

Growing Network Readiness for Billable Telepsychiatry Services

Kyra Munzenmaier BS
USF MCOM- LVHN Campus

Edward R. Norris MD, FAPA, FAPM
Lehigh Valley Health Network, edward.norris@lvhn.org

Jennifer Macfarlan MPH
Lehigh Valley Health Network, jennifer.macfarlan@lvhn.org

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Kyra Munzenmaier, BS; Dr. Edward Norris, MD; Jennifer Macfarlan, MPH

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Lehigh Valley Health Network, Allentown, PA

Introduction

- **Telepsychiatry:** using technology to provide mental health services from a distance¹
 - real-time
 - store-and-forward
 - remote patient monitoring
- **Primary use at LVHN:** Psychiatric Evaluation Service (PES)
- **Compared with face-to-face care:**
 - clinical outcomes and healthcare costs are equal or superior²
 - high rates of patient satisfaction²
- **Provider satisfaction less clear due to various concerns²**
 - therapeutic rapport³
 - inexperience with telepsychiatry³
 - quality of care⁴
 - negative perception of patient satisfaction⁴

Results

- **Participants:** 53 emergency physicians, 27 pediatricians, 26 family physicians, 24 internists, 13 psychiatrists
 - Users were slightly younger than nonusers (median age 42 versus 46) and had slightly fewer years of experience (median 9 years versus 15 years).
- **30% reported telepsychiatry use in the past 12 months (figure 1)**
 - 78% would use telepsychiatry to care for their patients
- **Perceived benefits of telepsychiatry:** improved access to care (78%), continuity of care (65%), and travel time (48%)
- **Perceived barriers to telepsychiatry use:** patient preference, lack of training, and strength of evidence base (figure 2)
 - 31% disliked loss of personal contact; 54% were not concerned about this
 - 68% felt patients prefer to see their doctors in person; more users agreed (71%) than nonusers (66%)
 - 65% felt patients receive better quality of care in person; 24% of users were unsure
 - 79% unsure if current Medicare rate is adequate; 90% of remaining felt it was inadequate
 - 68% disagreed that “Telepsychiatry is not an efficient use of my time.”
- **General lack of knowledge regarding telepsychiatry reimbursement, potential applications, and clinical benefits**

Problem Statement

We aim to gain a greater understanding of physician attitudes towards telepsychiatry at LVHN.

Methods

- **Modified, previously-validated Robert Graham Center 2015 survey⁵**
 - Physician & Practice characteristics
 - Telepsychiatry use
 - Attitudes & Beliefs regarding telepsychiatry
- **“Users”:** physicians who had used or referred patients for telepsychiatric care in the last 12 months
- **Data analysis:** descriptive statistics stratified by user status and department

Figure 1: Telepsychiatry Use by Department

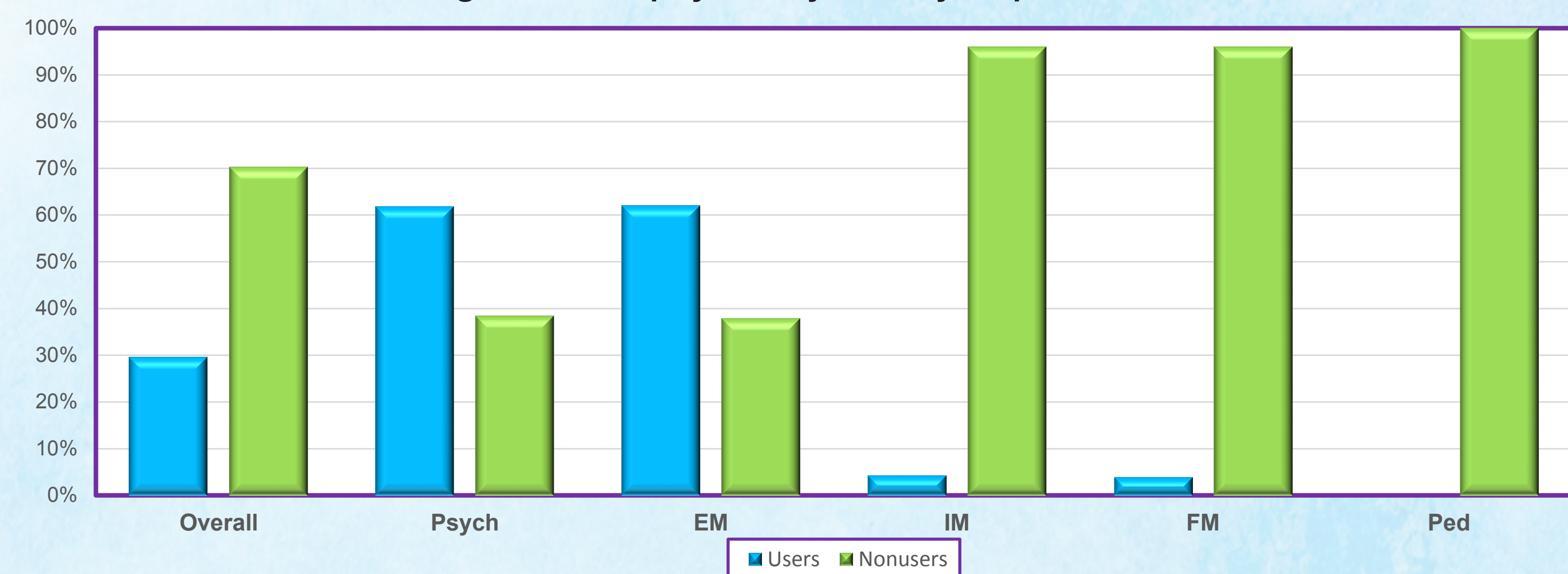
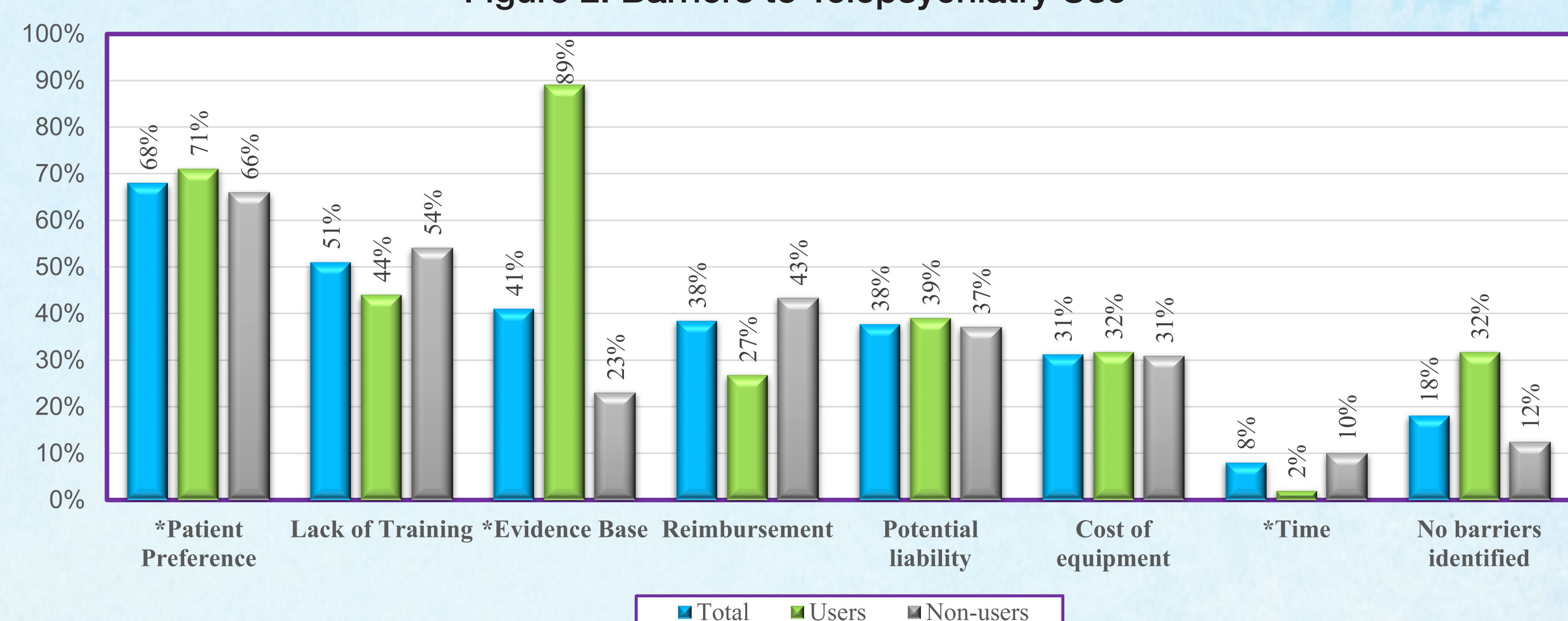


Figure 2: Barriers to Telepsychiatry Use



* Time indicates agreement with “Telepsychiatry is not an efficient use of my time.”
Patient preference indicates agreement with “Patients prefer to see their doctor in person.”
Evidence base indicates agreement with “More evidence on the effectiveness of telepsychiatry is needed.”

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Conclusions and Implications

- LVHN physicians may consider telepsychiatry time-efficient but not better than traditional care in terms of quality and patient satisfaction, which contradicts current evidence²
- Many physicians lack general knowledge of telepsychiatry and its potential benefits, indicating need for provider education

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