genOa healthcare | TELEPSYCHIATRY

Increasing Access to Mental Health Care in Underserved Communities
Recently Published Study Shows Improved Patient Outcomes

WHITEPAPER

TELEPSYCHIATRY: Patient Outcomes

EXECUTIVE SUMMARY

THE PROBLEM:

The need for mental health care is at an all-time high, yet the U.S. is facing a shortage of psychiatrists. Some patients must wait weeks or even months to get an appointment.

- 65% of rural communities lack direct access to behavioral healthcare
- 6.5 million people in need of mental healthcare don't have access to psychiatrists
- Among the 11.2 million adults with SMI, only 66.7% receive the mental health treatment they need
- 77% of Americans live in Mental Health Professional Shortage Areas

THE SOLUTION:

Telepsychiatry, which virtually connects patients to psychiatric providers, can significantly improve access to behavioral healthcare in underserved communities.

THE RESULTS:

Robust evidence, including a study recently published by Genoa Healthcare, shows that telepsychiatry can lead to improved patient outcomes including improved timeliness of care and follow-up visits. The peer-reviewed study shows that patients with telepsychiatry paired with in-person visits were:

- 34% more likely to be seen 1x/month
- Seen by a psychiatric provider 7 days faster

WHY THESE RESULTS MATTER:

Research suggests that follow-up care for people with mental illness is linked to fewer Emergency Department visits, improving patient outcomes in the long-run.

TELEPSYCHIATRY: Patient Outcomes

PART 1: SMI & ACCESS TO CARE

ACCESS TO CARE FOR UNDERSERVED POPULATIONS

Gaps in Behavioral Health Care for Underserved & Rural Communities

The need for mental health care is at an all-time high, yet the U.S. is facing a shortage of psychiatrists, especially in rural and underserved communities. Some patients must wait weeks or even months to get an appointment, or travel hundreds of miles to see a provider.

This delay in treatment can have dire consequences, especially for those patients living with Serious Mental Illness (SMI), which is defined as a mental, behavioral, or emotional disorder (excluding developmental and substance use disorders) resulting in impairment, which substantially interferes with or limits one or two more major life activities.[1]

The shortage of resources for mental health providers is especially acute for patients in rural & underserved communities:

65%
of rural communities
Lack direct access to behavioral healthcare

25%
of Americans
Experience a mental health illness each year

77%
live in
Severe behavioral health provider shortage areas

6.5
million
People in need of mental healthcare don't have access to psychiatrists

TELEPSYCHIATRY: Patient Outcomes

Why Patient Outcomes Suffer

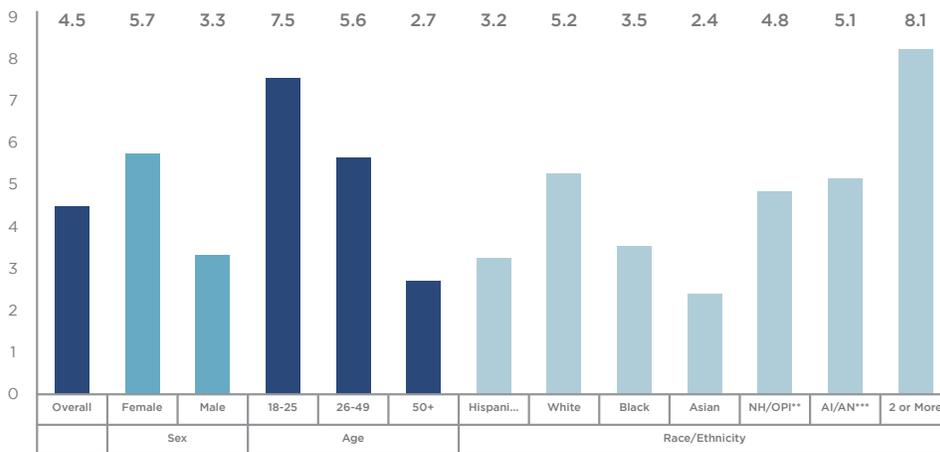### Unique Challenges Faced by SMI Population

For patients living with Serious Mental Illness (SMI), there is a wider gap in access to care. In 2017, among the 11.2 million adults with SMI, only 66.7% received the mental health treatment they needed.[2]

66.7%
of adults
with SMI received treatment in 2017
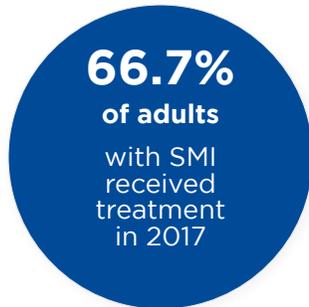
SMI patients require a higher touch model of care that utilizes case management and social work, with workflows built for care coordination centered around fluid information exchange and responsive, dedicated provider teams.

Past Year Prevalence of Serious Mental Illness Among U.S. Adults (2017)
Data Courtesy of SAMHSA

	Overall	Female	Male	18-25	26-49	50+	Hispani...	White	Black	Asian	NH/OPI**	AI/AN***	2 or More
	4.5	5.7	3.3	7.5	5.6	2.7	3.2	5.2	3.5	2.4	4.8	5.1	8.1
		Sex			Age					Race/Ethnicity			

* All other groups are non-Hispanic or Latino
** NH/OPI Native Hawaiian / Other Pacific Islander
*** AI/AN = American Indian / Alaskan Native

The importance of follow-up visits for people with mental illness:

Research suggests that follow-up care for people with mental illness is linked to fewer repeat Emergency Department visits, improved physical and mental function and increased compliance with follow-up instructions.[3] New models of care, such as integrated outpatient telepsychiatry, are critical in ensuring this patient population receives effective continuity of care.

TELEPSYCHIATRY: Patient Outcomes

TELEPSYCHIATRY

What is it?

Telepsychiatry, a branch of telemedicine that allows a remote psychiatric provider to see patients virtually over video, can significantly improve access to behavioral health care in underserved communities.

Robust evidence, including a study recently published by Genoa Healthcare (page 8), shows that **telepsychiatry can lead to improved outcomes and higher patient satisfaction ratings.**

> **"Telemedicine in psychiatry, using video conferencing, is a validated and effective practice of medicine that increases access to care. The American Psychiatric Association supports the use of telemedicine as a legitimate component of a mental health delivery system to the extent that its use is for the benefit of the patient, protects patient autonomy, confidentiality, and privacy..."**
>
> American Psychiatric Association, 2018

Robust evidence shows that telepsychiatry can lead to improved outcomes and higher patient satisfaction ratings. Providers, payers and policy makers are increasingly considering ways to implement the user of telepsychiatry.

TELEPSYCHIATRY: Patient Outcomes

PART 3: TELEPSYCHIATRY IMPROVES PATIENT OUTCOMES

HOW TELEPSYCHIATRY IS CLOSING THE GAP

Genoa Healthcare's New Peer-Reviewed Study Shows Telepsychiatry Improves Access to Behavioral Health Care

A study co-authored by Genoa Healthcare, recently published in the American Psychological Association's Journal of Rural Mental Health, found that patients with hybrid telepsychiatry plus in-person visits had improved timeliness of care and increased number of total outpatient encounters.

Key findings include:

Patients seen
7 days faster

34%
more likely to be seen 1x/month

- The study analyzed data from 242 Medicaid patients ages 18-64 in community mental health centers in Missouri

- Two groups were studied: 1) patients being treated with a hybrid of in-person outpatient visits and telepsychiatry visits and 2) a control group with only in-person visits

- The patients were seen after a hospitalization or an ED visit for SMI care or substance use[4]

TELEPSYCHIATRY: Patient Outcomes

MISSOURI'S MENTAL HEALTH CARE LANDSCAPE

Why study these patients?

- In Missouri, approx. 19% of adults have a mental illness
- Only 43.5% of adults with mental illness receive treatment due to the state's shortage of providers
- In Missouri, the suicide rate in rural areas rose twice as quickly as in urban areas from the year 2001 to 2011
- 98 of Missouri's 101 an underserved counties are designated by the HRSA as mental health professional shortage areas (MHPSAs)[2]

Health Professional Shortage Areas: Mental Health, by County, 2017 - Missouri

| None of county is shortage area | Part of county is shortage area | Whole county is shortage area |
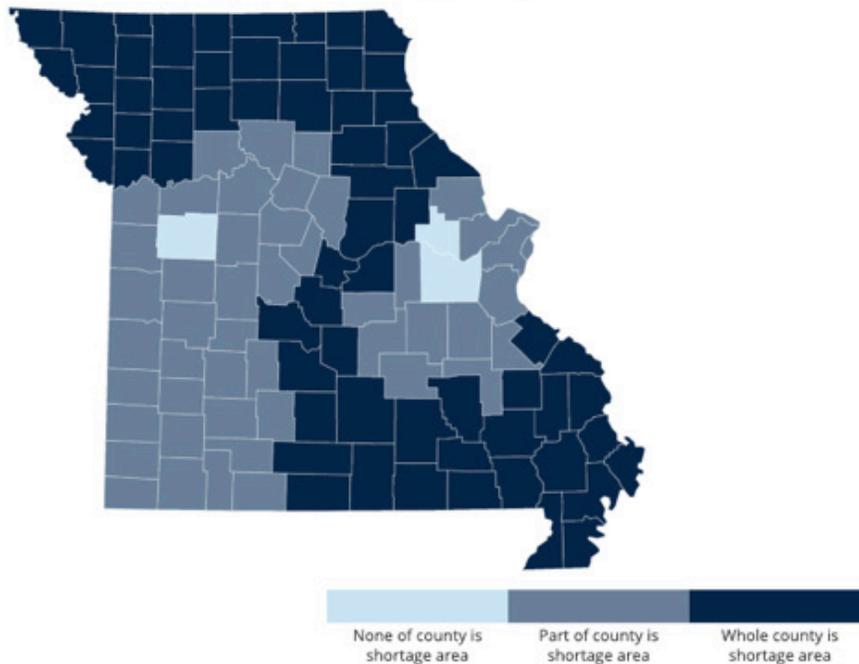
Source: data.HRSA.gov, 2017.

CONCLUSION

The study, Increasing Access to Rural Mental Health Care Using Hybrid Care That Includes Telepsychiatry, shows that hybrid care delivered in a rural area strengthens a patient's willingness and ability to engage in outpatient care. The findings indicate that hybrid care of telepsychiatry and traditional in-person care is more effective than in-person visits alone, further demonstrating that telepsychiatry is a powerful tool for improving patient outcomes.

TELEPSYCHIATRY: Patient Outcomes

PART 4: GENOA HEALTHCARE'S APPROACH TO TELEPSYCHIATRY
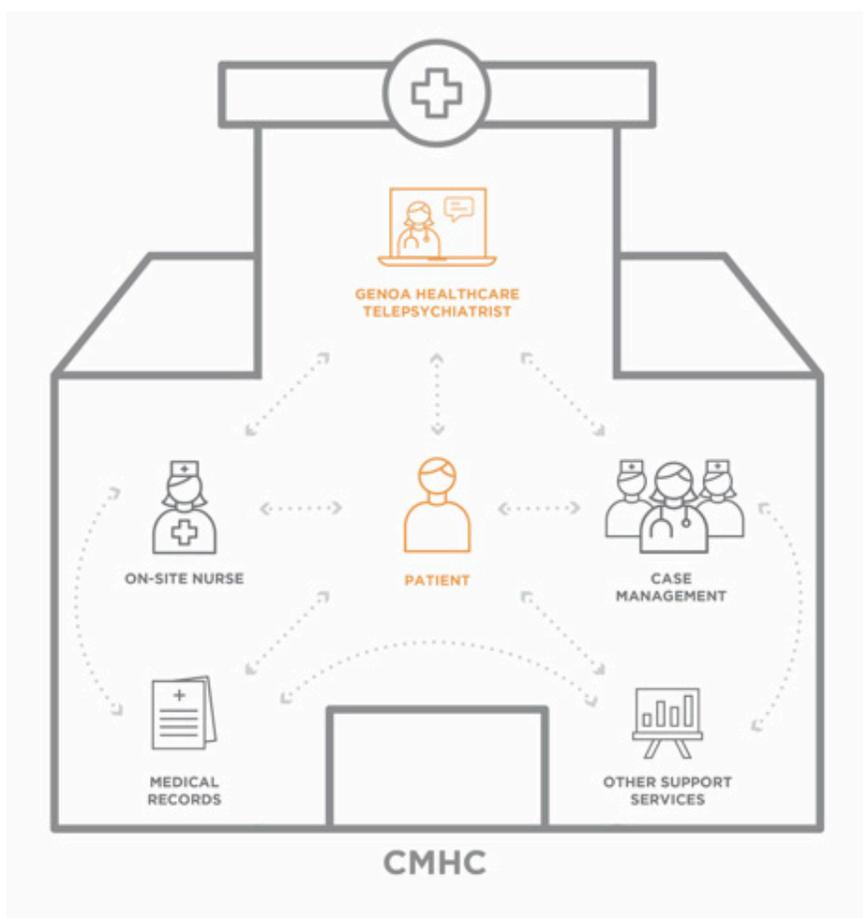
ABOUT GENOA HEALTHCARE TELEPSYCHIATRY

What is telepsychiatry and why does it matter to this patient population?

Genoa Healthcare Telepsychiatry is the nation's largest provider of outpatient telepsychiatry.

Genoa Healthcare Telepsychiatry increases access to behavioral healthcare by building telepsychiatry programs that **connect psychiatrists & APRNs with patients in underserved communities** across the U.S.

Genoa Healthcare Telepsychiatry serves behavioral health communities in **30+ states** and provides care through **215,000+ annual appointments** and counting.

Coordinated care between pharmacy, clinical care teams, and telepsychiatry providers most meaningfully delivers improved patient outcomes:

TELEPSYCHIATRY IMPROVES PATIENT OUTCOMES

Genoa Healthcare's New Peer-Reviewed Study Shows Telepsychiatry Improves Access to Behavioral Health Care

Comparison of Treatment and Control Across Matching Variables							
Matching Characteristics	**Intervention (n=62)**		**Control (n=180)**		**Net Difference**	**% Difference (Absolute Value)**	**p.**
	Average	**SD**	**Average**	**SD**			
Age (years)	38.2	11.0	39.0	12.3	-0.9	2.2%	.612
Female	47%	0.5	53%	0.5	-0.6%	11.4%	.504
SMI	80.7%	0.4	84.4	0.4	-3.8%	4.5%	.720
ADHD	11.3%	0.3	12.8%	0.33	1.5%	11.6%	.934
Anxiety	53.2%	0.5	61.7%	0.5	-8.4%	13.7%	.309
Bipolar	59.7%	0.5	42.8%	0.5	16.4%	39.5%	.031
Dementia	6.5%	0.3	7.2%	0.3	-0.8%	10.7%	.994
Depression	56.6%	0.5	61.1%	0.5	-4.7%	7.6%	.620
Developmental	3.2%	0.2	7.8%	0.3	-4.6%	58.5%	.343
Mood Disorder	19.4%	0.4	15.0%	0.4	-4.4%	29.0%	.546
PTSD	46.8%	0.5	42.2%	0.5	-4.6%	10.8%	.635
Schizophrenia or Psychosis	32.3%	0.5	35%	0.5	-2.7%	7.8%	.813
IDD	3.2%	0.2	7.8%	0.3	-4.6%	58.5%	.343
Other	54.8%	0.5	65.6%	0.5	-10.7%	16.3%	.176
CCI Score	1.94	2.3	1.91	1.1	0.0	1.3%	.529
CDPS Score Prospective	2.94	1.5	2.63	1.1	0.3	11.7%	.175
CDPS Score Concurrent	4.12	2.7	3.46	2.7	0.7	18.9%	.075

TELEPSYCHIATRY: Patient Outcomes

CITATIONS

1. Mental Health Information Statistics. National Institute of Mental Health.https://www.nimh.nih.gov/health/statistics/mental-illness.shtml

2. C. Holly A. Andrilla, MS, Davis G. Patterson, PhD, Lisa A. Garberson, PhD, Cynthia Coulthard, MPH, Eric H. Larson, PhD Geographic Variation in the Supply of Selected Behavioral Health Providers. https://www.ajpmonline.org/article/S0749-3797 (18)30005-9/fulltext. American Journal of Preventive Medicine June 2018; Volume 54, Issue 6, Supllement 3, Pages S199-S207

3. Mental Health Information Statistics. National Institute of Mental Health. https://www.nimh.nih.gov/health/statistics/mental-illness.shtml

4. Bruffaerts, R., Sabbe, M., Demyffenaere, K. (2005). Predicting Community Tenure in Patients with Recurrent Utilization of a Psychiatric Emergency Service. General Hospital Psychiatry, 27, 269-74.

5. Increasing access to rural mental health care using hybrid care that includes telepsychiatry. Hughes, M. Courtney,Gorman, Jack M., Ren, Yingqian, Khalid, Sana, Clayton, Carol. APA Journal of Rural Mental Health, Vol 43(1), Jan 2019, 30-37

To learn more about Genoa Healthcare, contact us at telepsychiatry@genoahealthcare.com