their commercial networks and asks for a credit card on file for copays. “Since Medicaid has no copay-the card would not be charged-but the request may be a barrier”. Karen clarified, “Providers may select any platform that meets the requirements described in Provider Express.” Optum does not recommend platforms to providers.

3. Dean had no information to add regarding IMHCA training partnership with Person Centered Tech.

4. Discussed the availability of prescription based digital therapeutics for providers to prescribe to their clients as adjunct treatments, which could play a role in future treatment models.

5. Discussed how this teletherapy is a recognized form of practice by the state Occupational, Physical and Speech Therapy Boards, and EMC claim that this program is backed by peer reviewed, evidence based research showing the benefits of teletherapy services.

6. Discussed our next quarterly meeting would be scheduled for the second Thursday of March.

7. Briefly shared and discussed new resources and information encouraging subcommittee members to do their own research and share with the group. Especially noteworthy was the discussion about Telehealth’s effectiveness as compared to in person visits being as good and often better because care is received sooner. Discussed how the use of Telebehavioral Health could be used to meet the needs of our Frontier Region. Also, talked about Telebehavioral Health’s potential role in addressing our problems with the workforce shortage.

3. Person Centered Tech and IMHCA training partnership-Dean Allen update

4. Pear Therapeutics’ reSET mHealth platform is the first digital therapeutic treatment for substance abuse disorder to receive FDA approval for providers to prescribe to their patients. This is a 12week, 90-day, treatment plan featuring interactive treatment modules that deliver cognitive behavioral therapy and fluency training to reinforce proficiency.

5. Services for preschool and school age children in Idaho: Enable My Child (EMC), teletherapy company that provides direct occupational, physical and speech therapies for children now accepting Idaho Medicaid.

6. Next meeting schedule

7. Any new business

**www.psychu.org newsletter
Technology notable perspectives & news on telehealth**

VA finalizes Telehealth rule allowing health care professionals to practice across state lines. Veterans E-Health and Telemedicine Support Act of 2017-PsychU

First Telehealth -Now Virtual Health

REGION II

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PsuchU

**Tech-enabled therapy services
Virtual online provider networks
Asynchronous "Store & forward"**

diagnostic services

Automated programs, eCBT, mindfulness

apps

Augmented intelligence, automated

therapies

**Clinically superior, on site face to face Vs
tech-enabled therapy models for which
conditions or situations**

**Is 2019 the year of the telehealth
tipping point? PsychU**

**Greater adoption of telehealth by
health plans**

Changes in policy from CMS

**Expansion of telehealth services at the
US Department of Veterans Affairs**

**Department of Defense released
updates to Tricare coverage, requiring
telehealth to be covered in the same way it
covers in-person visits.**

**New data on the effectiveness of
telehealth-evaluations, virtual education,
faster appointments, decrease missed
appointments, reduce hospitalizations,
reduction in services, effectiveness is as good
as in person & often better-get care sooner.**

**Yes, there are organizations using
augmented intelligence-PsychU**

Predictive modeling & diagnostics, errors

**Precision medicine & care coordination-
alerts, suggested actions, patient progress,
predict & prevent risk, manage workload**

To serve complex consumers

**Assist in staff decision making -hospital
operations**

**Population health management & identify
risk reduction opportunities**

Improve outcomes & increase efficiencies

**American Telemedicine Association (ATA)
have developed and released best practices
and guidelines.**

REGION II
Behavioral Health Board

Next Meeting:	Date/Time: Thursday 3/14/19 10:00AM DHW 2nd Fl. Confer Rm_ _____
Meeting Adjourned:	Time Meeting Adjourned: 11:20AM _____