



Minnesota Psychiatric Society

Improving Minnesota's mental health care through education, advocacy, and sound psychiatric practice

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TELEHEALTH –

MPS strongly supports the increased telehealth access made available through Executive Order and its permanent placement as statute in Minnesota's health care system. Both providers and patients want access to telehealth to continue; we must act to ensure these changes are made permanent before they expire on June 30, 2021.

Telehealth expands access to health care

- Expands access to psychiatric care in rural and underserved areas in Minnesota
- Empowers patients to use modes that fit their needs and encourages involvement of family
- Improves access to care, reduces no-shows, minimizes the need for crisis care and allows greater continuity of care
- Decreases barriers to care including stigma, lack of transportation or childcare, and other avoidable barriers
- 25 states have expanded access to telehealth during the COVID-19 pandemic including MN, with 13 specifically requiring equal reimbursement of in-person and telehealth visits

Audio-only is an essential part of telehealth services and needs to be included in coverage

- Rural and underserved communities and elderly patients who do not have access to technology/internet need audio-only services
- Lacking access to audio-only is a barrier to care, and audio is an effective alternative to video and in-person care
- Audio-only is the preferred format for many patients with anxiety or trauma
- Seniors, people with serious mental illnesses, substance use disorders, the homeless, and those with disorganized thought processes, report that telephone access has been a "lifesaver"

Mental health & substance use disorder services need to be sustainable, which requires equal reimbursement rates for telehealth and in-person treatment

- Diagnosis and treatment are the same as in-person
- Telehealth has been shown to have equivalent outcomes to in-person treatment
- Systems and providers have already made significant investments in telehealth
- Ongoing technology, provider and staff, and infrastructure costs will continue to rise
- Telehealth can reduce costs for both patients and insurers by ensuring better medication compliance, fewer Emergency Department visits, and fewer admissions to inpatient units

Additional Recommendations

- Maintain removal of restrictions on the number of telehealth services that can be provided each week
- Prevent insurers from creating separate provider networks for in-person vs. telehealth services
- Ensure that these changes apply to both commercial and Medicaid plans
- Remove any point of service requirements