

WELCOME

# Telehealth: What's That All About?

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National Frontier and Rural

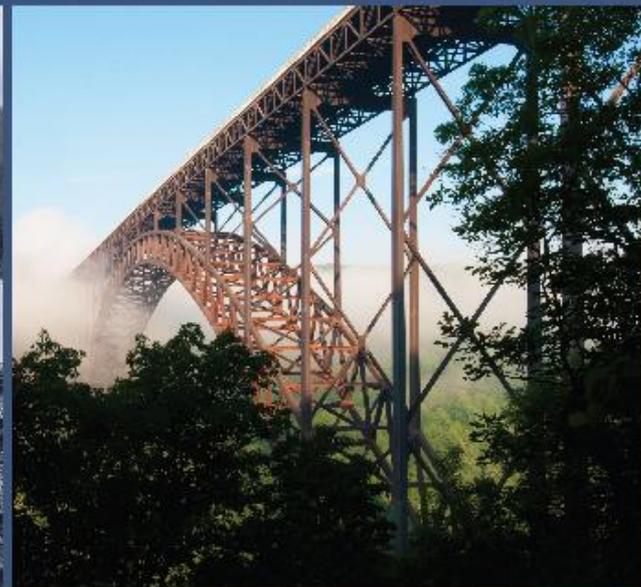
**ATTC**

Addiction Technology Transfer Center Network  
Funded by Substance Abuse and Mental Health Services Administration



Substance Abuse and Mental Health Services Administration

www.samhsa.gov • 1-877-SAMHSA-7 (1-877-726-4727)



National Frontier and Rural

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[www.nfarattc.org](http://www.nfarattc.org)

# *Telehealth*



**It's Not about the Technology ...**

**It's About Expanding Access and Enhancing  
Treatment Services**



National Frontier and Rural

**ATTC**

Addiction Technology Transfer Center Network  
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- **Data and Definitions**
- **Use of Technology**
- **Barriers to Treatment**
- **Telehealth Technologies**
- **Privacy & Security-  
Confidentiality**
- **Ethics**
- **License Portability**
- **Reimbursement**

# DATA and DEFINITIONS



Over half of the country's land mass  
is designated as frontier or rural



**Approximately one quarter of the U.S. population (62 million people) lives in frontier/rural areas**



**16-20% of those individuals experience substance dependence, mental illness, or co-morbid conditions**

# Individuals residing in remote areas have

- higher mortality rates,
- higher suicide rates, and
- more severe alcohol/drug problems



**Studies show that those residing in rural areas use substance abuse treatment less often than those in urban areas because of individual, structural, and geographic barriers, as well as the stigma associated with receiving treatment**

(Finfgeld-Connett & Madsen, 2008; Oser et al., 2012)



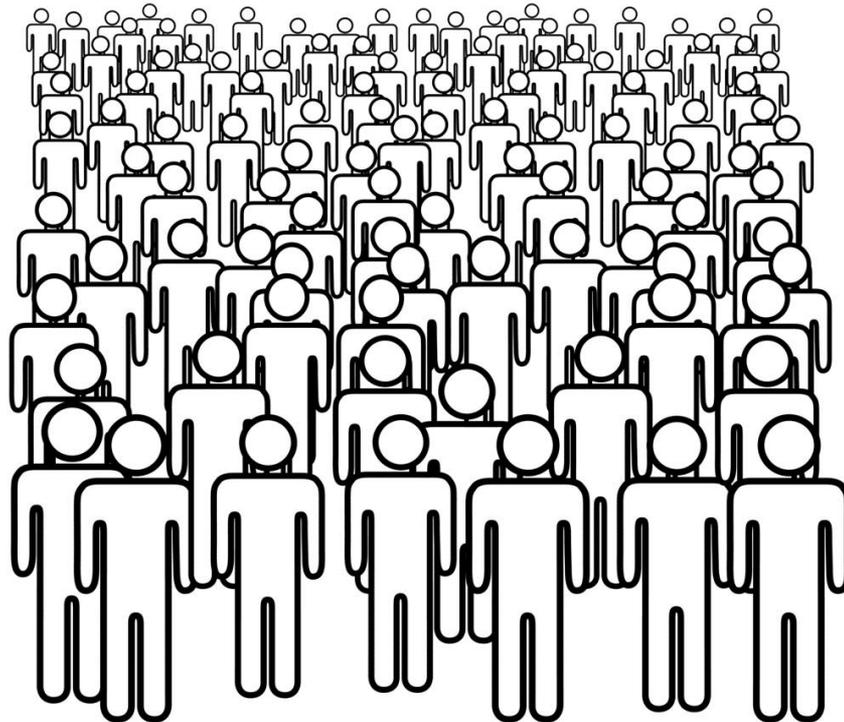
## *In rural vs. urban areas*

- **Perceived lack of privacy**
- **Women more stigmatized than men**



# 2009 workforce study

*lowest concentration of mental health professionals was found in frontier/rural areas (counties with less than 10,000 people)*



# Telehealth

*'the use of telecommunications and information technologies to provide access to health information and services across a geographical distance'*

# Telemedicine

*'use of medical information exchanged from one site to another via electronic communications to improve patient health status'*

# Definitions

- Synchronous communications
  - Videoconferencing
  - Telephone
- Asynchronous Communications
  - Email
  - Web-based programs
- Some telehealth technologies include both type of communications

# TELEHEALTH is not new



**1879**

Annually, **10 million**  
patients receive  
telemedicine services



# VA Services

- ★ **146** hospitals provided **55,000** community-based outpatient clinic patients with **140,000** telemental health visits
- ★ **6,700** patients received home-based telemental health services
- ★ **25%** decrease in hospitalization for receiving telemental health services between 2006-2010
- ★ **30%** reduction in admissions during the first 6 months of care in 2011

# Indian Health Services (IHS)

- serves **2 million** American Indians and Alaska Natives representing 566 federally recognized tribes
- includes **600** hospitals, clinics, and health stations under tribal governance
- implemented mobile telemedicine services in the 1970s
- Alaska Federal Health Care Access Network utilizes telehealth technologies
- Telenutrition Program - 2006



# Addiction Treatment Lags Behind



**There are few published works on the use of telehealth to provide or enhance substance abuse services in rural areas.**

# NASADAD Survey

- In 2009, Addiction Treatment Providers in **16** of the 37 states responding to the survey reported offering treatment services using telehealth
- Of those 37 states, **25** reported providing mental health treatment services using telehealth

# USE of TECHNOLOGY



**85%** of American adults have  
cell phones



**53%** have smart phones

A person wearing a dark blue V-neck t-shirt is holding a black smartphone with both hands. The person's face is not visible, and the background is a soft, out-of-focus light color. Overlaid on the image is the text "80% send and receive text messages".

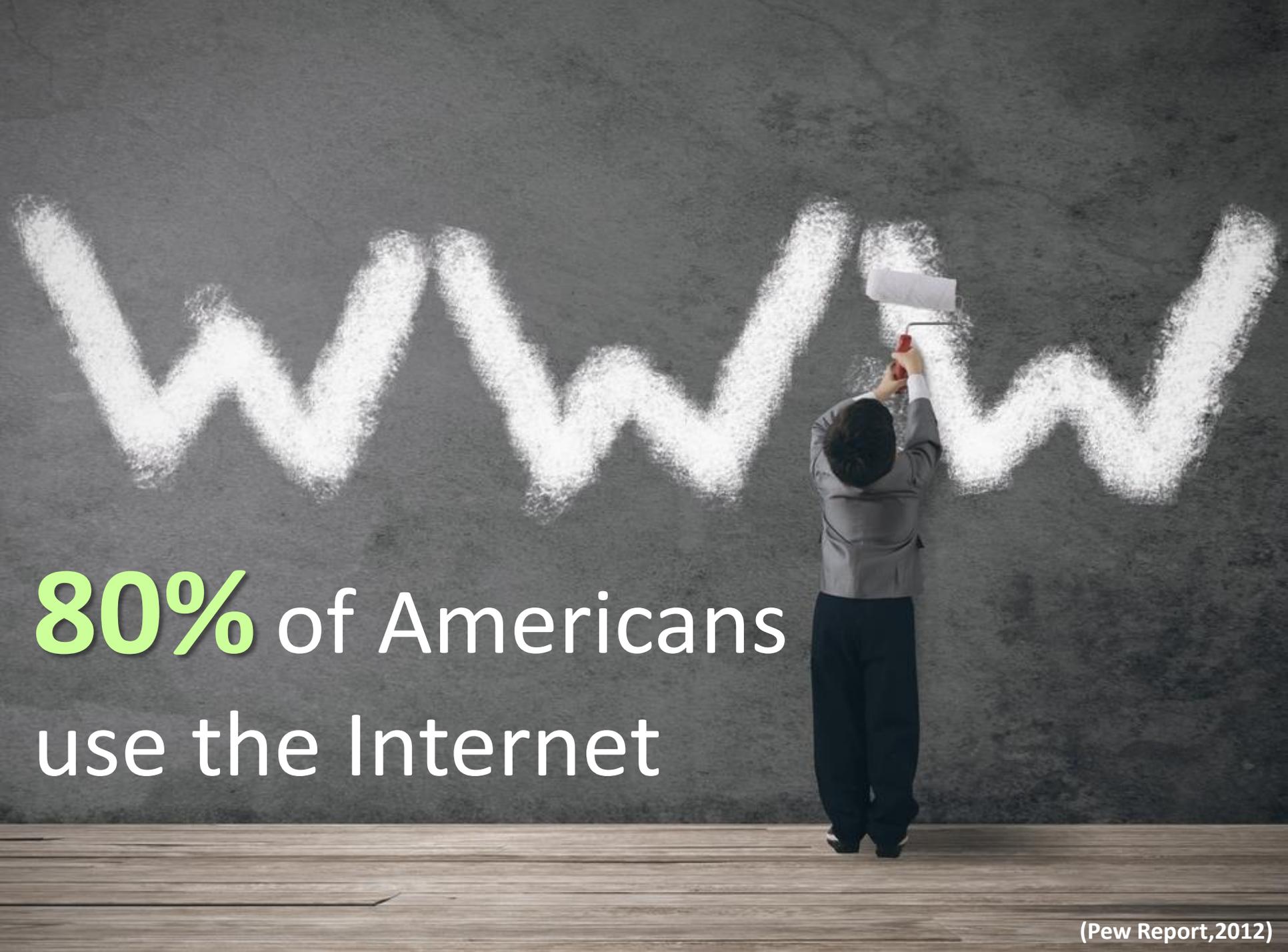
**80%** send and receive  
text messages

Over **HALF** have gathered health information on their phone

Almost **20%** have a health app



(Pew Report, 2012)



**80%** of Americans  
use the Internet

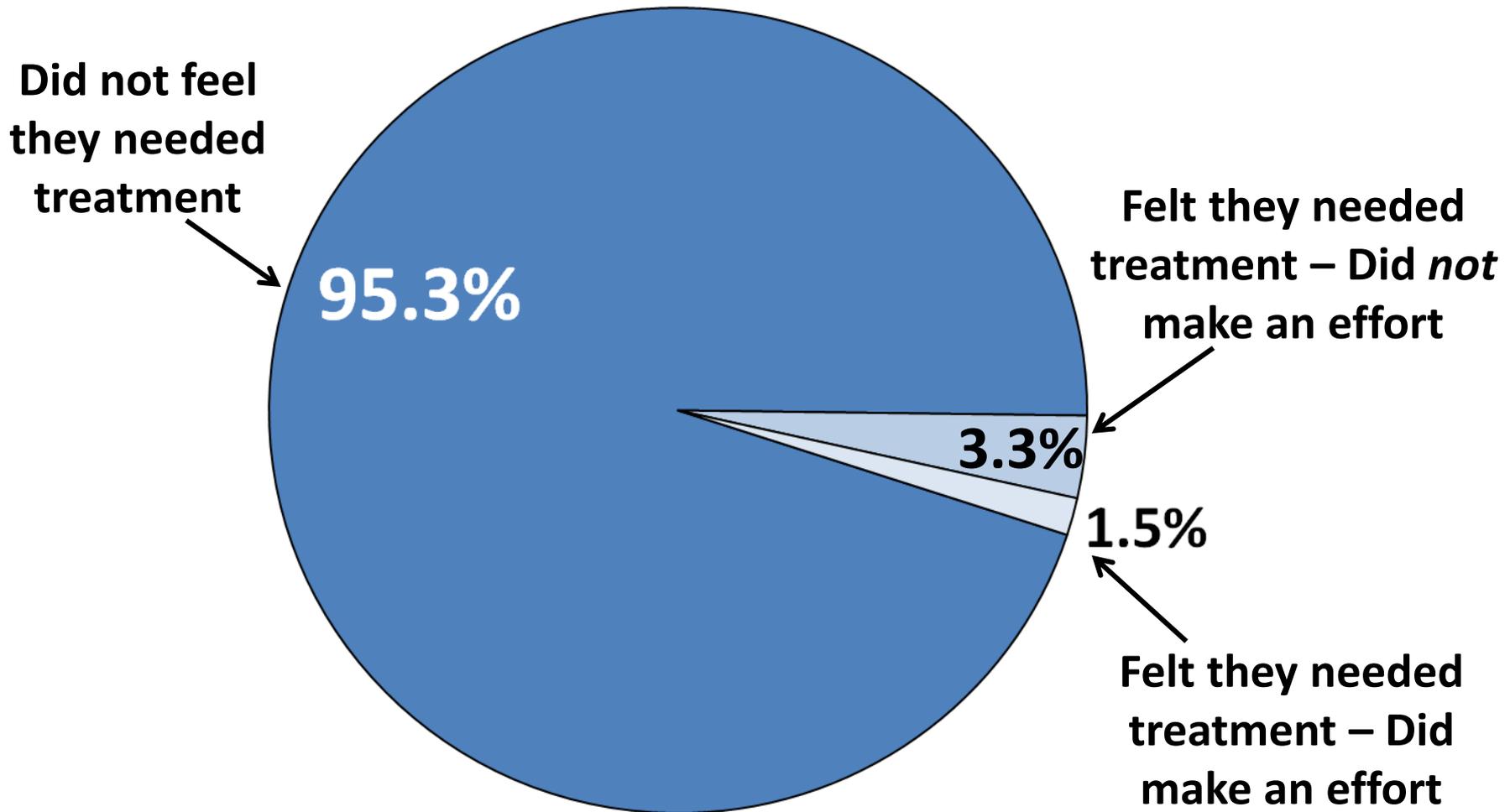
# What do we know about clients?

- Survey of 8 urban drug treatment clinics in Baltimore (266 patients)
- Client's access to:
  - **Mobile Phone (91%)**
  - **Text Messaging (79%)**
  - **Internet/Email/Computer (39 - 45%)**

# Barriers to Treatment



# In 2011, 20.6 million people aged 12 or older met the criteria for substance use disorders



19.3 million people needed but did not receive treatment for illicit drug or alcohol use

# Barriers Include

- ★ Travel Costs and Burden

(Rheuban, 2012)

- ★ Time Away From Work

(Berwick, 2008)

- ★ Child Care

(Berwick, 2008)

- ★ Lack of Service Providers

(Perle et al., 2011; Swinton et al., 2009)



# Privacy and Confidentiality



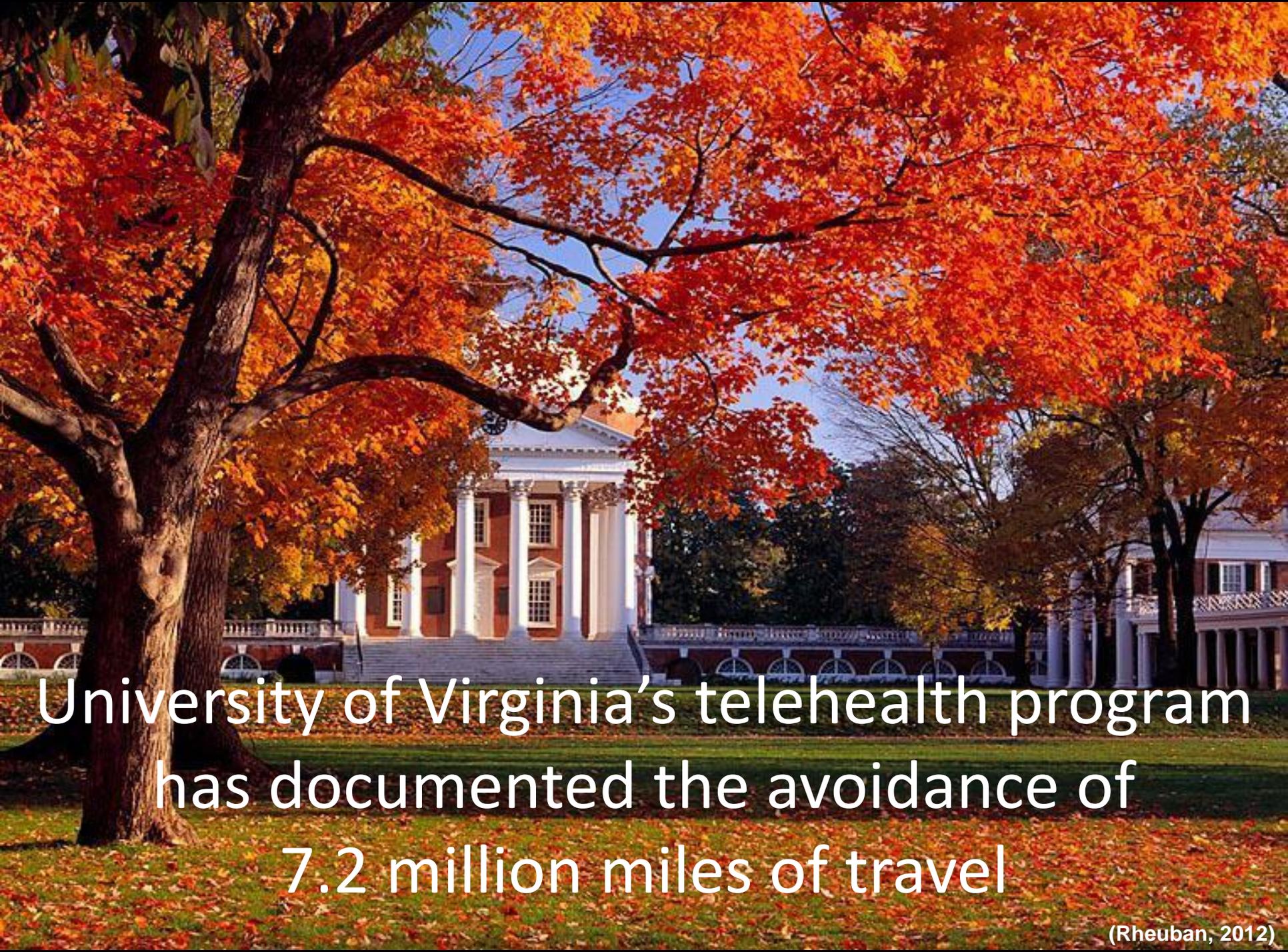


How do we facilitate a shift that will give addiction treatment providers greater reach and tools to serve the population that experienced barriers to treatment and those that needed but didn't receive treatment?

# One Answer...

## Telehealth Technologies



A photograph of the University of Virginia's Rotunda building, a large white classical structure with a portico of columns, set against a backdrop of trees with vibrant autumn foliage in shades of orange, red, and yellow. The ground is covered with fallen leaves. The text is overlaid on the lower half of the image.

University of Virginia's telehealth program  
has documented the avoidance of  
7.2 million miles of travel

# Telehealth Technologies



## State

## State-Specific Information

IOWA

Recent news,  
pending action:

- August 26, 2010 -- The Iowa Board of Medicine creates ad hoc committee to study broad range of telemedicine. The committee will to study the Board's 1996 policy statement and determine what is needed to make it more relevant to the continually expanding use of "telemedicine" by physicians. The committee will begin a review of the policy statement and the general topic of telemedicine this fall, but may not complete its work until a parallel nationwide study by the Federation of State Medical Boards is completed in 2011.

Pending  
legislation:

- HF 296: Directs the Department of Human Services to submit an amendment to the medical assistance state plan to the US Centers for Medicare and Medicaid Services for approval to include telemedicine as distinct covered services under the Medicaid program; defines "telemedicine".

Medicaid law and  
regulations:

- Medicaid recognizes physician consultations when furnished using interactive video teleconferencing. Payment is based on the state's fee-for-service rates for covered services furnished in the conventional, face-to-face manner. Reimbursement is made at both ends (hub and spoke sites) for telemedicine services. Specific local codes are used for the add-on payment and CPT codes with the modifier "TM" is used to identify the consultations.

From  
Telemedicine for  
CSHCN: A State-  
by-State  
Comparison of  
Medicaid  
Reimbursement  
Policies and Title  
V Activities (2005)  
prepared by  
Telehealth  
Connections for  
Children and  
Youth:

- Type of Service(s) Which Can Be Reimbursed
  - Note: Program terminated at time of survey due to insufficient data to support it. State had reimbursed for physician consultations using interactive video teleconferencing.
- Payment Method
  - FFS
  - Same as reimbursement for covered services furnished in the conventional, face-to-face manner.
- Reimbursement Type
  - Reimbursement is at both ends (hub and spoke).
- How Identified in Claims/Use of Modifiers
  - Specific local codes for the add-on payment and CPT codes with the modifier "TM" to identify the consultations.

From  
Telemedicine  
Reimbursement  
Report (2003)  
prepared by the  
Center for  
Telemedicine  
Law:

- "The Medicaid agency began reimbursement through a pilot program that was legislatively mandated and upon completion legislatively terminated. The agency recognizes a limited number of physician consultation codes for use of interactive video teleconferencing. Only three providers initially entered into agreement to participate, but only two remain. Many providers indicated that completion of the forms (designed to collect data) was too burdensome. Payment is based on the state's fee-for-service rates for covered services furnished in the conventional face-to-face manner. Reimbursement is made at both the hub and spoke sites for telemedicine services. Specific local codes are used for the add-on payment, and CPT codes with the modifier "TM" is used to identify

# West Virginia

Rectangular Snip

## Contents [hide]

- 1 Recent news, pending action
  - 1.1 Pending Legislation
- 2 Insurance law and regulations
- 3 Medicaid law and regulations
  - 3.1 Specific questions
- 4 Telehealth licensure
- 5 Telehealth networks
- 6 Organization and people resources

## Recent news, pending action

### Pending Legislation

HB 3123[1] : Encourages the use of [telemedicine](#), [telepsychology](#) and video conferencing to make child welfare system more effective.

## Insurance law and regulations

## Medicaid law and regulations

**From Telemedicine for CSHCN: A State-by-State Comparison of Medicaid Reimbursement Policies and Title V Activities (2005) prepared by Telehealth Connections for Children and Youth[2]**

### Type of Service(s) Which Can Be Reimbursed

Physician consultations using interactive video teleconferencing. Patient must be present at time of the consultation.

### Payment Method

FFS

Same for covered services furnished in the conventional, face-to-face manner.

### Reimbursement Type

Reimbursement is at both ends (hub and spoke).

No "add ons" (technical support, line charges or depreciation of equipment) are allowed.

### How Identified in Claims/Use of Modifiers

Consultative CPT codes with a TV "GT" modifier.

### "Store and Forward" vs. Live

Reimburses for real-time only.

No "store and forward".

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## 2013 State Telemedicine Legislation Tracking (as of 8/14/2013) \*

State	Legislated Mandate for Private Coverage	Legislated Medicaid Coverage (primarily interactive video)	Other Proposed Bills Affecting Telemedicine Access or Coverage	Notes
Pennsylvania	Proposed			HB 491
Rhode Island			Proposed	S 753 and H 5725 - physician licensure (STATUS: Died in Session)
South Carolina	Proposed			SB 290 and HB 3779 (STATUS: Died in Session)
South Dakota				
Tennessee	Proposed			SB 484 and HB 923 (STATUS: Died in Session)
Texas	✓	✓	Proposed	HB 1470 - Medical board standards; HB 1806 - Telemedicine coverage; SB 830 - Telemedicine in trauma facilities (STATUS: Died in Session)
Utah				
Vermont	✓	✓	✓	H 272 and S 88 - related to telemedicine services outside of healthcare facility (STATUS: SIGNED INTO LAW. Law will focus on a pilot program to study effects of telemedicine when delivered outside of healthcare facility.)
Virginia	✓			
Washington	Proposed			HB 1448 (STATUS: Died in Session)
West Virginia			✓	HB 2577 - revises laws related to the practice of pharmacy (STATUS: SIGNED INTO LAW 5/3/13)
Wisconsin				
Wyoming				

\* Does Not Include State Administrative or Regulatory Orders

✓ = Previously Enacted

‘The research base for telemental health-related interventions is slightly more than 50 years old’.

# 2000 – 2008

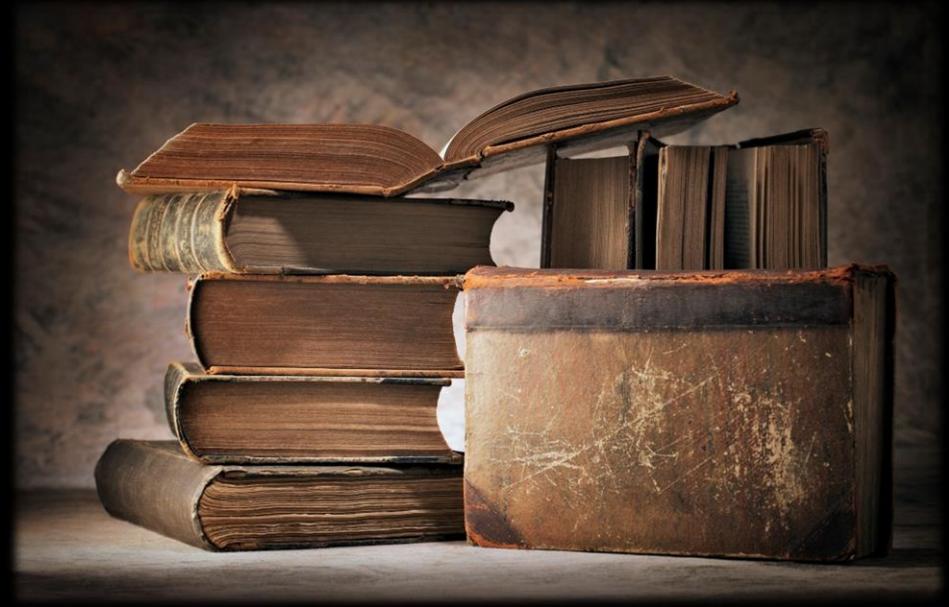
the number of telemental health  
publications **TRIPLED** from the  
previous 30 years



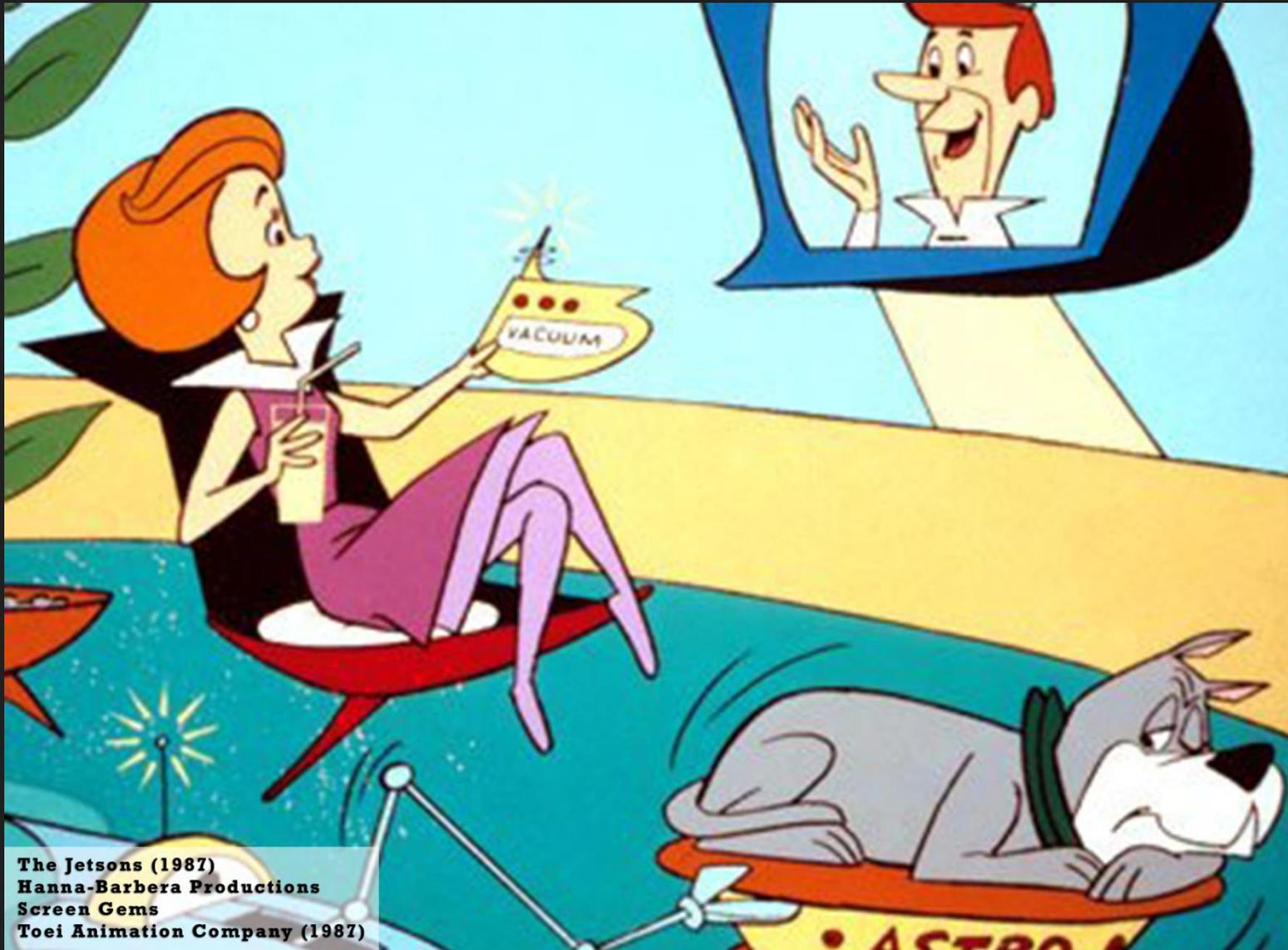
(Backhaus et al., 2012; Richardson et al., 2009)

# Literature Review

- ★ Videoconferencing
- ★ Computer-based Interventions
- ★ Web
  - Screeners
  - Support Groups
  - Virtual Reality/Video Games
  - Disease Management Programs
- ★ Web-Portals
  - Videoconferencing
  - Messaging (chat and email)
- ★ Telephone
  - Continuing Care
  - Interactive Voice Response
- ★ Mobile Phones
  - Texting



# Videoconferencing



**The Jetsons (1987)**  
**Hanna-Barbera Productions**  
**Screen Gems**  
**Toei Animation Company (1987)**



DEPARTMENT OF  
VETERANS AFFAIRS

TO CARE FOR HIM WHO SHALL  
HAVE BORNE THE BATTLE AND  
FOR HIS WIDOW, AND HIS ORPHAN  
A. LINCOLN

Largest provider of telemental health services  
using videoconferencing

(Godleski et al., 2008; Darkins et al., 2008; IOM, 2012; Deen et al., 2012; Godleski et al., 2012)

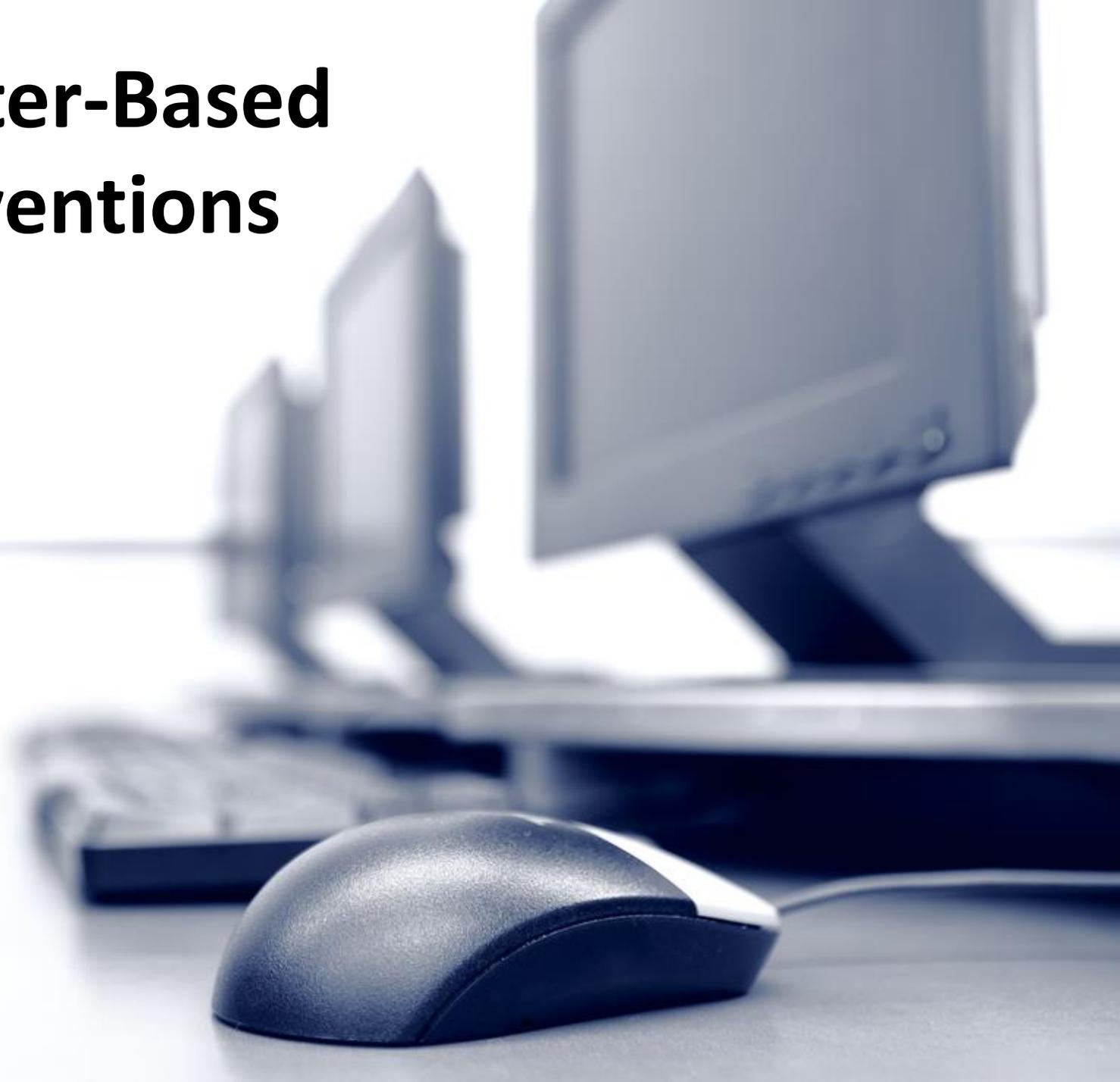
# Systematic Review of Videoconferencing Psychotherapy

- Patients and providers perceived a strong therapeutic alliance over videoconferencing
- Studies that compared videoconferencing to in-person psychotherapy reported similar satisfaction levels between the conditions
- high levels of satisfaction and acceptance with telemental health have been consistently demonstrated among patients across a variety of clinical populations and for a broad range of services

# Videoconferencing Studies in Addiction Treatment

- Opioid Treatment-group counseling  
(King et al., 2009)
- Alcohol Treatment  
(Postel et al., 2005)
- Alcohol Treatment  
(Frueh et al., 2005)
- Teleconferencing Supervision (TCS)- MI  
(Smith et al., 2012)

# Computer-Based Interventions





# DEFINITION

Use of computers to deliver some aspects of psychotherapy or behavioral treatment directly to patients via interaction with a computer program

**Encouraging evidence  
suggests positive  
treatment outcomes**



To date, more than **100**  
different computer-assisted therapy  
programs have been developed for a  
range of mental disorders and  
behavioral health problems

CBIs are flexible in their ability to provide automated and tailored information





# Clinician Extenders

(Bickel et al., 2008; Carroll & Rounsaville, 2010;  
Des Jarlais et al., 1999; Marsch, 2011)

# Computer-Based Treatments

- Serve as Adjuncts to standard treatment
- Save clinician time
- Extend clinician expertise
- Integrate other EBTs to provide additional services to clients with co-morbid conditions
- Provide access to computerized smoking cessation programs or other health-related conditions

“Delivery of CBT could be subcontracted to the computer....”



# Examples of Computer-Based Interventions

- CBT4CBT (Carroll et al., 2008)
  - Outpatient clients
  - CBT + 6 computer modules on CBT
- TES [Therapeutic Education System] (Marsch & Bickel, 2004)
  - Community Reinforcement Approach + Incentives
  - HIV/AIDS Intervention-Opioid treatment clients (2004)
  - Outpatient Opioid Treatment- TAU + TES (2008)
  - Outpatient Treatment-2hrs per week of TES + TAU (2012)
- Ondersma (2005/2007)
  - single-session computer-delivered MI intervention reduced drug use among postpartum women

The vital question for this field is  
not “Do computer-assisted  
therapies work?” but.....

“which **specific computer-assisted therapies**, delivered under what **conditions** to which **populations**, exert effects that approach or exceed those of standard clinician-delivered therapies”?

# Web-based Screeners



# Web-Based Screeners

- <http://rethinkingdrinking.niaaa.nih.gov>
- [www.CheckYourDrinking.net](http://www.CheckYourDrinking.net)
- [www.AlcoholScreening.org](http://www.AlcoholScreening.org)
- [www.DrinkersCheckup.com](http://www.DrinkersCheckup.com)
- <http://www.downyourdrink.org.uk/>

# Web-Based Screeners for College Students

- [www.CheckYourDrinkingU.net](http://www.CheckYourDrinkingU.net)
- [www.eCHUG.com](http://www.eCHUG.com)
- <http://www.collegebingeddrinking.net/>
- <https://www.mystudentbody.com/default.aspx>

# Systematic Review of Studies of Web-based Screeners (Bewick et al., 2008)

- Chiauuzzi et al. (2005): comparison group
- Cunningham et al. (2005): comparison group
- Kypri & McAnally (2005): pure control group
- Kypri et al., (2004): comparison group
- Moore et al., (2005): comparison group- email newsletter
- Bendsten et al., (2006): process study-email-based
- Cunningham et al., (2000): process study
- Lieberman (2003): process study
- Linke et al.,(2004): process study
- Westrup et al., (2003): process study

Studies found that web screeners that provided automated personalized feedback impacted participants' behavior more than those with non-personalized feedback

# Web-Based Support Groups



# Web-Based Support



**Psychoeducational  
Self-Help  
Mutual Support**

# Podcasts/Radio Shows

- [www.12stepradio.com](http://www.12stepradio.com)
- <https://itunes.apple.com/us/podcast/aa-on-air-wellington/id465173613?mt=2>
- <https://itunes.apple.com/us/podcast/smart-recovery-podcasts/id433764979?mt=2>
- <https://itunes.apple.com/us/podcast/online-recovery-support/id317380341?mt=2>
- <https://itunes.apple.com/us/podcast/getting-to-recovery/id455357559?mt=2>

# Self-Help

## CHALLENGE YOUR OCD, TAKE BACK YOUR LIFE.

*Climb your mountain, fight your OCD...you can do it! -Elizabeth McIngvale*

**OCD**

CHALLENGE

**SIGN UP NOW** ➔

Already a subscriber? [Login](#)

Want to learn more? [Watch the tour.](#)



**CLICK HERE**

**AND LET LIZ  
EXPLAIN  
HOW THE  
JOURNEY  
WORKS**

Take back your life...sign up today!

**WHAT IS OCD?**

**HOW DOES THE OCD  
CHALLENGE WORK?**

**HOW TO CHALLENGE  
YOUR OCD**

**THE PEACE OF MIND  
FOUNDATION**

# Web-Based Support Groups

- <http://aa-intergroup.org>
- [www.AlcoholHelpCenter.net](http://www.AlcoholHelpCenter.net)
- [www.smartrecovery.org](http://www.smartrecovery.org)
- <http://www.cyberrecovery.net/forums/>
- <http://www.addictiontribe.com/>
- [www.NAChatroom.org](http://www.NAChatroom.org)



SECOND  
LIFE

Virtual Reality

# Mental health professionals are now employing virtual worlds in treating

- Asperger Syndrome  
(Mangan, 2008)
- Combat-related PTSD  
(Reger & Gahm, 2008; Wood et al, 2009)
- Emotional Aspects of Physical Disabilities  
(Chen et al., 2009)

# Computer Simulation Games

## Guardian Angel

- Male Veterans
  - adjunct to treatment
  - focused on relapse prevention
  - Played computer simulation game for 8 weeks
  - no different in relapse rates
  - results show decreases in craving and increases in self efficacy

# Web-Based Disease Management Programs

- **Cancer**  
(Gustafson et al., 2005)
- **Diabetes**  
(Glasgow et al., 2005; Williams et al., 2007)
- **Heart Disease**  
(Verheijden et al., 2004)
- **Mood Disorders**  
(Farvolden et al., 2005)

# Web-based Disease Management Programs - Addiction

- MORE (My Ongoing Recovery Experience)
  - 7 recovery modules-content tailored
  - 18 month period
  - Journal/workbook
  - Access to counselors and other individuals in recovery

# Centerstone's v-recover.com

## Recovery Engagement Center

Helping you along your path to recovery



Request Appointment



HOME OUR VIEW WHAT WE PROVIDE RESOURCES / NEED HELP? CALENDAR RESOURCES REAL RECOVERY GALLERY THE STAFF HELP Login

### Here's the latest...



Susan Sandberg addresses the community on the positive outcomes HOPE is producing

### JOIN THE DISCUSSION

Let's talk Recovery! Join with other community members like you and share motivation, inspirational quotes, stories, or encouragement. Are you in need of help with something? We are in this together. Mention it to the group and watch your local community of recovery rally around you!

*We've made some changes to the Discussion Board. If you have been using a Yahoo email address to log in, you still can, but you have to set it up differently. For instructions on creating or changing your log in information and other features, please click [here](#).*

[Click here to see a list of supported browsers](#)

2643 comments



Leave a message...

Newest ▾

Share



RecoveryRoad · 5 hours ago

What would you define as one of your biggest barriers to recovery?

Reply Share

### Video



### UPCOMING EVENTS

- **TODAY - Jul 1**
  - o 4:00PM - 5:30PM Seeking Safety [more](#)
  - o 5:30PM - 6:30PM AA- First Things First Group [more](#)
  - o 6:00PM - 7:30PM Courage to Change [more](#)
  - o 6:00PM - 7:00PM AA- 5th Traditionist's Group [more](#)
  - o 7:00PM - 8:00PM AA- Bloomington Beginner's Group [more](#)
  - o 7:00PM - 8:00PM AA- Live and Let Live Group [more](#)
  - o 8:00PM - 9:00PM AA- Steep City Group [more](#)

### NEWS / BULLETINS

#### JUST FOR TODAY Passage

A simple...  
[View in Context »](#)

# The U.S. Veterans Health Administration

## My Recovery Plan Orientation for Health Care Team Members



Start Lesson

First Time User Help

Introduction

What is My Recovery Plan?

My Recovery Plan Tools

Working with Veterans

Lesson Review

### Overview

My Recovery Plan® uses the My HealthVet Personal Health Record as a vehicle to support mental health recovery.

It empowers Veterans with the tools to be a part of their own care and discusses the effectiveness of their VA treatment goals.

My Recovery Plan uses the My HealthVet Personal Health Record as a vehicle to support mental health recovery. It provides Veterans a centralized, online place to participate in exercises and treatment options specific to their own goals, treatment, and recovery.

This course was developed for health care teams that work with Veterans with mental or behavioral health symptoms, illnesses, disorders or problems, and substance use disorders.

This course takes approximately 30



# Other Web-Based Technologies

COMPOSE

Inbox (1)

Important

Sent Mail



# Email



**Messaging – Chat**



## Now You Can Get the Treatment You Need from the Privacy of Your Home!

**eServices** is an alternative to traditional therapy that gives you effective intervention and counseling services on your computer. Meeting with your therapist online, at your convenience, saves you time, energy and money. All you need is a phone or internet connection.

**eServices** uses evidenced based intervention and treatment practices; practices that are proven to be effective.

**eServices** can also be used for Assessments and Evaluations, Employee Assistance Programs (EAP), Student Assistance Programs (SAP), Outpatient Services, and much, much, more...



- **Scheduling Flexibility & No Traveling**
- **Support 24/7**
- **Phone or Web-cam Based**
- **Affordable Fees**
- **Private & Confidential**
- **Many Insurances Accepted**
- Individual & Group Settings
- **Evidenced Based Practices Utilized**

Complete online  
and phone  
counseling services

**gateway**  
1-877-389-9966 **connect**





**Telephone**

# Use of the Telephone

Monitor/treat chronic mental & physical illness

- Smoking

(Stead, et al., 2006)

- Depression

(Simon, et al., 2000)

- Obsessive Compulsive Disorder

(Taylor, et al., 2003)

- Hypertension

(Bosworth, et al., 2005)

- Diabetes

(Kim & Oh, 2003)

- Rheumatology problems

(Pal, 1998)



# Telephone Continuing Care

# Telephone Continuing Care for SUDs

- Telephone Monitoring and Adaptive Counseling (TMAC)  
(McKay, 2004)
- Focused Continuing Care (FFC) (Betty Ford Clinic)
- Telephone Enhancement of Long Term Engagement (TELE)  
(Hubbard et al., 2007)
- Individual Therapeutic Brief Phone Contact (ITBPC)  
(Kaminer & Napolitano, 2004) **ADOLESCENTS**
- Telephone Case Monitoring (TCM)  
(McKellar et al., 2012)
- Telephone Continuing Care (TCC)  
(Godley et al., 2010)



# **Interactive Voice Response**

# Interactive Voice Response

- Automated, computer-based interventions have shown promise in treating substance use disorders
- Fully automated systems offer a number of potential advantages including:
  - low cost
  - consistent delivery
  - greater accessibility and availability of treatment
  - increased flexibility of scheduling and convenience

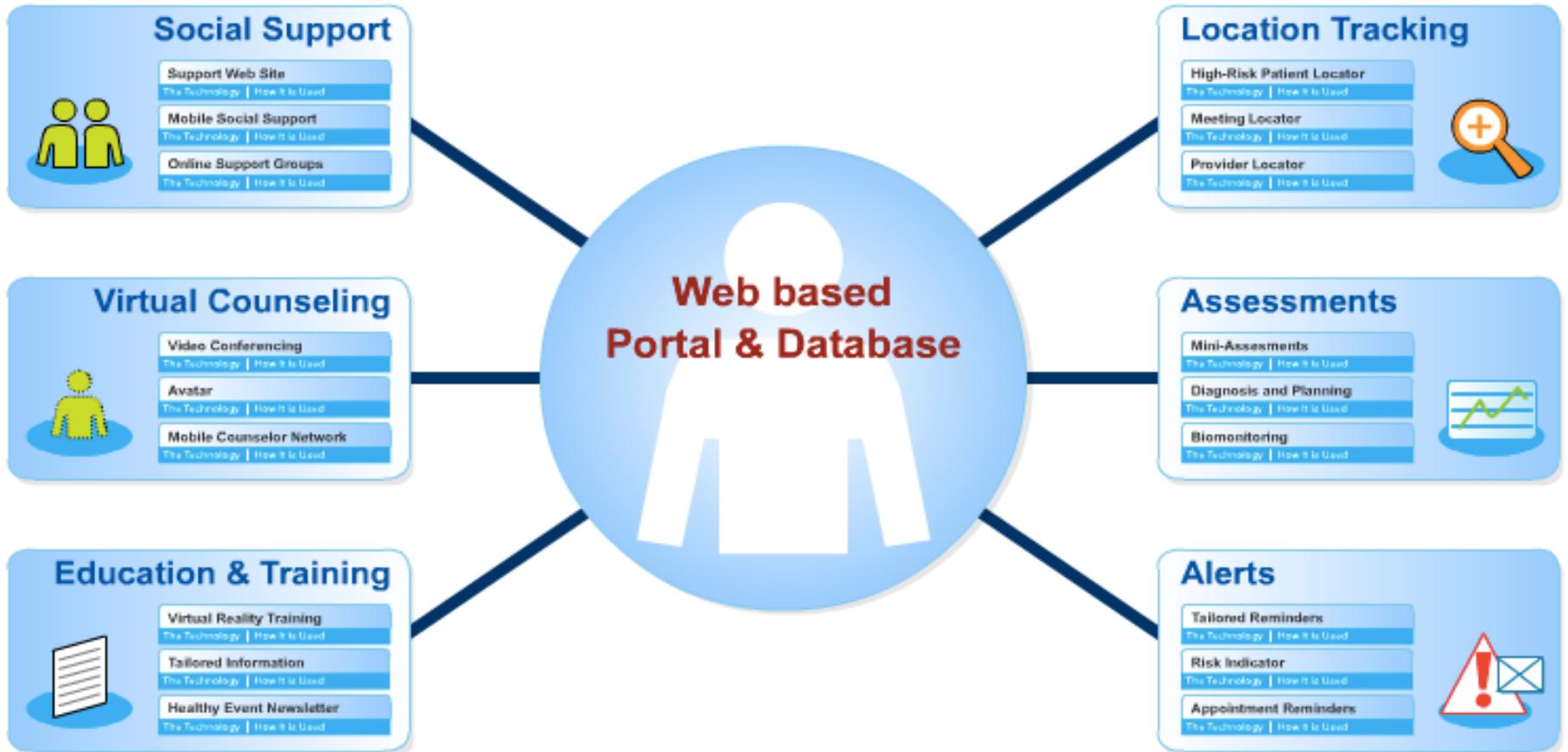


# Mobile Phones

# *Alcohol-Comprehensive Health Enhancement Support System (ACHESS)*

- *Explicitly designed to address three constructs*
  - *coping competence*
  - *social support*
  - *autonomous motivation*
- *Primary hypothesis is that ACHESS will reduce risky drinking days*

# ACHESS



# ACHESS

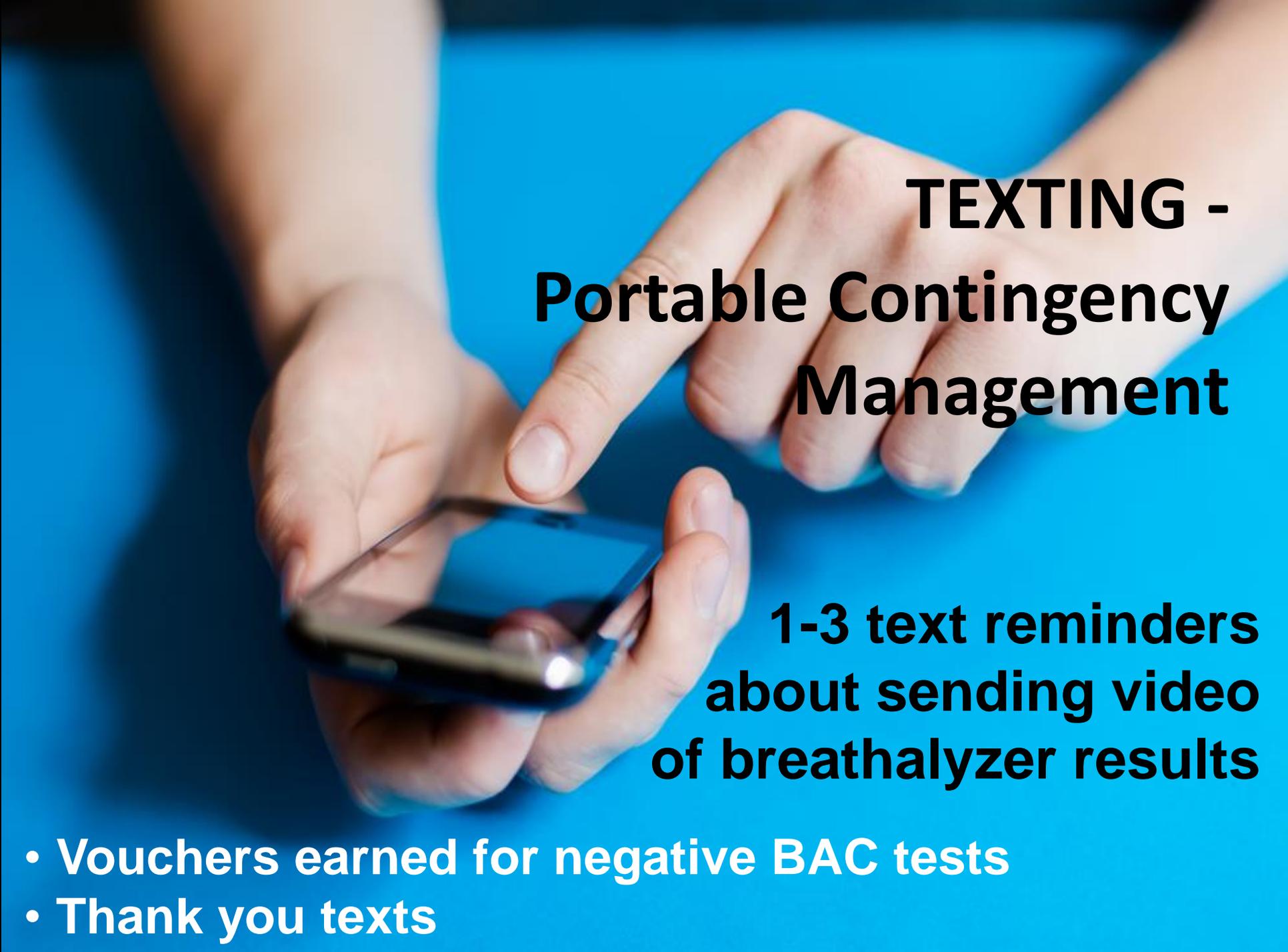
ACHESS



It is operating now!



- Monitoring and alerts
- Reminders
- Autonomous motivation
- Assertive outreach
- Care coordination
- Medication reminders
- Peer & family support
- Relaxation
- Locations tracking
- Contact with professionals
- Information

A close-up photograph of a person's hands holding a black smartphone. The person's right hand is at the bottom, holding the phone, while their left hand is positioned above it, with the index finger pointing towards the screen. The background is a solid, bright blue color. The text is overlaid on the right side of the image.

# **TEXTING - Portable Contingency Management**

**1-3 text reminders  
about sending video  
of breathalyzer results**

- Vouchers earned for negative BAC tests**
- Thank you texts**

**FINALLY...**

**Take home message.**



“Given the elusive nature of motivation to change substance use-related behaviors... it is important to capitalize on the teachable moment.”



Immediacy of many telehealth technologies



**Privacy, Security, & Confidentiality  
Issues with Telehealth**

# HIPAA

*(Health Insurance Portability & Accountability Act)*

# HITECH

*(Health Information Technology for Economic & Clinical Health Act)*

# Privacy Rule

*(Standards for Privacy of Individually Identifiable Health Information)*

# 42 CFR Part 2

*(Substance abuse treatment)*



CONFIDENTIAL



# Protected Health Information (PHI)

# Privacy, Security, & Confidentiality

Privacy & Security  
Rules are Different

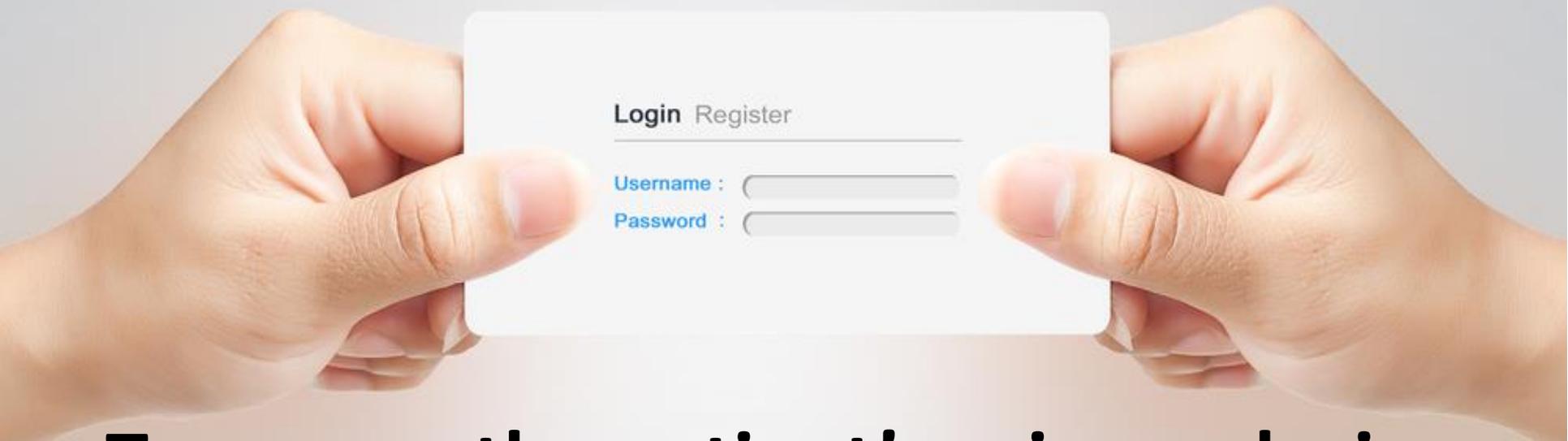
- HIPAA Privacy Rules - **What** situations can individual health information be disclosed, no matter its format (oral, paper, or electronic)?
- HIPAA Security Rules - **How** are disclosures in electronic format made?

# Privacy, Security, & Confidentiality



**Final Rule** specifically states because "paper-to-paper" faxes, person-to-person telephone calls, video teleconferencing, or messages left on voice-mail were not in electronic form before the transmission, those activities are not covered by this rule (p. 8342).





**To ensure the patient's privacy during treatment sessions, clinicians should consider the use of private networks or encrypted videoconferencing software.**

# SKYPE



# Counselors Use of Technology



Do you or your staff  
**EMAIL** or **TEXT**  
clients?

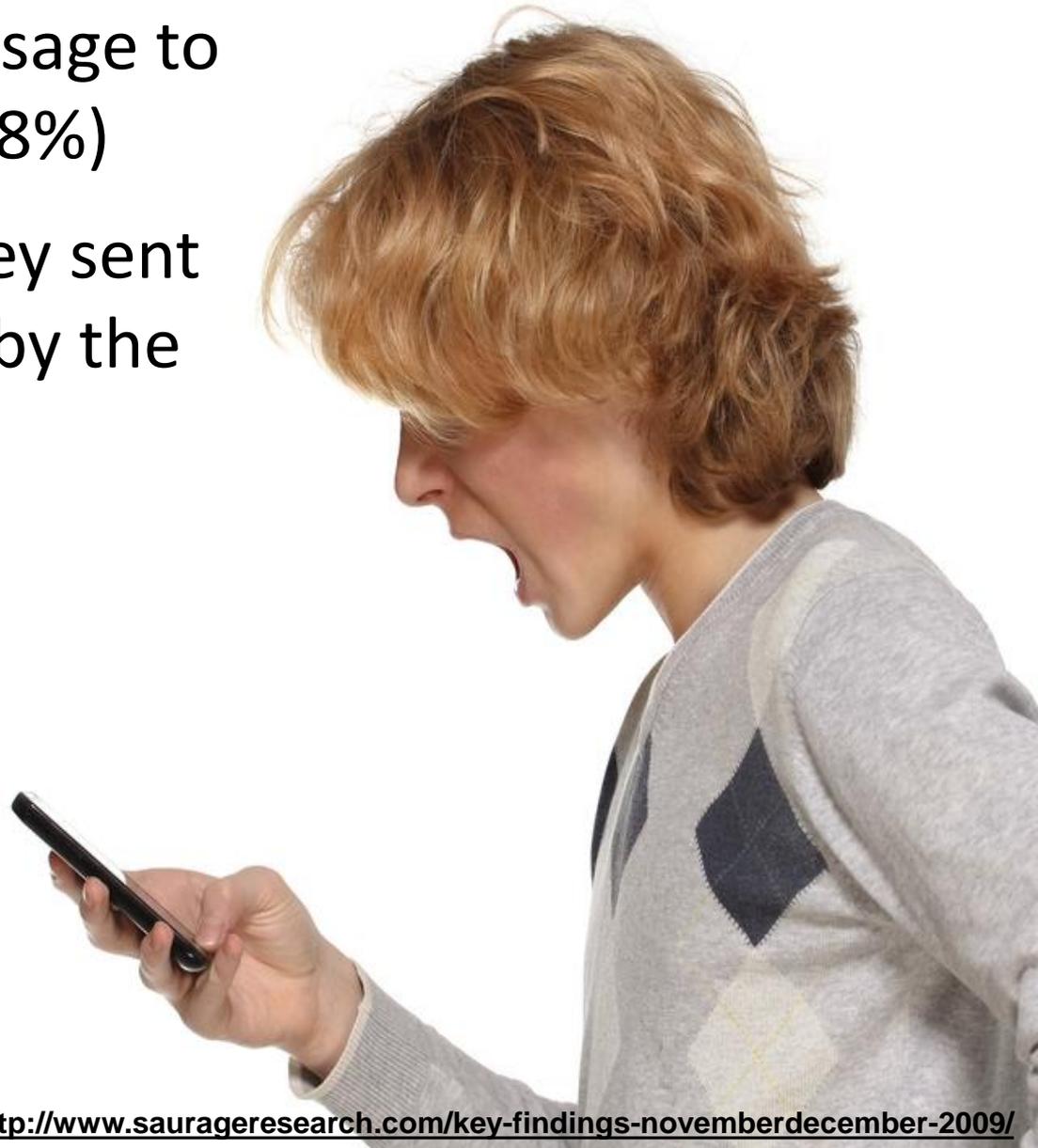


**SO WHAT'S THE**



# More than one-third of cell phone users

- have sent a text message to the wrong person (38%)
- report that a text they sent was misunderstood by the reader (37%)



**“Traditional Short Message Service (SMS) text messaging is non-secure and non-compliant with safety and privacy regulations under HIPAA. Messages containing ePHI can be read by anyone, forwarded to anyone, remain unencrypted on telecommunication providers’ servers, and stay forever on sender’s and receiver’s phones.”**

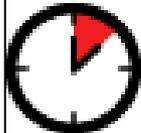
VERIZON

T-MOBILE

AT&T

SPRINT

### TEXT MESSAGE DETAIL



1 yr  
rolling



2 yrs pre-paid  
5 yrs post-paid



5-7 yrs  
post-paid



1.5-2 yrs

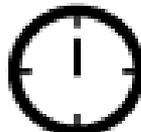
### TEXT MESSAGE CONTENT



3-5  
days



0 days



0 days



0 days

### CALL DETAIL RECORDS



1 yr  
rolling



2 yrs pre-paid  
5 yrs post-paid



5-7 yrs  
post-paid



1.5-2 yrs

“It is not acceptable for physicians or licensed independent practitioners to text orders for patients to the hospital or other healthcare setting. This method provides no ability to verify the identity of the person sending the text and there is no way to keep the original message as validation of what is entered into the medical record.”

The Joint Commission November 10, 2011

[http://www.jointcommission.org/standards\\_information/jcfaqdetails.aspx?StandardsFaql=401&ProgramId=1](http://www.jointcommission.org/standards_information/jcfaqdetails.aspx?StandardsFaql=401&ProgramId=1)

# Safe Practices



A photograph of a beach scene. In the foreground, a silver mobile phone is lying on the sand, partially submerged in the shallow, rippling water of the ocean. The water is a light brownish-tan color. In the background, the ocean extends to the horizon under a clear blue sky. A yellow and white inflatable ring is visible in the distance. The overall scene suggests a lost or damaged mobile device.

maintain physical control  
of your mobile  
device/computer

(<http://www.HealthIT.gov/mobiledevices>)

A wooden signpost with a yellow sign that reads "YOU ARE NOW IN A WIFI AREA". The sign is mounted on a wooden post with a decorative top. The background is a blurred outdoor setting with trees and grass.

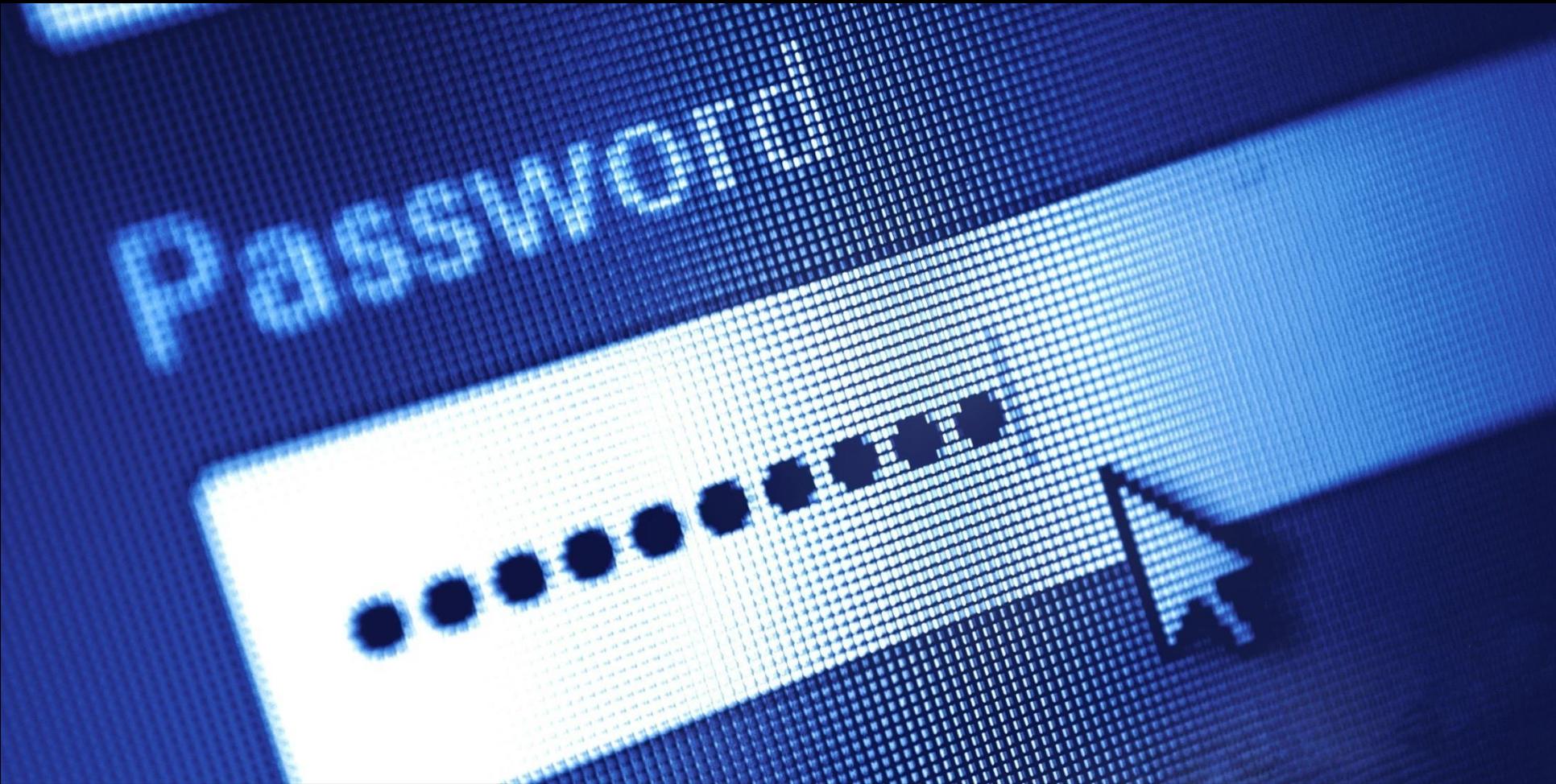
**YOU ARE NOW  
IN A WIFI AREA**

unsecured  
networks

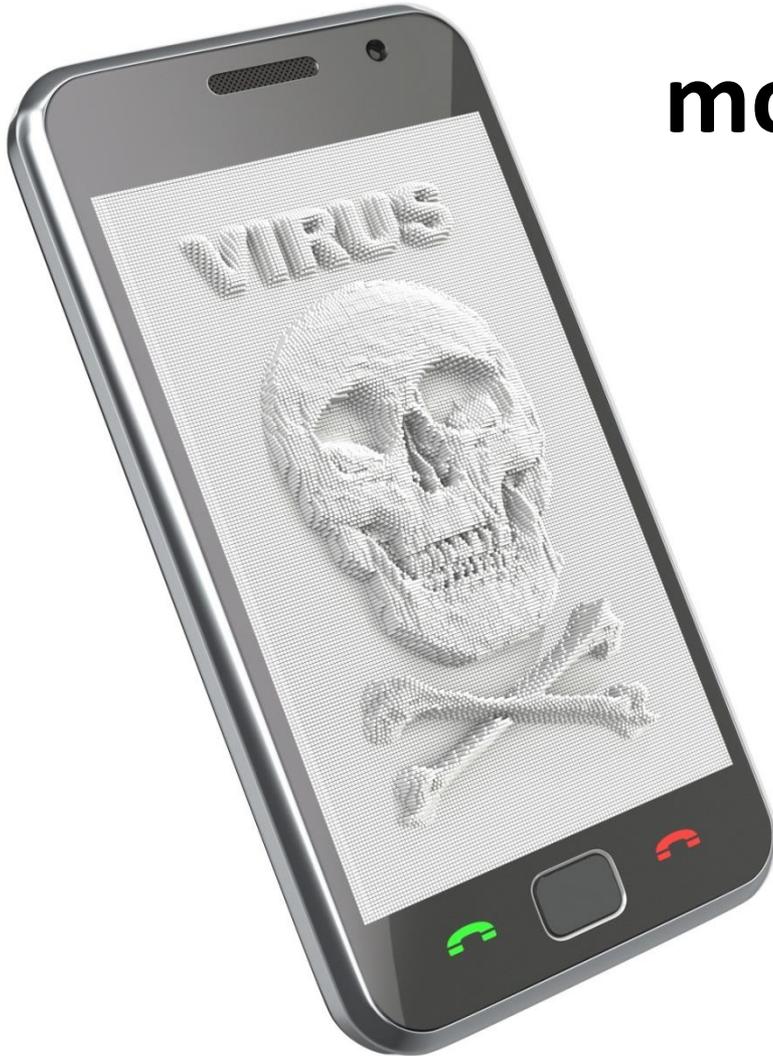
# unintentional disclosure



password protect ***EVERYTHING***



**check out what is  
downloaded on your  
mobile device/computer  
and keep the security  
software updated**



**activate wiping and/or remote  
disabling**



Implement *policies & procedures* to  
*restrict access* to,  
*protect the integrity* of, and  
*guard against unauthorized*  
*access* to e-PHI



ETHICS

# Ethics

## Use of technology by counselors

- is increasing
- presents unique ethical dilemmas



# Code of ethics

Need to be  
re-written to  
address  
technology

# Ethical Codes Related to the use of Technology in Counseling/Therapy/Treatment

- NAADAC (Association for Addiction Professionals)
- National Board of Certified Counselors (NBCC)
- American Counseling Association (ACA)
- American Mental Health Counselor Association (AMHCA)
- American Association of Marriage and Family Therapy (AAMFT)
- National Association of Social Workers (NASW)

# Ethical Codes

## **American Psychological Association (APA)**

- recognizes the need for development of guidelines
- in 2011 approved a joint task force to develop telehealth guidelines for psychologists
- telehealth technologies are not currently included in the APA Code of Ethics

# Ethical Codes

## International Certification & Reciprocity Consortium (IC&RC)

- does not create or maintain a Code of Ethics
- IC&RC member boards deal with matter individually and recommends contacting member boards directly
- contact information for all member boards can be found at [www.internationalcredentialing.org/findboard](http://www.internationalcredentialing.org/findboard)

# Ethical Codes related to 4 areas of telehealth technology

- Informed Consent
- Confidentiality/Privacy
- Records & Data
- Competency

# License Portability





# Conducting Therapy Across State Lines

**Which state governs?**

**What does the state licensing board allow/require?**

# Reimbursement for Telehealth Addiction Treatment Services



# Health Care Reform / Affordable Care Act



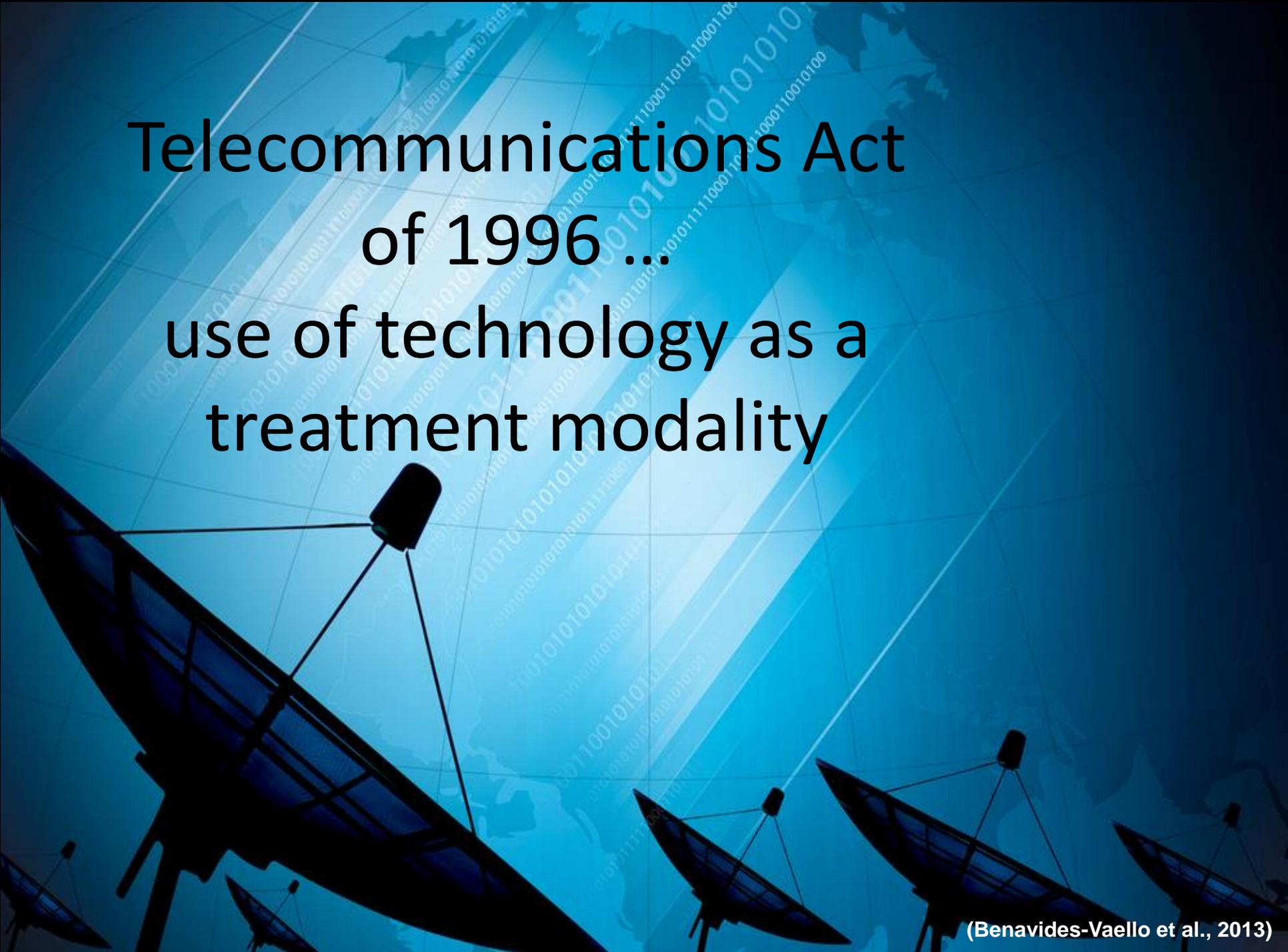
**Effective January 1, 2014**

**32** million people currently uninsured may have access to insurance through either Medicaid expansion or Health Insurance Exchanges.

Of the 32 million people, **11** million will have a mental health or substance use condition

# West Virginia

- 22.5K adults ages 18-64 with substance use disorders will have coverage for substance use treatment under Medicaid expansion
- 11K adults ages 18-64 with substance use disorders will have coverage for substance use treatment within the Health Insurance Exchange
- This represents a two-fold increase in the estimated prevalence within the existing eligible Medicaid population (currently 18K).

The background of the slide features a blue-toned image of several satellite dishes pointing towards the sky. Overlaid on this is a faint, stylized world map and a grid of binary code (0s and 1s) that creates a digital or technological atmosphere.

# Telecommunications Act of 1996 ... use of technology as a treatment modality

**Who Pays for  
Services  
Delivered Using  
Telehealth  
Technologies**



## Need for a Conceptual Model

The field continues to lack integrated theories and models of technology transfer to inform and standardize how innovations (research findings, evidence-based practices) are researched, communicated and transferred to the field. The



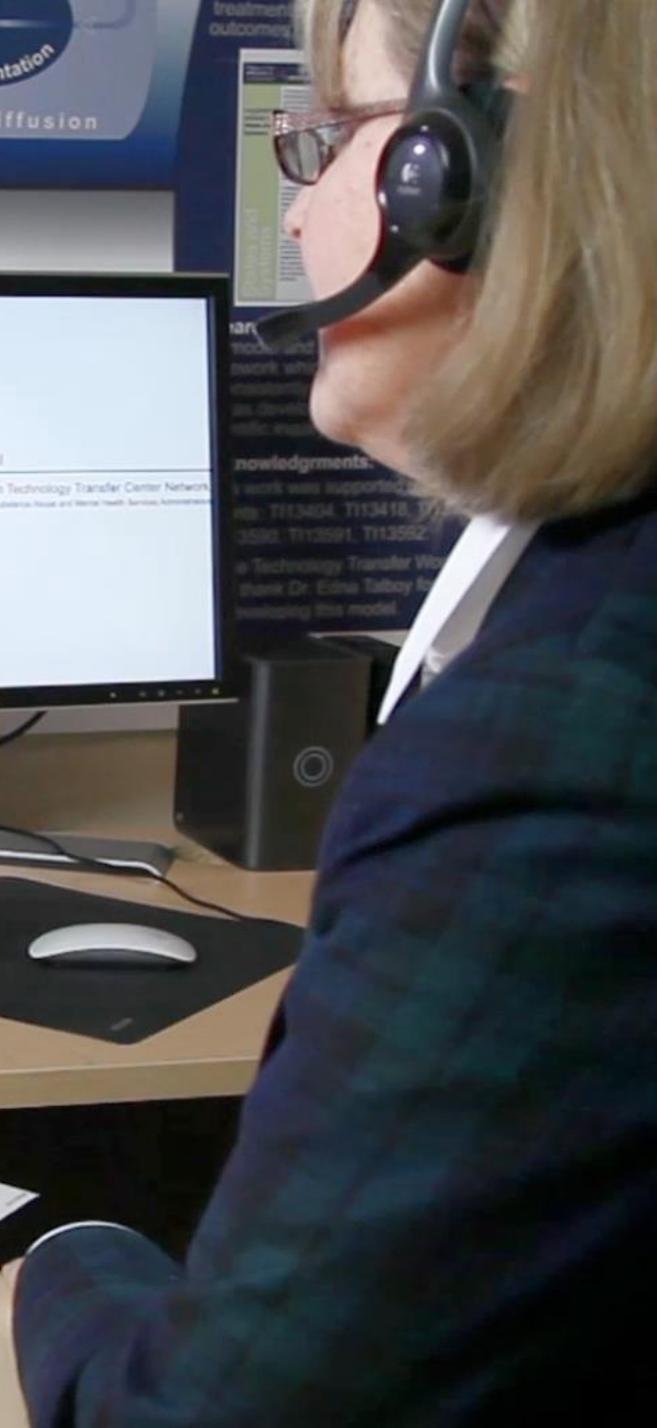
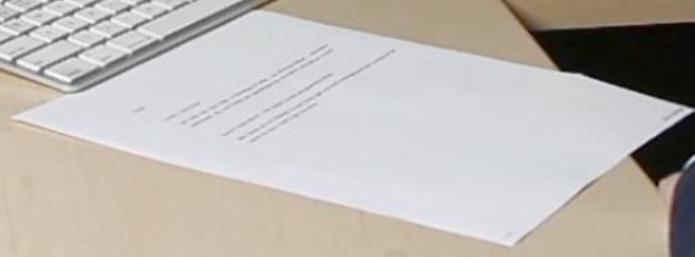
treatment  
outcomes

Practice and  
Systems

acknowledgments:  
I work was supported  
by: T113404, T113418, T113419, T113591, T113592.  
Technology Transfer Work  
Thank Dr. Colva Talbot for  
inspiring this model.

## Key

ing an  
treatmen  
g the e  
dissem  
ing av  
tion. D  
g ma  
f deci  
ating  
s de  
ainin  
pond  
dime  
er beg  
exter  
d inv  
is de



**TELEHEALTH  
POLICY**

Medicare

Medicaid

**State Laws and  
Reimbursement Policies**

Pending Laws & Regulations

Advanced Search

**IHEALTHBEAT**

6.17.13  
UC-Davis To Add Sexual  
Orientation, Gender Identity  
Data to EHRs »

6.17.13  
Study: Telehealth Use More  
Prevalent Among Urban,  
Wealthy Patients »

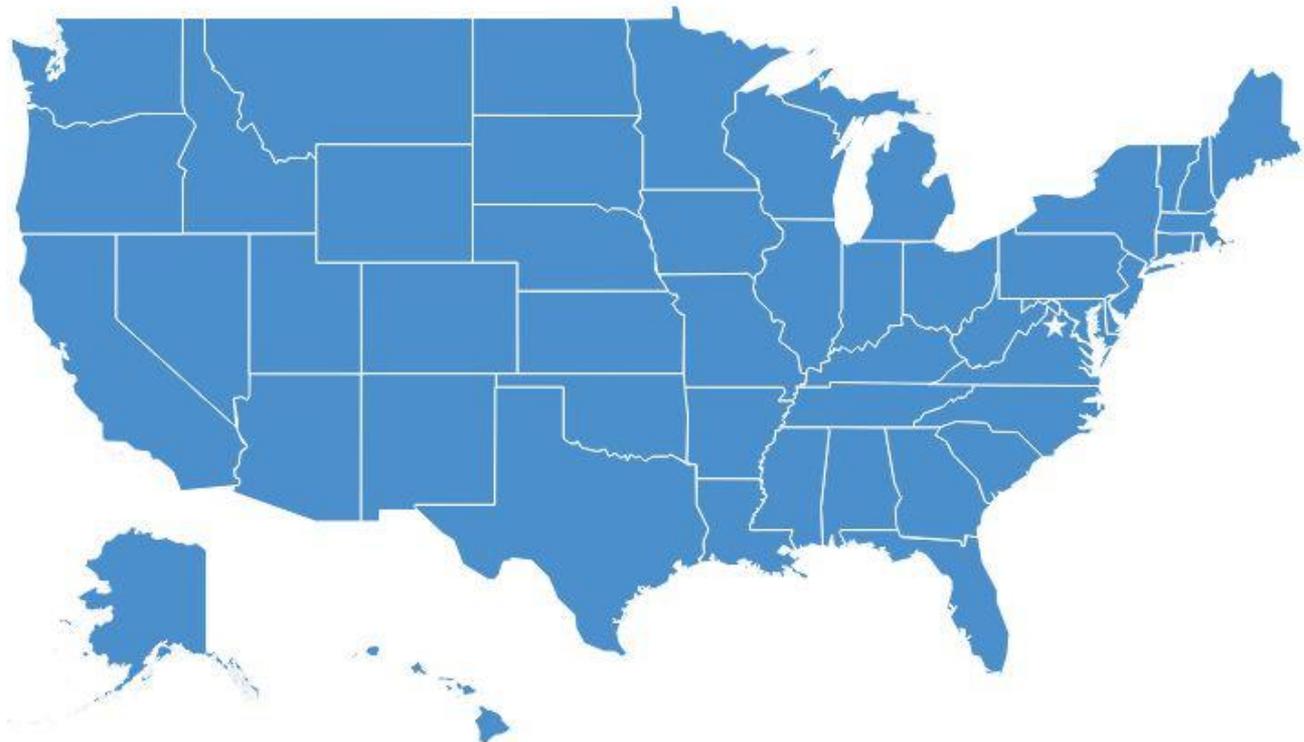
6.17.13  
Mostashari Confirms ICD-10  
Compliance Deadline Not  
Changing »

6.17.13  
Physician Groups Stump for  
Meaningful Use Exemption  
Legislation »

Home / Telehealth Policy

## State Laws and Reimbursement Policies

Select a state to view telehealth-related laws, regulations, and Medicaid programs. You can also view a list of [pending laws](#) or do an [advanced search](#).



**TELEHEALTH POLICY**

Medicare

Medicaid

State Laws and Reimbursement Policies

Pending Laws & Regulations

Advanced Search

Home / West Virginia

# West Virginia

Use these filters to view specific areas or types of law. Use the "status" filter to view pending law.

Area of Law

Law Type

Status

- Any -

- Any -

Current

Apply

**IHEALTHBEAT**

9.13.13  
 ACP Pushes for More Time To Comply With Meaningful Use Stage 2 >

9.13.13  
 RWJF, Doctor Groups Weigh in on Releasing Medicare Payment Data >

9.13.13  
 Medical Identity Theft Increases by Nearly 20% in the U.S., Survey Says >

9.13.13

**TELEMEDICINE/TELEHEALTH DEFINITION**

**Law**

"The practice of telemedicine means the use of electronic information and communication technologies to provide health care when distance separates participants. It includes one or both of the...

[read more >](#)

**Regulation**

No reference found.

**Medicaid Program**

"A tele-consultation is an interactive member encounter that meets specific criteria. This service requires the use of interactive telecommunications systems, defined as multimedia communication...

[read more >](#)

**LIVE VIDEO REIMBURSEMENT**

**Law**

**Regulation**

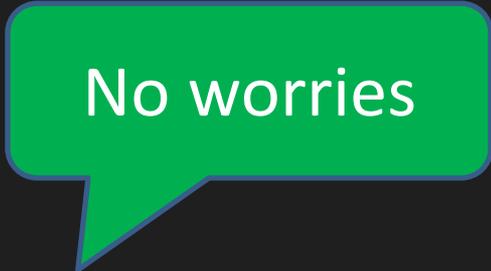
**Medicaid Program**

0%

100%

**ALMOST DONE**

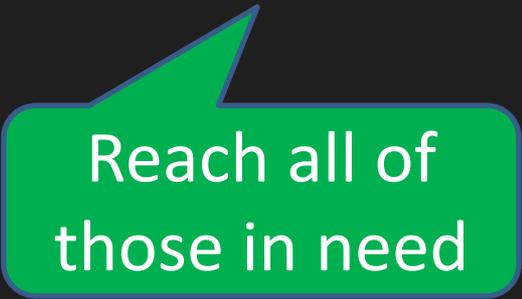




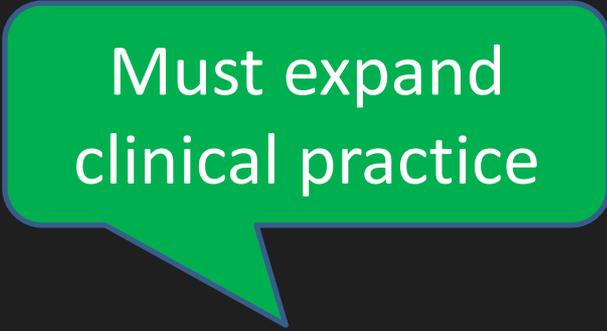
No worries

There will always be a place for  
face to face treatment....

However, something must change...  
to overcome the limitations facing the  
field and the notion that mental  
health care services are often not able  
to reach all those in need, particularly  
those in rural or remote areas.



Reach all of  
those in need



Must expand  
clinical practice

A major shift and expansion of  
clinical practice must occur to  
overcome the mental health burden  
and facilitate positive change.

From this, the question becomes,  
how do we facilitate this shift that  
will give mental health professionals  
greater reach and tools to serve the  
greater population?

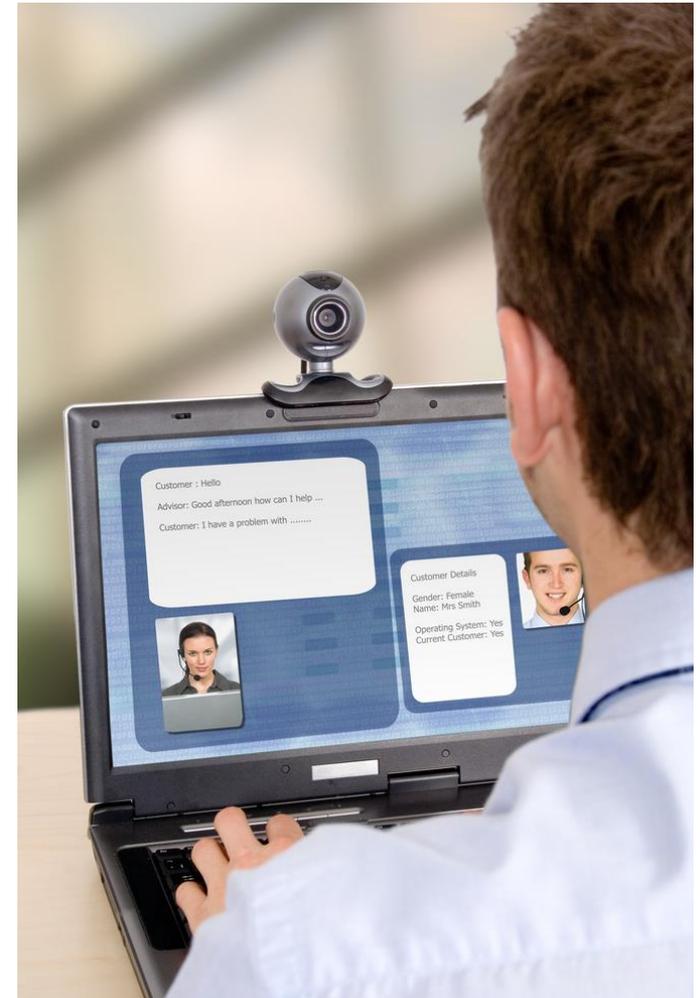
Greater reach & tools =  
TELEHEALTH  
TECHNOLOGIES

# Whether its Group Counseling

Like This

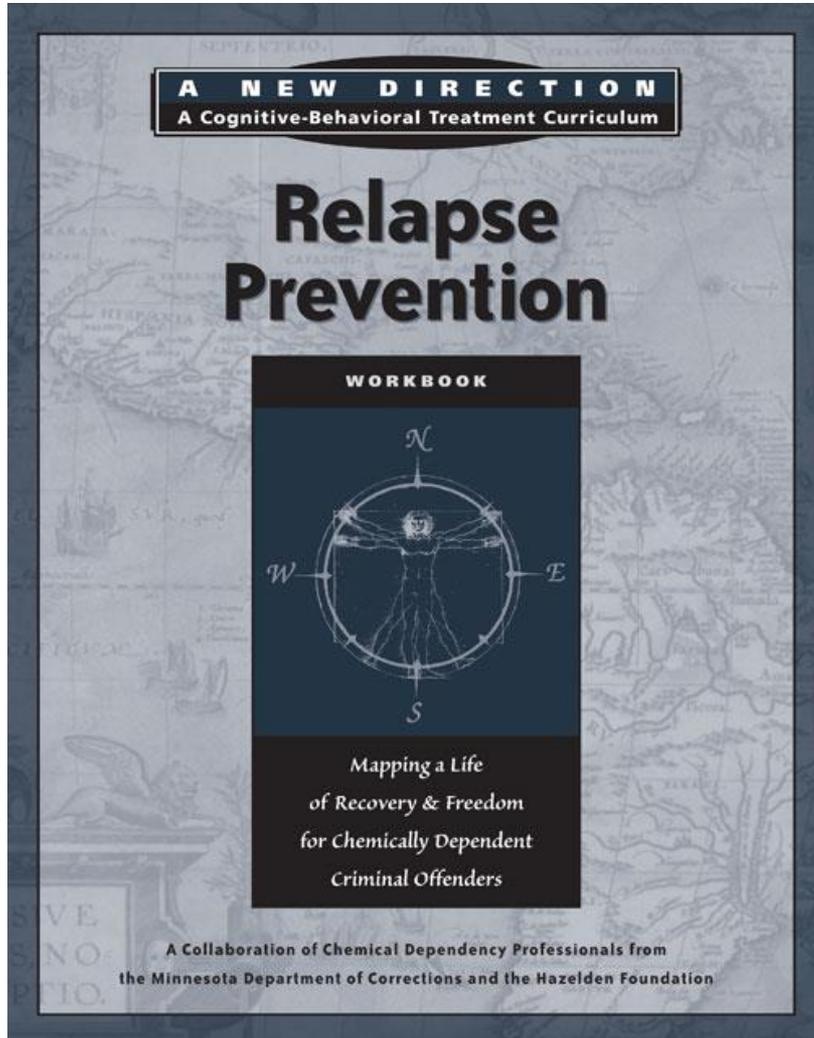


or Like This



# or Client Homework

Like This



or Like This



## *Expanding Access*

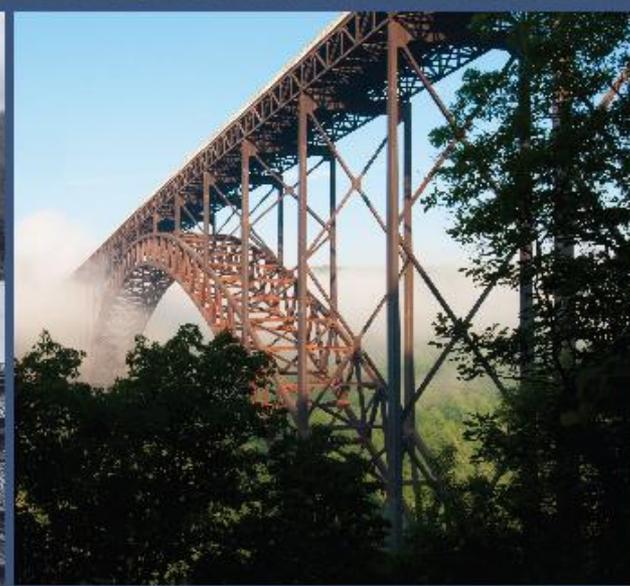
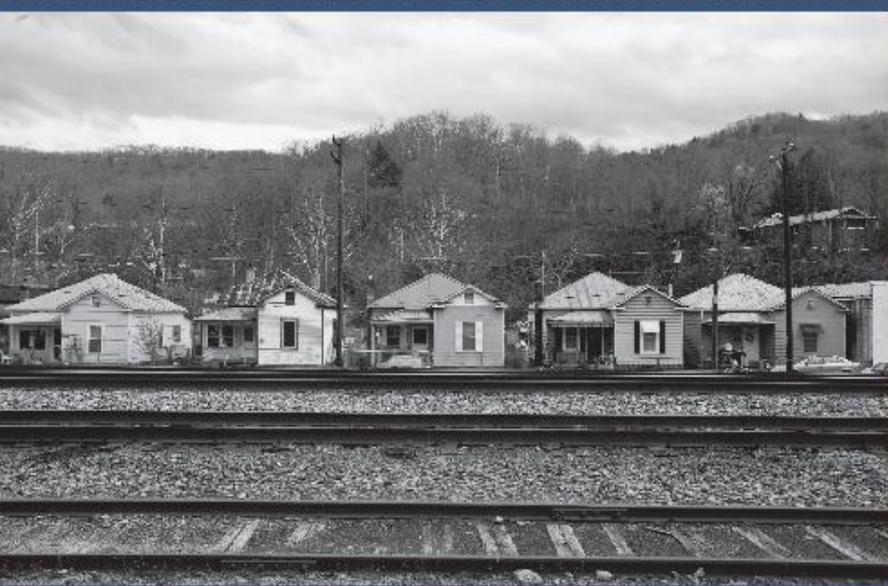
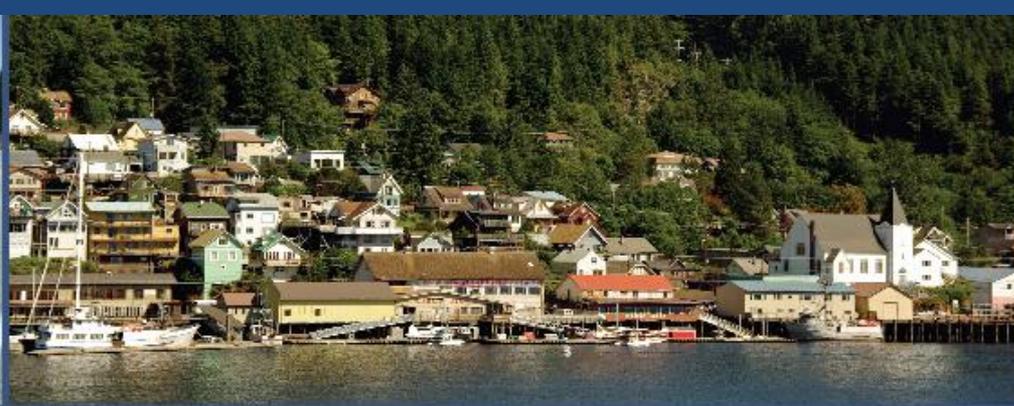


## *Enhancing Treatment Services*



**Telehealth is in Clients' Best Interest**





*Thank you*



National Frontier and Rural

**ATTC**

Addiction Technology Transfer Center Network  
Funded by Substance Abuse and Mental Health Services Administration

[www.nfarattc.org](http://www.nfarattc.org)