



Northwest (HHS Region 10)

MHTTC

Mental Health Technology Transfer Center Network

Funded by Substance Abuse and Mental Health Services Administration

Addressing Barriers and Highlighting Innovations in Telebehavioral Health

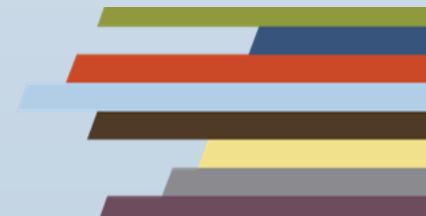
Sept. 17, 2020

BEHAVIORAL HEALTH INSTITUTE

HARBORVIEW
MEDICAL CENTER

UW Medicine  King County

SAMHSA
Substance Abuse and Mental Health
Services Administration



Behavioral Health Institute (BHI) Training, Workforce and Policy Innovation Center

The Behavioral Health Institute (BHI) Is a Center of Excellence where innovation, research and clinical practice come together to improve mental health and addiction treatment. The BHI established initial priority programs which include:

- **Improving care for youth and young adults with early psychosis**
- **Behavioral Health Urgent Care Walk in Clinic**
- **Expanded Digital and Telehealth Services**
- **Behavioral Health Training, Workforce and Policy Innovation Center**

Today's Presenters & Panelists

- Chris Fore, PhD, Director, Indian Health Service TeleBehavioral Health Center of Excellence
- Lucilla Mendoza, Washington Health Care Authority
- Michael Longnecker, Washington Health Care Authority
- Megan Ballew, PhD, Director of Behavioral Health, Lummi Nation
- Kathryn Akeah, American Indian Health Commission
- Jen Olson, American Indian Health Commission
- Micah Woodard, LICSW, BCD, Western Oregon Service Unit
- Melissa Hurt-Moran, MS, SUDP, Camas Path, Kalispell Tribe of Indians

About the Northwest MHTTC



Lydia Chwastiak, MD, MPH
PI and Co-Director



Christina Clayton, LICSW, CDP
Co-Director

The Mental Health Technology Transfer Center (MHTTC) Network is about technology transfer.

We disseminate and implement evidence-based practices for serious mental health issues into our field.

Our target workforce includes:

behavioral health and primary care providers, school and social service staff, and others whose work has the potential to improve behavioral health outcomes for individuals with or at risk of developing serious mental health issues.

PROUDLY SERVING

ALASKA, IDAHO, OREGON & WASHINGTON

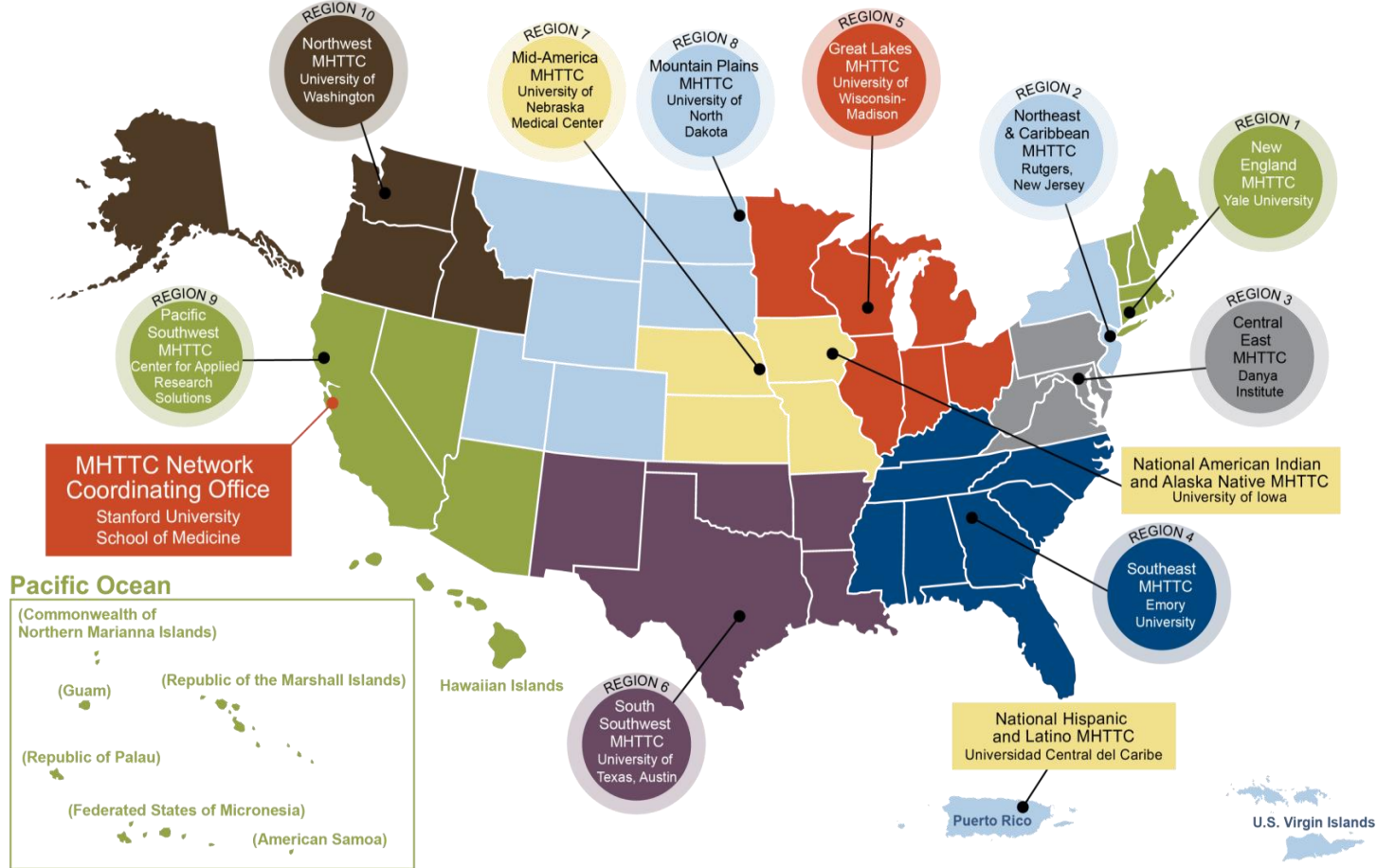




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MHTTC Network



About the Northwest MHTTC

Online Courses

Free online courses by the Northwest MHTTC

- Cognitive Behavioral Therapy for Psychosis (CBT_p) ePilot**
This 3-hour self-paced course, led by Dr. Sarah Kuperavich, is open to all types of providers and is designed to serve as a primer in foundational concepts related to Cognitive Behavioral Therapy (CBT) and its application to psychotic symptoms and experiences. [Learn more about the course.](#)
- The Psychiatrist's Guide to Population Management of Diabetes**
This 3-hour self-paced course is designed for psychiatric providers who treat patients with chronic illness and aims to increase provider knowledge of and confidence in the identification and management of diabetes and other cardiovascular risk factors. [Learn more about the course.](#)
- Violence Risk Assessment & Management in Community Mental Health Settings**
This 3-hour self-paced course provides the necessary tools for clinicians to assess, manage and stabilize risks of violence. [Learn more about the course.](#)

Registration
Our online courses are hosted on the HealthKnowledge.org platform. Register for any of these courses by clicking the links above or at [HealthKnowledge.org](#).

Research/Practice Briefs

Integrated Care for Older Adults with Serious Mental Illness and Medical Comorbidity: Evidence-Based Models and Future Research Directions

Collaborating TRC, Northwest MHTTC
Publication Date: May 26, 2019
Developed By: Northwest MHTTC

[DOWNLOAD](#)

Website with Events, Products & News

NEWS

Recovery LIVE! Supporting the Resilience of Black Men: Culturally Affirming and

UPCOMING EVENTS

- JUN 09** **DBT STEPS-A Online Lesson 10: Distress Tolerance - Radical Acceptance**
Click here to tune into the DBT STEPS-A YouTube Channel every Tuesday and Thursday morning at 10am
- JUN 11** **DBT STEPS-A: Summary Q&A for Students - Putting it All Together & Preparing for Summer**
Click here to tune into the DBT STEPS-A YouTube Channel every Tuesday and Thursday morning at 10am
- JUN 11** **Resources for Supporting the Mental Health and Well-being of Children and Families During COVID-19**
Resources for Supporting the Mental Health and Well-being of Children and Families During COVID-19

PRODUCTS

- Educator Wellness Webinar #4: Cultivating a Practice of Gratitude and Appreciation in Your School Community**
The Northwest Mental Health Technology Transfer Center and the Northwest PBIS Network are collaborating to bring you a FREE, 4-part webinar.
- Ambiguous Loss: Grieving in the Time of COVID-19, Followed by Live Q&A Session**
About this Resource: Life, as we know it just a few weeks ago, has been completely turned upside down. That feeling you are feeling just can't
- SMART Center 2020 Virtual Speaker Series - Dan Losen, JD, MEd**
The school mental health supplement to the Northwest MHTTC is excited to co-sponsor the UW SMART Center's 2020 Virtual Speaker Series.

Live Training

Psychological First Aid for Service Providers

Hosted By: Northwest MHTTC

Registration Deadline: May 18, 2020

[REGISTER](#) Need more information? Contact us at nwmhttc@uw.edu

Archived Webinars

Our Archived Webinars

Series Collections

- Integrated Care for Older Adults with Serious Mental Illness and Medical Comorbidity
- Recovery LIVE! Supporting the Resilience of Black Men: Culturally Affirming and
- Psychological First Aid Webinar Series

Behavioral Therapy/Evidence Based Treatments

- Clinical Innovations Webinar Series: Resilience and Cognitive Behavioral Therapy for Psychosis (CBT_p)
- Building Resilience in Cognitive Behavioral Therapy for Psychosis (CBT_p)
- Behavioral Assessment
- CBT for Anxiety (CBT-A)
- DBT Stepwise Treatment Manual

Cultural Considerations and Equity Topics

- Culturally and Linguistically Appropriate Care for Early Postmenstruation

Integrated Medicine

- Prevention of Primary Care (PCP) (2019)
- Management of Psychiatric and Behavioral Emergencies
- Behavioral Management

Clinical Care

- Training and Peer Support: Being Open to Service Model Shifts
- Review of Clinical Guidelines: Treatment, Assessment, Intervention, and Prevention

Peer Services

- Peer Support Services: A Roadmap
- Developing Peer Support Agencies: What to Consider When Working with Youth Peers
- The Provider Provider: Provider Informed Considerations for Individuals and Organizations
- Resilience and Strengths in Youth Peer Support Relationships
- Supporting and Empowering Youth Peer Support Specialists
- Supporting and Self-Care for Youth Peer Support Specialists



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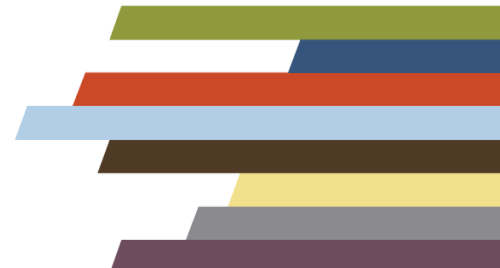
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UNIVERSITY of WASHINGTON
PSYCHIATRY & BEHAVIORAL SCIENCES
School of Medicine



Substance Abuse and Mental Health
Services Administration



Keep in touch with the Northwest MHTTC

Upcoming training

New online training

Resources & Research Updates



Visit us online:

www.mhttcnetwork.org/northwest



Get our newsletter:

bit.ly/nwmhttcnews



Email us:

northwest@mhttcnetwork.org



Follow us on social media:

[@NorthwestMHTTC](https://www.facebook.com/NorthwestMHTTC)



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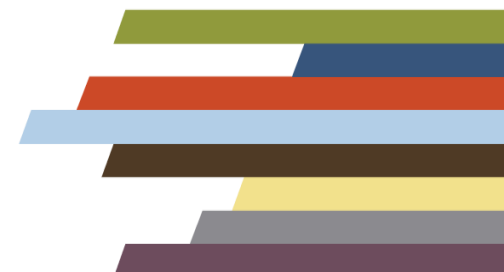
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UNIVERSITY of WASHINGTON
PSYCHIATRY & BEHAVIORAL SCIENCES
School of Medicine



SAMHSA
Substance Abuse and Mental Health
Services Administration



The MHTTC Network uses affirming, respectful and recovery-oriented language in all activities. That language is:

STRENGTHS-BASED
AND HOPEFUL

INCLUSIVE AND
ACCEPTING OF
DIVERSE CULTURES,
GENDERS,
PERSPECTIVES,
AND EXPERIENCES

HEALING-CENTERED/
TRAUMA-RESPONSIVE

INVITING TO INDIVIDUALS
PARTICIPATING IN THEIR
OWN JOURNEYS

PERSON-FIRST AND
FREE OF LABELS

NON-JUDGMENTAL AND
AVOIDING ASSUMPTIONS

RESPECTFUL, CLEAR
AND UNDERSTANDABLE

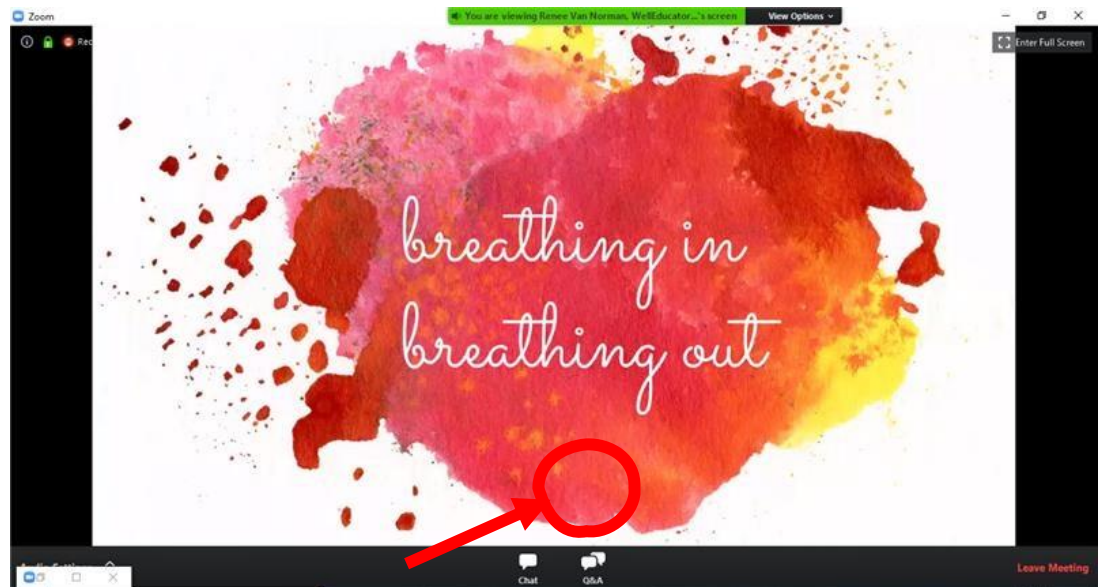
CONSISTENT WITH
OUR ACTIONS,
POLICIES, AND PRODUCTS

Adapted from: https://mhcc.org.au/wp-content/uploads/2019/08/Recovery-Oriented-Language-Guide_2019ed_v1_20190809-Web.pdf



Attendee Information

- This webinar is being recorded and will be posted.
- Participants are muted with videos off.
- Take note of the **toolbox** located at the top or bottom of your screen.
- Use Q & A feature to ask questions. Questions will be answered at the end of the presentation.
- Chat feature only allows you to discuss with presenters.





TELEBEHAVIORAL HEALTH CENTER OF EXCELLENCE

Considerations for Telebehavioral Health in Indian Country

Chris Fore, PhD
Director, IHS TBHCE

10/17/20

Summary of Emergency Changes

Regulatory

- Same – State Licensure is no longer required for anyone
- HIPAA requirements are currently relaxed regarding video platforms

Summary of Emergency Changes

CMS/Billing

- Telephone contacts are billable as Virtual Check-In
- “4-walls rule” is waived; in-home services can be reimbursed

Telebehavioral Health Consideration

Four Connection Scenarios:

PROVIDER	PATIENT
Clinic	Clinic
Home	Clinic
Clinic	Home
Home	Home

Telebehavioral Health Consideration (continued)

- Platform/Equipment
- Bandwidth
- Documentation
 - Prescribing
- Telehealth Coordinator

Telebehavioral Health Consideration (continued)

- Backup Plans
 - Clinical
 - Technology
- Sustainability

WA State HCA's Provider One Billing and Technical Assistance

- Michael Longnecker, Tribal Compliance and Operations Manager

HCA Office of Tribal Affairs

General Contact Information

Email: tribalaffairs@hca.wa.gov

Web:

<http://www.hca.wa.gov/tribal/Pages/index.aspx>

Main Phone: 360.725.9959

Fax: 360.725.1754

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 - michael.longnecker@hca.wa.gov | 360.725.1315
- Lucilla Mendoza, Tribal Behavioral Health Administrator
 - lucilla.mendoza@hca.wa.gov | 360.819.6575
- Lena Nachand, Medicaid Transformation Tribal Liaison
 - lena.nachand@hca.wa.gov | 360.701.6926
- Jovita Ramirez, Administrative Assistant
 - jovita.ramirez@hca.wa.gov | 360.725.9959

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• *North Sound region*

Vacant

- tribalaffairs@hca.wa.gov

• *King, South Sound, and South Cascades region*

Melissa Livingston

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WA State - Telemedicine and Telehealth – ProviderOne Billing

- The following 3 slides contain information for billing *telemedicine* and *telehealth* services to ProviderOne
- Information obtained from the following sources
 - [HCA ProviderOne billing guides](#)
 - [HCA COVID website](#)
 - [HCA ProviderOne Billing and Resource Guide](#) and [user manuals](#)
- The sources above are undergoing revisions during the Pandemic – if there is a discrepancy between these slides and any HCA document – the Office of Tribal Affairs defers to the HCA documents
- Telemedicine is defined in [WAC 182 531 1730](#)
- There is no WAC definition of Telehealth, HCA overviewed Telehealth in their [COVID Brief](#)

Telemedicine and Telehealth and ProviderOne during the COVID-19 Pandemic

- There are three different types of cycles pictured on this page
- We can translate these into different types of tele-services
 - The bicycle is *telemedicine*
 - The tricycle is *Skype* (telehealth)
 - The unicycle is a *telephone call* (telehealth)
- Prior to the Pandemic we were only allowed to ride a bicycle/telemedicine (some exceptions apply but they are out of scope for this exercise)
- During the Pandemic we are allowed to ride all three types of cycles
- NOTE: only a bicycle can be called a bicycle – for example
 - Zoom may be telemedicine or it may be telehealth
 - Zoom that is HIPAA compliant, real time audio and visual that meets the definition of telemedicine (link to definition) and telemedicine was covered before the Pandemic
 - Zoom that is not HIPAA compliant is not telemedicine (one of the defining variables of telemedicine is that it is HIPAA compliant), it is telehealth **and it is covered during the Pandemic**



Q. What services are covered by P1 for telemedicine due to the COVID-19 issue?

A. We have to split it up by category

Category	Is Telemedicine a covered service?	What Telemedicine services are covered?	Billing/Coding for Telemedicine
MEDICAL	Yes. Refer to the P1 Physician-Related Billing Guide , page 85 And the HCA Physical Therapy notice	The agency reimburses medically necessary covered services through telemedicine when the service is provided by a Washington Apple Health provider and is within their scope of practice.	<ul style="list-style-type: none"> For services provided via telemedicine, bill the code you would usually that denotes the service rendered (FAQ) (HCA does not follow CPT/HCPCS, HCA does not provide a 'code-set' for telemedicine services) Add modifier 95 after adding all other modifiers (eg UA/SE/25/etc) HCA's COVID team indicates that modifier CR is not required Place of Service code is 02
DENTAL	Yes. Tele-Dentistry is in the Dental Billing Guide	Teledentistry is not a specific procedure, but a broad variety of technologies and tactics used to deliver dental services	<ul style="list-style-type: none"> Use the regular ADA code from the dental billing guide, there is a code-set in the Dental Notice <ul style="list-style-type: none"> D0140 (Limited Eval), D0170 (followup appts), D9999 (Family Oral Health Eval for ABCD-certified providers), D027x (bitewings), D0220 (xrays) Add the Teledentistry code (D9995) Place of Service code is 02
MENTAL HEALTH	Yes. Refer to the Mental Health Billing Guide	For Both Mental Health And Outpatient SUD services: Telemedicine is covered as an alternative means to provide care in all Medicaid benefits, including behavioral health. (HCA COVID brief)	<ul style="list-style-type: none"> Use the regular CPT codes from the Mental Health Billing guide (HCA does not provide a 'code-set') Add modifier 95 after adding all other modifiers (eg. HE/SE/25/etc) HCA's COVID team indicates that modifier CR is not required Place of Service code is 02
SUD (Outpatient)	Yes. Refer to the SUD billing Guide		<ul style="list-style-type: none"> Use the regular CPT/HCPCS code from the SUD billing guide (HCA does not provide a 'code-set') Add modifier 95 after adding all other modifiers (e.g. HF) HCA's COVID team indicates that modifier CR is not required Place of Service code is 02

Q. What services are covered by P1 if rendered using Telehealth (other than telemedicine)* due to the COVID-19 issue?

A. We have to split it up by category

Category	Are services rendered over the telephone covered?	What services rendered over the telephone are covered?	Billing/Coding for services rendered over the telephone
Medical	Yes. Telephone E&Ms. Physician-Related billing guide p.47 HCA COVID FAQ adds Online Digital Evaluations (Brief, online E/M services via a secure platform)	Per the Physician-Related billing guide <i>The agency pays for telephone services when used by a physician to report and bill for episodes of care initiated by an established patient or by the patient's guardian. Report and bill for telephone services using the following CPT codes: CPT 99441-99443 (page 47)</i> HCA FAQ - CPT 99421-99423 (online digital evaluations) are now covered along with the telephone E&Ms	CPT code is 1. If you are a licensed provider who can bill an E&M code Telephone E&Ms - 99441-99443. Online digital E&Ms - 99421-99423 (FAQ) 2. Otherwise, Report the service modality code (CPT or HCPC code) as you would if the encounter was in person per the FAQ Per the HCA COVID FAQ - Use the POS indicator that that best describes where the client is. For example, the client is at home, then use POS 12. Modifier – Use (ADD) the CR modifier after adding all other modifiers (do not add the GT/95 – those are used only for telemedicine)
Dental	Yes. Refer to notice on HCA Bulletin	<i>In response to the circumstances surrounding COVID-19, the Health Care Authority (HCA) will cover CDT code D9992 (care coordination) to allow dentists to provide phone triage of clients with emergency dental needs (link) This service must be rendered by a Dentist. Webinar link</i>	CDT code D9992
Mental Health	Yes. <i>Apple Health is temporarily allowing BH services using a telephone or other means of electronic transaction to conduct an office visit. (link)</i>	Per the HCA notice - During this crisis, you can provide any modality in the Mental Health Billing Guide	CPT code is the regular CPT from the Mental Health Billing or SUD Billing guide, or – 99441-99443, to support access to care, Medicaid allows these telephone code to be used by any physician or other qualified provider, as defined by the policies under each benefit described in the notice to conduct a telephone call with the client; not just those who can report an E&M, as described in the official code definition. (However, <u>CPT 99441-99443 are not payable on SUD claims in P1</u>) Per the HCA BH COVID FAQ - The place of service indicator that best describes where the client is, i.e. “12” is home Modifier – Use (ADD) the CR modifier after adding all other modifiers (do not add the GT/95 – those are used only for telemedicine)
SUD (outpatient)	Yes, per the HCA notice (link)	Per the HCA notice - SAMSHA provided guidance on this issue. <i>There guidance is very permissive and is intended to support the delivery of care using all the technology modalities available during this crisis. See https://www.samhsa.gov/coronavirus for details</i>	Modifier – Use (ADD) the CR modifier after adding all other modifiers (do not add the GT/95 – those are used only for telemedicine)

* Per [HCA Clinical policy for COVID](#) and [HCA Behavioral Health for COVID](#), the other telehealth technologies may include on-line digital exchange through a patient portal; telephone calls, Face-Time; Skype; or email.

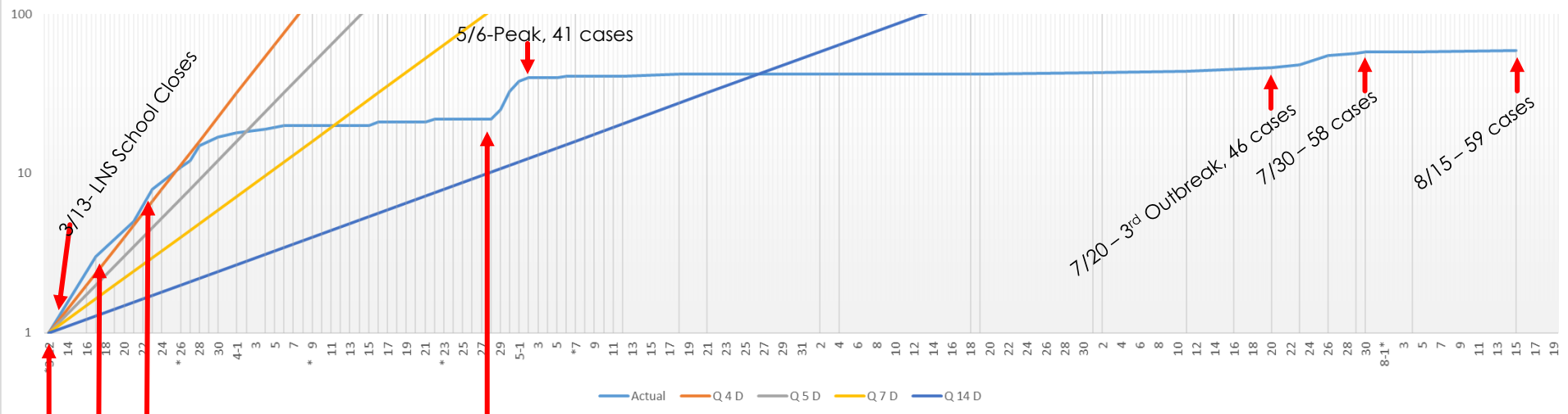
Lummi Nation Tele-behavioral health

IHCP Telehealth Training

Sept 17th, 2020

Megan Ballew, PhD

Total People Tested-Positive Lummi community, w Doubling Time Lines, by date & *wk



3/12 - Lummi's First case
 3/18 - Casino Closure
 3/22 - Shelter-in-place order

4/28 - 2nd Outbreak, 22 Cases

7/20 - 3rd Outbreak, 46 cases
 7/30 - 58 cases
 8/15 - 59 cases

Actual Q4 D Q5 D Q7 D Q14 D

Timeline of Initial Covid Impact on Lummi Behavioral Health Services

March 11th: Lummi leadership announces early release as “test” for emergency preparedness. Asks staff to take home anything needed to work from home. Most staff never returned to the office.

March 12th: First positive covid case at Lummi. Behavioral Health secures 25 professional Zoom accounts.

March 19th: Staff member from Behavioral Health tests positive. Approximately 20 clients and 10 staff exposed to person in previous week had to quarantine.

March 21st: All mental health services transitioned to telehealth. Clinicians called each client on their caseload, explaining telehealth services and helping schedule.

Current Lummi Behavioral Health Staffing

Administrative Staff: 1 Executive Assistant and 1 Administrative Assistant

Mental Health Program

- ▶ 5 Full Time Mental Health Counselors
- ▶ Recruiting 1 FT & 1 PT Counselor
- ▶ 1 psychologists (assessment)
- ▶ 3 Masters level interns
- ▶ 2 NWIC (AA/BA) interns

Crisis Outreach Program

- ▶ 1 Mental Health Counselor/Supervisor
- ▶ 1 Certified Peer Support Counselor

AWARE grant staff: focus on school aged youth/mental health

- ▶ 4 Mental Health Counselors on grant (includes non-clinical duties)
- ▶ 1 Parenting Specialist
- ▶ 5 Certified Peer Support Counselors
- ▶ 2 Youth Activity Specialists
- ▶ 1 Social Media Specialist
- ▶ 1 Cultural Coordinator (Elder)
- ▶ 1 Community Outreach (Elder)

Medication Assisted Therapy expansion grant staff: outreach & services for individuals who use opioids

- ▶ 2 recovery coaches
- ▶ 2 administrative staff

Lummi Behavioral Health Client Demand

BH MENTAL HEALTH ANNUAL MOONWALK ACTIVITY REPORT 2020

Month	2020 seen	2019 seen	net change	%Change	no show	cancel	<i>total noshow</i>
JAN	380	421	-41	-9.74%	167	275	<u>442</u>
FEB	469	256	213	83.20%	151	270	<u>421</u>
MAR	459	368	91	24.73%	211	284	<u>495</u>
APR	487	342	145	42.40%	139	159	<u>298</u>
MAY	450	370	80	21.62%	103	175	<u>278</u>
JUN	396	307	89	25.99%	120	226	<u>328</u>
JUL	482	233	249	106.86%	125	204	<u>329</u>
AUG	428	248	180	72.58%	119	195	<u>314</u>
SEP							
OCT							
NOV							
DEC							
Totals	<u>3551</u>	<u>2545</u>	<u>1006</u>	<u>39.53%</u>	<u>1135</u>	<u>1788</u>	<u>2905</u>

What innovations have worked?

Zoom platform

Digital signature

Providing clients with appropriate technology

Strong social media presence

Reduction of stigma for some clients

Staff check-ins multiple times per week

What barriers still exist?

Poor internet, wifi, cellular connection

Client access to technology

Privacy

Services with youth

Counselor wellness: adjusting to home
offices & isolation

Discussion Q & A



aihc
AMERICAN INDIAN HEALTH
COMMISSION FOR WASHINGTON STATE

What are Your Challenges & Innovations

...for Providers?

...for Clients?



Psychiatry Consultation Services for Washington State Healthcare Providers

Psychiatry Consultation Line (PCL)

for prescribing providers with adult psychiatry and/or addictions questions

877-WA-PSYCH (877-927-7924) | pclwa@uw.edu

Staffed 24/7

<https://pcl.psychiatry.uw.edu/>

Partnership Access Line (PAL)

for primary care prescribers with child and adolescent psychiatry questions

866-599-7257 | paladmin@seattlechildrens.org

8am - 5pm, Monday - Friday (excluding holidays)

www.seattlechildrens.org/PAL

PAL for Moms

for providers with behavioral health questions related to pregnancy and postpartum

877-PAL4MOM (877-725-4666) | ppcl@uw.edu

9am - 5pm, Monday - Friday (excluding holidays)

www.mcmh.uw.edu/ppcl

Psychiatry & Addictions Case Conferences

(UW PACC-ECHO)

for providers interested in didactic presentations and case-based learning

uwpacc@uw.edu

12:00-1:30 pm, Thursdays

ictp.uw.edu/programs/uw-pacc



Thank You!



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