1) What is telepsychiatry?

Telespsychiatry is psychiatric care delivered by videoconferencing.

2) Why telepsychiatry?

a) Shortage of psychiatrists
   i) 1 mental health provider for every 790 individuals
   ii) Approximately 4,000 (mental) health professional shortage areas (HPSAs)
   iii) 55% of the country’s 3,100 counties have no practicing psychiatrists, psychologists or social workers
   iv) Psychiatrists to population ratio – 1:30,000.

b) Quality of care/specialist care
   i) 80% of psychotropic meds are prescribed by primary care providers
   ii) Primary care providers have no formal training in diagnosing and treating mental illnesses, and wrong diagnoses and/or treatment can worsen a patient’s condition
   iii) Psychiatrists have specialized training necessary to best manage psychiatric conditions and achieve best outcomes
   iv) Having care delivered by a specialist allows for more leeway by pharmacies as well as regulatory bodies assessing your facility’s services

c) Rural areas
   i) The greatest need for services is in areas that are hard to access
   ii) Doctors that do agree to perform on-site visits are not going to travel to the facility often, and will generally not be available in between visits

d) Greater accessibility
i) Telepsychiatry makes it possible to maximize the impact of available psychiatrists

ii) Telepsychiatry makes it possible to see residents in rural areas, solving the geographical mismatch between where clinicians are and where resident care need is

iii) Telepsychiatry makes it possible to see residents whenever there is a need for an evaluation, which often occurs in between visits, and after hours and weekends

iv) Telepsychiatry makes it possible to have psychiatric care available all of the time

3) Is it allowed and accepted?

a) Regulatory bodies
   i) Approved as a form of service delivery by the State
   ii) Facilities are commended for having services available

b) Insurance companies
   i) Approved and paid for by Medicaid
   ii) Approved and paid for by Medicare in rural areas (HPSAs)
   iii) Increasing number of commercial payors are coming on board

c) Residents
   i) Residents appreciate the availability of care, and that they can see the clinician whenever it is needed
   ii) Residents appreciate not having to travel and wait in the doctor’s office to get their care
   iii) Residents are very accepting of seeing clinician over video, and acclimate to it very quickly and easily
   iv) Residents feel as though the clinician is really “there”
   v) Telepsychiatry is suitable for assessing and treating all types of issues, including dementia and psychosis

d) Families
   i) Families also appreciate the availability of care of the resident
   ii) Families appreciate that the care is being provided to the resident by a highly trained specialist
   iii) Families appreciate that they or their loved one do not have to travel and wait in the doctor’s office
   iv) Families can conveniently be involved in the care of resident by also being present for the visit via videoconference (multiple people can join a videoconference visit), even if they are home or in another town or state

e) Staff
   i) Staff loves and takes advantage of clinician availability
ii) Staff appreciates the rapid response time to requests, such as GDRs, med reviews, and addressing new resident symptoms or medication side effects
iii) Staff is satisfied by the rapid turn-around time on documentation (which helps with compliance), which is also helpful for collaboration of care (primary care provider is able to see the rationale for the recommended medication changes)

4) What is required by the facility?

a) Computer (laptop or desktop) and webcam
b) Good internet connection
c) Staff to bring/present the resident to the session, and provide a brief update on how resident is doing/current issues
d) Giving clinician access to medical record (through EMR login permission), or by presenting/faxing face sheet (for new evaluations), medication list, etc.

5) How does it actually work?

a) Each facility has a designated clinician, so there is continuity of care and clinician can get to know residents and staff
b) Scheduled videoconference rounds are arranged monthly (or biweekly or weekly), so that all residents are seen each month
c) Clinician is available for 24/7 for urgent evaluations, new admissions, residents returning from hospital, etc.
d) Residents can be brought to the room where the computer is set up, or laptop can be brought on a cart to resident’s bedside
e) Notes are sent by the next day, and orders are given with rationale for changes, as well as ensuring that diagnoses justify the medications being prescribed

6) Who is My Psychiatric Partner, and why is it different?

My Psychiatric Partner (MPP) is a national telepsychiatry company that was founded in 2009, and performs direct-to-consumer (DTC) telepsychiatry care to people in the comfort and privacy of their own homes. Its Long Term Care (LTC) service, started in Ohio in 2013, now also serves Pennsylvania, Indiana, and New York.

MPP is unique because of its focus on simplicity, ease of use, and commitment to its customers. The DTC service, by being cash pay, eliminates all interference from third parties. The care is between MPP and its patients, with a focus on accessibility, affordability, privacy, convenience, and getting people better. The LTC service has a similar focus on the customer, but in this setting the customer is the facility we contract with. Our primary objective is meet all of the facility’s
behavioral health needs. This means more than just seeing the residents - it means helping each facility achieve its goals and initiatives (CMS, 5-Star ratings), staff training, and maximizing financial outcomes. For example, in many circumstances facilities can collect an “originating site fee” for hosting the telepsychiatry visits.

7) What are the benefits to the facility?

The numerous benefits come as a result of MPP’s philosophy – we are committed to the facility as the customer, which goes far beyond just resident care. See below for an overview of benefits.

**My Psychiatric Partner’s LTC Service**

- Rapid Access
- Better Baselines

Why Extended Care Facilities (ECFs) Partner with MPP

Better Access to Specialty Care
- MPP provides ECFs with greatly improved access to psychiatric care through real-time videoconferencing to the facility.
- ECFs residents can receive urgent psychiatric assessments 24/7 by calling our toll-free number, as well as non-urgent evaluations and routine follow-up care on a scheduled basis.
- MPP’s psychiatric care is of the highest caliber and is personally overseen by their Medical Director, a Harvard-trained psychiatrist with 20 years experience consulting to and working in ECFs.

Better Financial Outcomes
- MPP works with and educates ECF staff to better identify residents that would benefit from psychiatric services.
- MPP helps ECFs maximize reimbursement by establishing and documenting increased clinical complexity for higher RUG scores.
- MPP diligently assists ECFs with important CMS initiative goals and 5-Star criteria such as reducing antipsychotic and anxiolytic usage, assuring proper diagnoses for antipsychotics when needed, and avoiding rehospitalizations.
- MPP’s telepsychiatry reduces ECFs travel and staffing costs and inconvenience by not having to send residents out for appointments.
- MPP’s involvement helps create an improved milieu in the ECF by decreasing resident behaviors, improving the facility’s appeal to families selecting an ECF in a competitive marketplace.
Better Baselines for Residents

- MPP proactively stabilizes ECF residents in the facility so that fewer emergency room visits and psychiatric hospitalizations are necessary.
- ECFs receive behavioral intervention recommendations from MPP to aid in resident management and minimize PRN medication usage.
- MPP assists with pharmacy Gradual Dose Reduction (GDR) requests, helping to improve documentation and maintain resident stability.
- ECFs experience reduced adverse incidents, such as resident-to-staff and residents-to-resident altercations, as a result of residents being more stable behaviorally.
- ECF residents’ continuity and quality of care is enhanced through MPP’s approach of one clinician rather than multiple providers changing residents’ psychiatric medications.
- MPP’s secure, cloud-based medical record system allows our clinicians to always know about ECF residents’ medications, issues and progress, in the event that coverage from another clinician is ever needed.

Better Collaboration with Caregivers

- MPP provides documentation of every patient encounter for inclusion in residents' charts to ensure compliance, as well as good communication and collaborative care with other providers.
- MPP educates ECF staff about psychiatric disease processes and psychiatric medication usage through MPP’s live trainings via videoconferencing, so staff members at home can also benefit.
- MPP utilizes its technology to help measure ECF, resident, and family satisfaction related to the service, and will share and utilize this information in order to continually improve its service.

Partial List of Services Provided

- MPP provides webcams if necessary to provide this service at the ECFs.
- MPP trains all users of the technology, and provides ongoing tech support.
- MPP has an MDS Consultant available to work with ECFs’ MDS nurses to optimize coding and reimbursement.
- MPP’s clinicians collaborate with ECFs’ primary care physicians and/or medical directors to coordinate residents’ care.
- MPP assists with statements of expert evaluations for guardianship, and filling out of hospital transfer forms if needed.
- MPP creates and administers surveys to measure resident, ECF and family satisfaction.

8) Address additional presentation objectives, and Q & A.
9) Thank you!