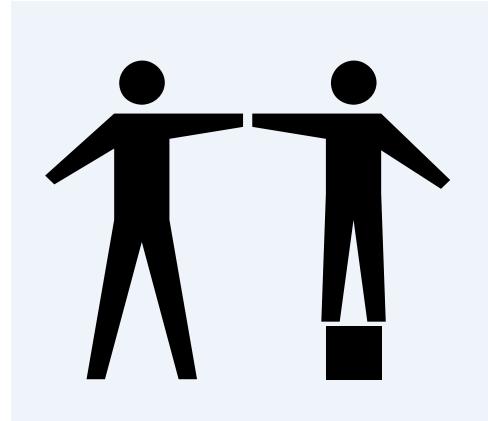# Improving Access to and Use of Telehealth

WHAT BEHAVIORAL HEALTH PROVIDERS NEED TO KNOW

WHY TELEHEALTH?

Telehealth may be a good option for certain individuals who experience greater risk factors for poor health outcomes,[1] particularly those that are socioeconomically disadvantaged.[2] Vulnerable populations include children, the elderly, uninsured and underinsured individuals, and those with certain medical conditions.[3] Telehealth, including telephone (audio-only) visits, can help reduce barriers in accessing in-person care as it relates to time, distance, and availability of certain health care providers and services.[4] Telephone may be the only means to ensure continuity of care when certain clients[5] are unable to attend in-person consultations or engage in video visits due to a lack of broadband connectivity or necessary equipment (e.g., a smartphone with an adequate data plan).[6, 7]

CLOSING GAPS IN ACCESS TO CARE

Behavioral health care providers are key players in building awareness of and assessing client readiness for telehealth. This helps bridge gaps in access to care and helps clients understand how telehealth fits into their overall care.[8] As the nation (including most of Maryland[9]) faces a workforce shortage of behavioral health care providers during a time of increasing need, telebehavioral health can improve access to vital services.[10, 11] Telebehavioral health benefits include, but are not limited to, helping certain families attend group therapy sessions (e.g., when family members live far away from each other), giving providers therapeutically relevant information about a client's home environment, and reducing the incidence of stigma as a barrier to care (by eliminating chance of being seen in a clinic or office).[12, 13]

With specialized training to address the family, environmental, and cultural factors that can impact health care access and quality,[14] behavioral health care providers are well

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equipped to help address common barriers in accessing telehealth services as it relates to not having a computer, internet, or private space in the home, inexperience using technology, and availability of assistive devices or interpreters for people with disabilities or limited English proficiency.[15, 16] Helping clients address these barriers could also prove to be therapeutically relevant.[17]

BROADBAND INTERNET AND COMPUTER ACCESS IN MARYLAND

Across Maryland, **53 percent** of low-income households (those with annual incomes below $25,000) lack broadband internet service at home and **48 percent** do not have a desktop or laptop computer [18]

ENSURING CLIENT READINESS FOR TELEHEALTH

1. **Screen clients to see if they have access to technology** (hardware, high-speed internet, adequate mobile data, or text messaging plans, etc.) and understand their skills/comfort-level with technology (do they go online to check email, shop, watch movies?)

    ▶   If you are already using a social needs screening tool (e.g., the AHC HRSN Screening Tool), consider adding a few technology-related questions like the ones here

2. **Refer clients to programs** that offer low-cost or free internet service and computer devices, like the Federal Communications Commission (FCC) Affordable Connectivity Program

    ▶   The Maryland Relay Program provides tablets pre-loaded with accessibility software to assist people with certain disabilities and the Maryland Department of Disabilities offers low-interest loans to help people purchase assistive technology devices and software (e.g., software that can read text out loud for the visually impaired)

    ▶   Most Maryland libraries allow patrons to borrow tablets, laptops, and mobile hotspots – refer to the Maryland Public Library Directory here

    ▶   More resources listed in **Helpful Links** below

3. **Help clients plan for a successful telehealth visit**, like giving them tips to ensure strong internet connections (e.g., moving as close to their router as possible during their visit)[19] or

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securing a safe and appropriate space for the visit (e.g., discourage driving during a virtual appointment, but understand a parked car may be the only private space for certain clients)[20]

PRACTICAL TIPS TO ENGAGE CLIENTS IN TELEHEALTH

▶ If a client has a virtual background when they first log on to the appointment, consider using it as conversation starter (e.g., "What made you pick that background?") before gently asking them to take it down (even temporarily) so you can document their location and take note of their surroundings[21]

▶ If your telehealth platform has a chat function, encourage clients to type in something they may be uncomfortable saying out loud[22]

▶ Meet clients where they are most comfortable using technology; some clients may prefer or be limited to telephone only, but others may become more comfortable with video visits over time when offered encouragement and support as they learn to use new technology[23]

▶ For clients with children, it may be difficult to find childcare; consider exploring shorter, more frequent meetings to minimize disruptions during therapy sessions[24]

HELPFUL LINKS

RESOURCES TO SUPPORT CLIENTS

Federal Communications Commission (FCC): Lifeline Program for Low-Income Consumers supports smartphone ownership for low-income Americans.

The FCC Household Broadband Guide compares minimum download speed (Mbps) needed for light, moderate, and high household use with one, two, three, or four devices at a time (such as a laptop, tablet, or game console).

Public Library Association: Digital Learn Program provides free online tutorials covering computer and internet basics.

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National Digital Inclusion Alliance: COVID-19 Resources curates a list of free and low-cost internet programs, including eligibility requirements and how to apply.

PCs for People provides free and low-cost computer and internet service to people enrolled in a government assistance program.

MHCC Telehealth Consumer Web Page includes a variety of downloadable educational flyers about telehealth, including frequently asked questions about virtual care.

TeleHealth Access for Seniors provides multiple guides for digital literacy basics, including translations in Spanish, Korean, Chinese, and Arabic.

RESOURCES TO SUPPORT THE DELIVERY OF TELEBEHAVIORAL HEALTH

Telehealth for Behavioral Health Care is a collection of online resources offered by the U.S. Department of Health and Human Services to guide providers as they begin offering telebehavioral health services.

The National Association of Social Workers has a dedicated webpage that outlines legal considerations for social workers delivering virtual mental health services.

The Association of Social Work Boards provides a report and links to state regulations on tele-social work.

MHCC Telehealth Virtual Resource Center has a variety of information and tools to help providers implement or expand telehealth services.

Questions?
Contact: Kelly Scott, Program Manager
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[1] Health Affairs, *Seizing the Moment for Telehealth Policy and Equity*, September 2021. Available at: www.healthaffairs.org/do/10.1377/forefront.20210909.961330/full/.

[2] The National Institutes of Health defines an individual as being *socioeconomically disadvantaged* if they meet two or more of the following criteria: were or currently are in the foster care system; were or currently eligible for the Federal Free and Reduced Lunch Program for two or more years; have/had no parents or legal guardians who completed a bachelor's degree (see the U.S. Department of Education); were or currently are eligible for Federal Pell grants; received support from the Special Supplemental Nutrition Program for Women, Infants and Children as a parent or child; grew up in a.) a U.S. rural area, as designated by the Health Resources and Services Administration Rural Health Grants Eligibility Analyzer, or b) a Centers for Medicare and Medicaid Services-designated Low-Income and Health Professional Shortage Areas. More information is available at: www.niaid.nih.gov/grants-contracts/nih-redefines-socioeconomic-disadvantage.

[3] Columbia University Irving Medical Center, *High Risk, Underserved, and Vulnerable Populations*. Available at: www.nursing.columbia.edu/research/research-areas-focus/high-risk-underserved-and-vulnerable-populations#:~:text=High-.

[4] See n. 1, *Supra*.

[5] For purposes of this flyer, "client" refers to individuals receiving services and support from various types of behavioral health providers (psychologists, social workers, therapists, etc.).

[6] Telehealth.org, *Audio-Only Telehealth Update: A Classic Solution to a Modern Crisis*, October 2021. Available at: telehealth.org/audio-only-telehealth/.

[7] Center for Medicare and Medicaid Services, *Telehealth for Providers: What You Need to Know*, March 2021. Available at: https://www.cms.gov/files/document/telehealth-toolkit-providers.pdf.

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[8] Health Information Technology Quality, Evaluation, and Information Center, *Telehealth Considerations and Strategies for Special and Vulnerable Populations*, October 2020. Available at: hiteqcenter.org/Resources/Privacy-Security/HIPAA/telehealth-considerations-and-strategies-for-special-and-vulnerable-populations.

[9] The majority of Maryland counties are designated a mental health shortage area in either all or part of the county (with the exception of Carroll and Howard). More information is available at: www.ruralhealthinfo.org/charts/7?state=MD.

[10] National Alliance on Mental Illness, *Telehealth*. Available at: www.nami.org/Advocacy/Policy-Priorities/Improving-Health/Telehealth.

[11] Rural Health Information Hub, *Health Professional Shortage Areas: Mental Health, by County, 2022 – Maryland*. Available at: www.ruralhealthinfo.org/charts/7?state=MD.

[12] Yale Medicine, *Why Telehealth for Mental Health Care Is Working*, September 2021. Available at: www.yalemedicine.org/news/telehealth-for-mental-health.

[13] American Psychiatric Association, *Telepsychiatry*. Available at: www.psychiatry.org/psychiatrists/practice/telepsychiatry.

[14] Social Work in Health Care, *Social workers in integrated health care: Improving care throughout the life course*, December 2018. Available at: uncprimecare.sites.unc.edu/wp-content/uploads/sites/654/2019/01/Social-workers-in-integrated-health-care-Improving-care-throughout-the-life-course.pdf.

[15] Journal of Medical Internet Research, *Digital Health Equity and COVID-19: The Innovation Curve Cannot Reinforce the Social Gradient of Health*. Available at: www.ncbi.nlm.nih.gov/pmc/articles/PMC7268667/.

[16] U.S. Department of Health and Human Services, *Health Equity in Telehealth*, February 2022. Available at: telehealth.hhs.gov/providers/health-equity-in-telehealth/.

[17] Cummins Behavioral Health Systems, *Teletherapy Tips: Best Practices for Engaging Behavioral Health Consumers over Phone and Video,* April 2020. Available at: www.cumminsbhs.org/teletherapy-tips/.

[18] The Abell Foundation, *Disconnected in Maryland: Statewide Data Show the Racial and Economic Underpinnings of the Digital Divide*, January 2021. Available at: abell.org/publication/disconnected-in-maryland/

[19] See n. 8, *Supra.*

[20] University at Buffalo, School of Social Work. *Telehealth is Here to Stay: Now Let's Do It Well*, September 2021. Available at: www.insocialwork.org/telehealth-is-here-to-stay-now-lets-do-it-well/.

[21] *Ibid.*

[22] See n. 12, *Supra.*

[23] Wayne State University, School of Social Work, *Tips and Practices for Providing Telemental Health Services*. Available at: socialwork.wayne.edu/coronovirus/socialwork/telehealth.

[24] *Ibid.*

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