

Meeting Students Where They Are Online: Developing a School Telehealth Program

November 4, 2021

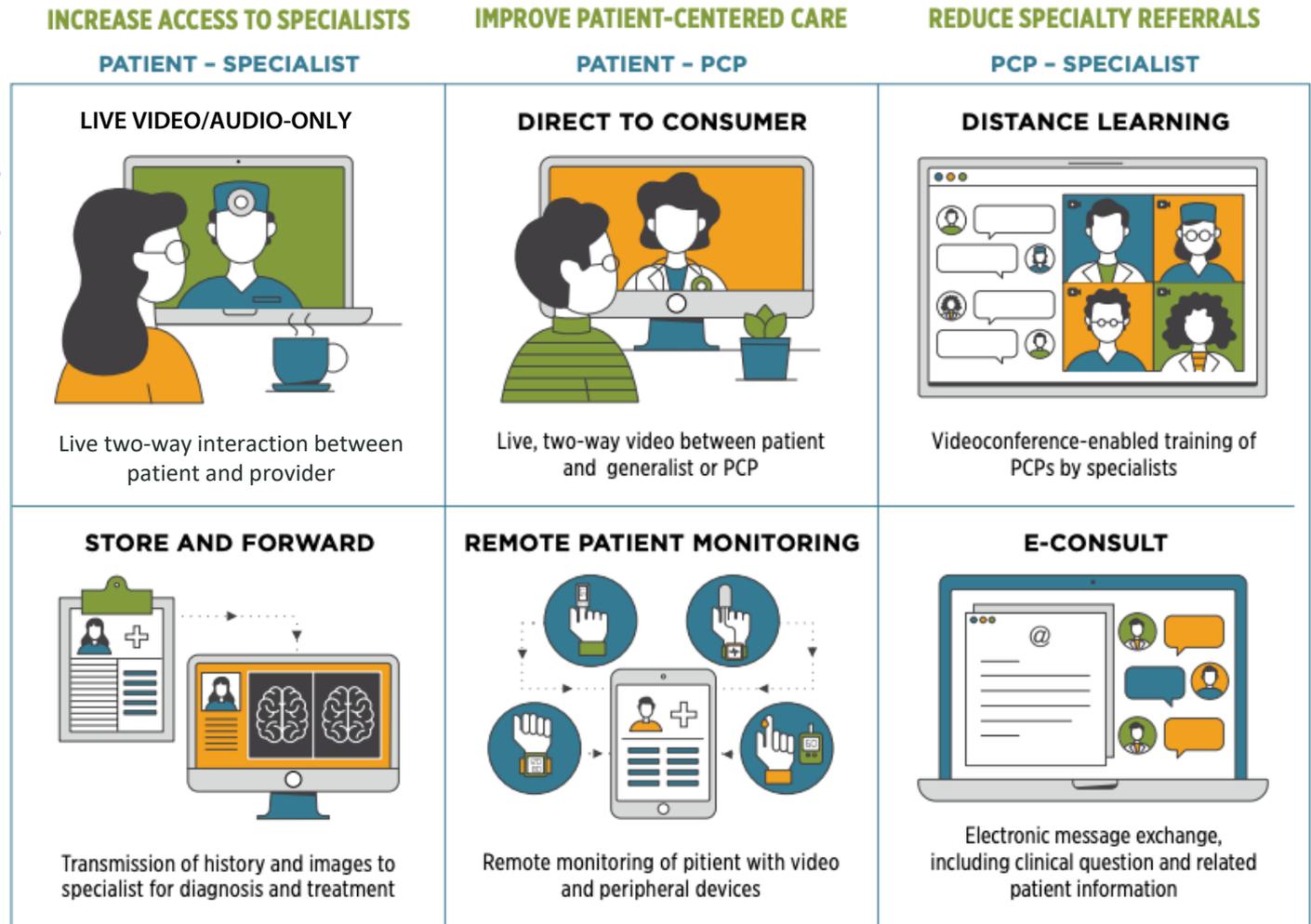


Agenda

- ▶ What is telehealth, and why use it with youth?
- ▶ Key considerations for school telehealth programs
- ▶ Overview of school telehealth models
- ▶ Policy considerations
- ▶ Coalition overview
- ▶ Take home messages
- ▶ Health plan support & resources for school children and adolescents

What is telehealth?

Telehealth: What It Is, How It Improves Care



Source: California Telehealth Policy Coalition, 2020.

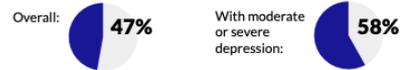
Why use telehealth with youth?



Young people make extensive use of digital health resources.

85% of young people have gone online to look for health information, and **40%** looked for people with similar health concerns.

Young people who have connected with a health provider online:



86% of those who connected with a health provider online have found it helpful.

And more are interested!

46% of those who have not connected with a health provider online are interested in doing so.

LAB NOTES Kara Gavin September 17, 2021 9:15 AM

Pandemic tripled telehealth use for Gen Z, but even digital natives want in-person care

Polls of teens and young adults taken before and during pandemic show most see the benefit of telemedicine, especially video and for minor ailments.



Getty Images



44%

of Gen Z and millennials say they may switch providers if telehealth visits aren't offered going forward.

- Comfort using technology for everyday needs and tasks
- Preference for telehealth or telehealth augmenting in-person care
- Potential for technology to create meaningful connections between youth and providers
- Ability to increase access to care—during public health emergencies and beyond

Sources:

<https://www.common SenseMedia.org/research/coping-with-covid19-how-young-people-use-digital-media-to-manage-their-mental-health>

<https://labblog.uofmhealth.org/lab-notes/pandemic-tripled-telehealth-use-for-gen-z-but-even-digital-natives-want-person-care>

<https://www.himss.org/resources/state-healthcare-report-uncovering-healthcare-barriers-and-opportunities>

Key considerations for starting up your telehealth program (1/3)

Strategic Priorities and Students Needs

- ▶ What are your school and partners' strategic priorities for health and wellness?
 - *"We want to **increase access to care**"*
 - *"Our health plan partners want to **improve quality of care**"*
 - *"We want to **rethink and transform how we provide care to students**"*
- ▶ Why is telehealth critical to your strategic priorities?
 - *"Telehealth can enable our contracted mental health providers to **provide after school care remotely**"*
- ▶ Who are your target students for telehealth, and what services and supports do they need?
 - *"We need telehealth to enhance wrap-around **health services and case management** for **newcomer** students in **grades 6 to 8** whose primary language is **Spanish**"*



Source: California Telehealth Policy Coalition, 2020

Key considerations for starting up your telehealth program (2/3)

School Health and Wellness Model of Care

- ▶ How can telehealth support your school's existing care models? (E.g., various wellness models, Coordination of Services Teams, etc.)
- ▶ Does your school have physical space that can serve as an access point where students can find information about telehealth resources?

School Administrative Resources

- ▶ What staff will own and coordinate this work?
- ▶ What staff do you have available for program management, billing, scheduling, and assisting families and students with technology, etc., if needed?

Provider Network

- ▶ Are you looking to augment existing programming with telehealth capabilities, or supplement your existing programming with other, remote providers?
- ▶ Are you looking to use a local provider network (i.e., through a CBO or local health care provider organization) or use a remote network offered by a vendor?

Key considerations for starting up your telehealth program (3/3)

Modalities of Interest

- ▶ If looking for solutions for direct student care, would audio-only, live video or asynchronous care serve your students best? Why?
- ▶ How can other solutions (e.g., Project ECHO, e-consult or phone consults) help your staff or providers with skill-building, closed-loop referrals or to reinforce the patient-centered medical home?

Student Location

- ▶ Where will students access services: at school, at home, somewhere else?

Marketing and Communications

- ▶ How will you advertise this program?
- ▶ How can your partners or vendors help with marketing?

Funding, Partnership and Sustainability

- ▶ How will you pay for this program?
- ▶ Does your vendor or provider have billing capabilities? Are grant opportunities available (i.e., FCC, USDA, MHPA and broadband grants)?
- ▶ What relationships or collaboratives do you have with health plans, providers and funders?

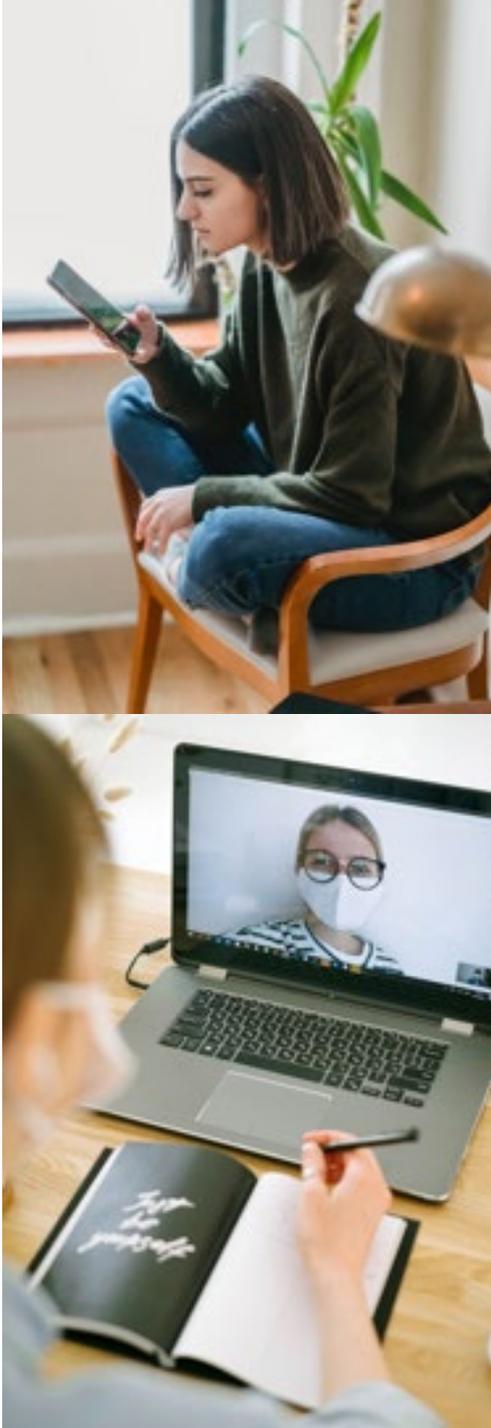
Key *technology* considerations when assessing a technology vendor

- **Platform Features:** What type of telehealth is your program interested in: live video, audio-only, patient-provider chat or something else?
- **Contracting:** Who will contract with the platform vendor: your school or a provider organization?
- **Language Access:** In what languages are services offered? Does the vendor easily allow for interpreters on the platform? Will you need another vendor to offer interpreter or translation services?
- **Internet Connectivity:** What bandwidth requirements does the vendor require? Do your students have access to broadband when they're not at school?
- **Consent:** How is consent captured, either in the platform or in the EHR? Does the telehealth vendor have minor consent capabilities, specific to California?
- **Privacy and Security:** Is the platform HIPAA and/or FERPA compliant?
- **Software Integration and Coordination:** Does your current EHR/practice management system support virtual visits? Can it integrate with a telehealth vendor platform for single sign-on, scheduling, coding and/or billing? Are clinical notes shared with other local providers for care coordination?



Source: California Telehealth Policy Coalition, 2020.

Other functional and technical requirements are likely to arise, depending on your needs



Three Common Models for School Telehealth

1. Clinic-sponsored
2. School/other community provider-sponsored
3. Vendor-sponsored

Clinic-sponsored

Description	<ul style="list-style-type: none"> • A local federally-qualified health center (FQHC) or rural health center (RHC) maintains a clinic location on the school campus and has telehealth capabilities
Provider Network and Offerings	<ul style="list-style-type: none"> • FQHC/RHC provider network
Payment	<ul style="list-style-type: none"> • Payment model may vary, but FQHCs/RHCs have billing capabilities • For Medi-Cal beneficiaries, the FQHC/RHC can bill at their Prospective Payment System (PPS) rate • May be in-network with commercial plans, or refer out for students on commercial plans
Vendor Platform Management	<ul style="list-style-type: none"> • FQHC/RHC likely uses their own telehealth vendor
EHR/Health Record Integration	<ul style="list-style-type: none"> • FQHC/RHC uses an electronic health record (EHR) • EHR likely can integrate with telehealth platform
Example	<p>La Clinica in Oakland</p> <ul style="list-style-type: none"> • Developed phone triage line for youth in Oakland during COVID-19 • Made video, phone and text-based care available during COVID at OUSD schools • Clinical services and health education available via online platforms • Clinic uses EPIC EHR for data capture • (Learning Policy Institute, 2020) <div data-bbox="1464 1136 1821 1268" style="text-align: right;">  </div>

School/other community provider-sponsored

Description	<ul style="list-style-type: none"> Local community-based organization (CBO), school staff or other health care organization provides health services to students
Provider Network and Offerings	<ul style="list-style-type: none"> CBO/health care organization’s provider network Offerings may vary depending on partner organization and school need (i.e., psychiatrists associated with a children’s hospital vs. LMFT/LCSW associated with a social services agency)
Payment	<ul style="list-style-type: none"> Payment model may vary; may be paid directly by general funds, billing, grant funding Providers may or may not have billing capabilities, depending on provider type
Vendor Platform Management	<ul style="list-style-type: none"> May vary, depending on whether school has a preferred platform, number of provider organizations engaged in school health Often CBO/other health providers capture notes in their organization’s data management platform, and the school’s system
EHR/Health Record Integration	<ul style="list-style-type: none"> Varies; CBO practice management system less likely to integrate with telehealth platform, whereas certified EHRs have capability to share records with other community providers
Example	<p>Tamalpais Union High School District Wellness Center</p> <ul style="list-style-type: none"> School district employs wellness coordinators at three schools to coordinate, schedule and provide some health services to students Scheduling and visit tracking maintained in school management system; clinical notes maintained in CBO systems Services paid for from in-kind donations, general funds, grant funds; not currently billing to any health care payers <p>(TUHSD Wellness, 2021)</p>



Vendor-sponsored

Description	<ul style="list-style-type: none">• Telehealth vendor provides remote panel of providers
Provider Network and Offerings	<ul style="list-style-type: none">• Vendor’s provider network• Offerings may vary depending on partner organization and school need (i.e., psychiatrists associated with a children’s hospital vs. LMFT/LCSW associated with a social services agency)
Payment	<ul style="list-style-type: none">• Payment model may vary• Vendor more likely to have billing and coding capabilities within EHR
Vendor Platform Management	<ul style="list-style-type: none">• Vendor uses its own proprietary or other platform
EHR/Health Record Integration	<ul style="list-style-type: none">• Varies, depending on vendor platform, school, other CBO technical capabilities
Example	<p>San Bernardino City Unified School District partnership with Hazel Health</p> <ul style="list-style-type: none">• At school, school nurse helps coordinate and schedule visits with telehealth vendor’s remote panel of mental health providers• Vendor provides schools with equipment (iPad, telehealth cart, medication cart) and workflow trainings• From home, students can connect with a provider• Paid using LCAP and LCSSP grant funding• Similar partnerships in other communities supported by local Medi-Cal Managed Care Plan <p>(Hazel Health, 2021)</p> <div data-bbox="1151 1110 1837 1358"><p>Healthcare for all students at San Bernardino City Unified School District</p><p>Hazel Health has partnered with San Bernardino City Unified School District to expand student health services. When your student is feeling sick, they can connect with Hazel for same-day care.</p><p>Sign Up Now</p></div>

Forthcoming state investments and regulatory requirements can be leveraged to support school telehealth

Dep't of Health Care Services Category	Activity	Go-Live Date
Children and Youth Behavioral Health Initiative	School-Linked Capacity/ Infrastructure Grants (\$550M)	January 2022
	Behavioral Health Service Virtual Platform, including E-Consult (\$749.7M)	January 2024
	Statewide Behavioral Health Network and Fee Schedule for School-Based Services	January 2024
Medi-Cal Managed Care Plan Incentives	Medi-Cal Behavioral Health in Schools Incentive Payments (\$400M)	January 2022

Dep't of Managed Health Care Category	Activity	Go-Live Date
Children and Youth Behavioral Health Initiative	Health plan coverage of medically necessary treatment of mental health and substance use disorder services delivered at school sites	January 2024 (contracts issues/amended/renewed)
Health Equity and Quality Benchmarks	Convene Health Equity and Quality Committee	March 2022
	Development of standard measures and annual benchmarks for equity and quality in health care delivery	TBD
	Publication of Health Equity and Quality Compliance Report	2025

These developments, coupled with the need for sustainability, may necessitate forming new collaborations

Collaborating with Payers and Providers: *Central Valley E-Consult Coalition Example*

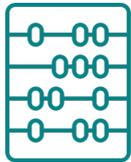


CVEC Goal

**Engaging FQHCs, Specialists
and Regional Stakeholders**

Activities

- Supporting Medi-Cal and uninsured patients
- Monthly Roundtables
- Provider, support, education and CME



**Policy and Reimbursement
Support**

- CA bill advancing PCP reimbursement
- Coverage of all FQHC patients
- Support of FQHC billing workflow



**Demonstrating Program
Innovation and Leadership**

- Program web site and provider FAQs
- Monthly bulletins highlighting progress
- Press releases sharing program leadership



**Dashboard of Provider
Adoption**

- Clinic and vendor reporting on utilization by provider, specialty and turnaround time



**Sharing E-Consult
Coalition Model**

- Sharing best practices and lessons learned from the Central Valley E-Consult Coalition

Central Valley E-Consult Coalition

Goal, participants and workflow

Goal – all non-urgent, routine, non-procedural referral requests go first to e-consult

PCPs maintain the patient relationship and can determine whether an e-consult is appropriate for the patient.

Plan Participants

- Anthem
- CalViva Health
- Health Net

Provider Participants

- Aria Health
- Altura
- Camarena
- Central Valley Indian Health
- Clinica Sierra Vista
- Family HealthCare Network
- Kings Winery
- Madera Community Hospital
- Omni Family Health
- St Agnes Medical Center
- Tulare Family
- United Health Centers
- Valley Health Team
- Valley Children's/ChildNet

E-Consult within Referral Workflow

Patient presents at clinic, needs specialty care advice.

PCP sends specialty referral request for patient.

Referral team determines request can be sent as an e-consult.

Remote specialty panel addresses e-consult request.

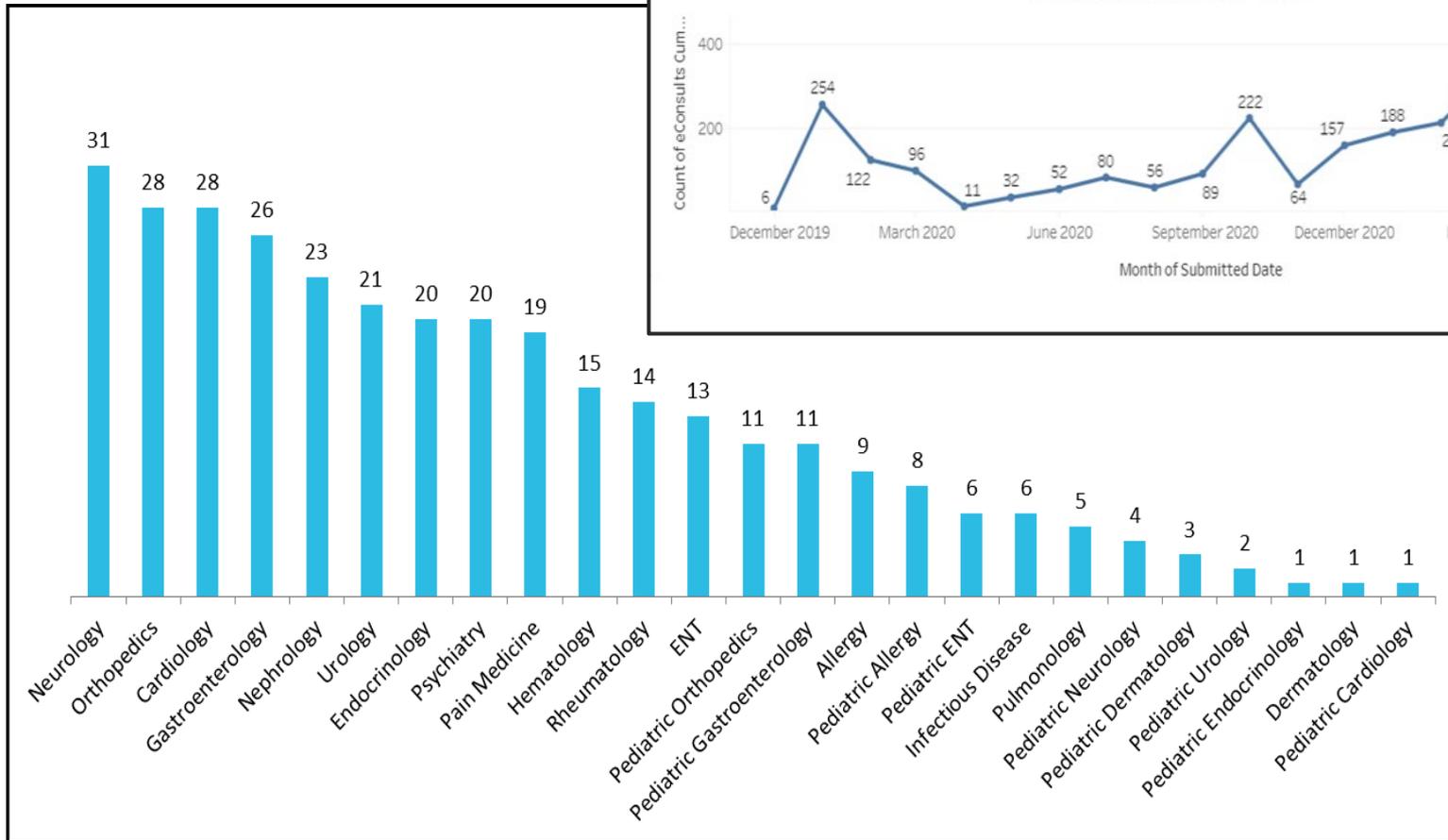
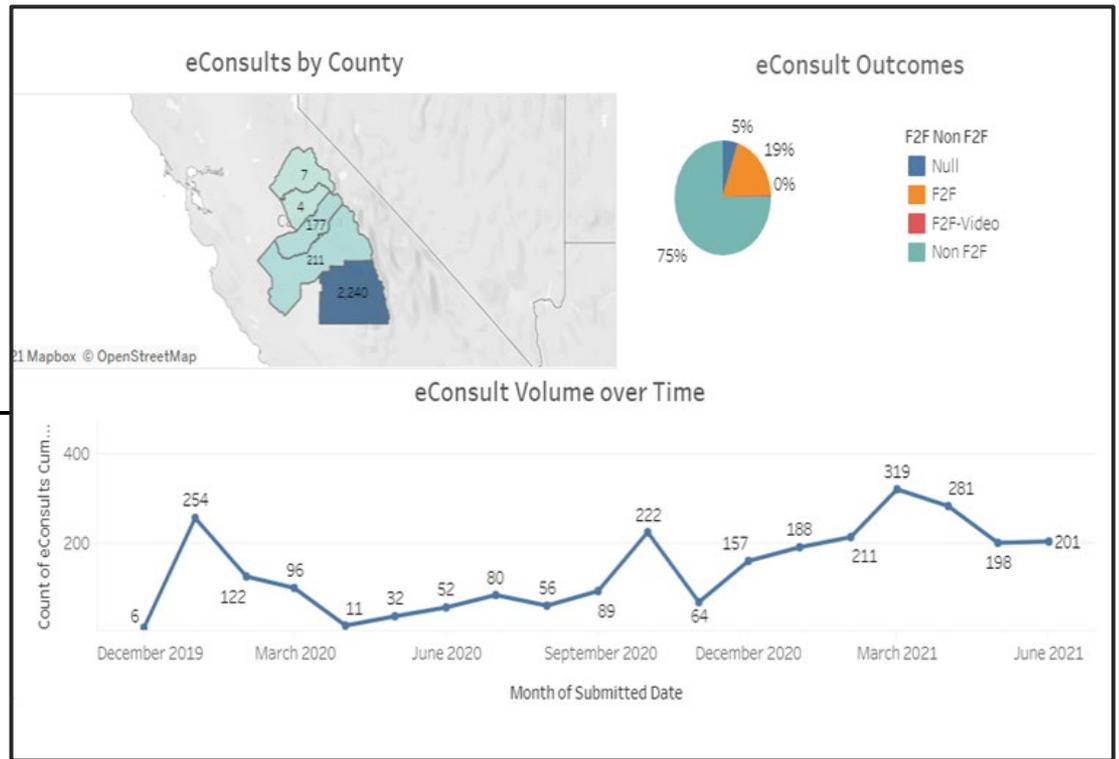
If patient needs to be seen in person, clinic refers patient.

CAPP psychiatry phone consult may take place for complex cases

CVEC

E-Consult Activity

September 2021



Continuing Medical Education (CME) *Education and Engaging Provider Partners*

E-Consult for Behavioral and
Mental Health Needs
November 9, 12-1 PT

One benefit of e-Consult is the educational value primary care providers find in participating.

A goal of the CVEC is to offer continuing medical education (CME) in e-Consult to support providers.

We are offering a session on November 9, E-Consult for Behavioral and Mental Health, presented by UCSF faculty Petra Steinbuchel, MD and Michelle Riederer, MD, including case examples of effective e-Consult communications in response to patients' behavioral and mental health needs.

Join us for this free session. Register here.

<https://www.surveymonkey.com/r/D3KTYPG>



Take Home Messages

- ▶ **Let your school's strategy and student health needs and characteristics shape your telehealth program.** What services would best support your students, and how can you tailor how they are delivered for maximal utilization?
- ▶ **Consider how technology can best support your existing programs.** How can technology help to complement or augment existing programs, whether by expanding services, helping with billing or assisting with coordination?
- ▶ **Consider coalition-building and other partnerships.** What organizations can you partner with to manage and/or fund this work? How can these partnerships build momentum and sustainability for your program?
- ▶ **Monitor policy developments for changes to reimbursement and program funding.** Policy is ever-changing, and lawmakers are looking to invest in student mental health, often through agencies you might not be tracking.



Health Plan Support & Resources for School Children & Adolescents

Kerina Mendoza
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Anthem Blue Cross | Medi-Cal

Our Mission

Improving Lives and Communities. Simplifying Healthcare. Expecting More.

Our Vision

Be the most innovative, valuable and inclusive partner.

Our Values

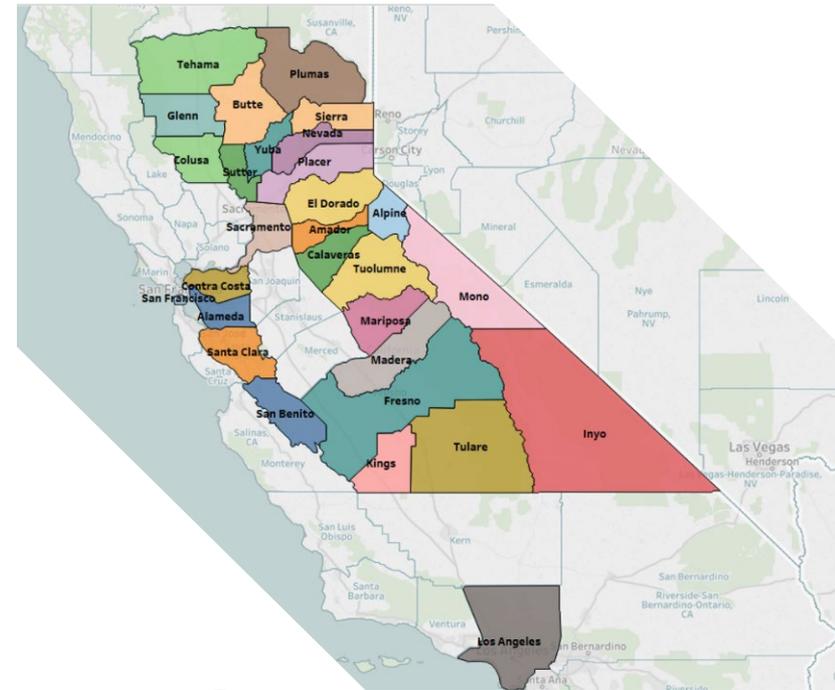
- Leadership
- Community
- Integrity
- Agility
- Diversity

1.3M

Members

29

Counties



Why School-Based Telehealth?



Students/Parents

- Access to care
- Improved health (especially chronic)
- Less time off work/travel
- Increased class time
- RX can be written



Schools

- Funding (some cases)
- Increased class time
- Better enrollment
- Peace of mind to reopen (COVID/Flu)



Nurses

- Improved care for students
- Higher engagement of care



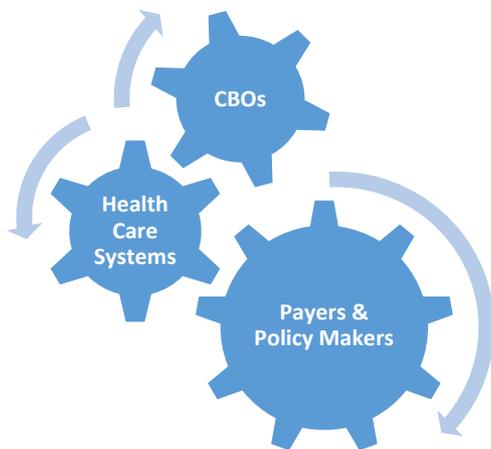
Health Systems/Provider Groups

- Access to grant funds
- Reimbursement opportunities based on state
- Specialty Referral opportunities
- PR/News stories

Central Valley E-Consult Coalition | Payer Collaboration



Managed Care Organizations come together to form a multi-payer collaborative approach to offer Safety Net Clinics in the Central Valley No-Cost access to E-Consults to expand access to specialty care.



Child & Adolescent
Psychiatry Portal



CONNECTING FOR CARE

Child and Adolescent Psychiatry Portal

DHCS Prop 56 funding allows for UCSF to expand access to the Central Valley through asynchronous telehealth to family care providers to assist in Behavioral Health treatment to Medi-Cal Children & Adolescents (0-18yrs).

Enroll: ucsf.co1.qualtrics.com/jfe/form/SV_9ZWBkA6K3Wif4gZ

1st Step

Teleconsultation
E-Consults

2nd Step

One time second step UCSF Psychologist
consultation

Resources

Website resources
Continuing medical education

SBHC Telehealth Resources

A program available for use with all your patients. Increases access to primary care and specialty telehealth, language barriers, and improves multi-cultural patients overall health equity.



- Medical
- Psychiatry
- Psychology



Live Health
Online

LiveHealth
ONLINE

- MAT
- Chronic Pain Program
- Mental Health

Brightearthhealth.com
Call: 1-844-884-4474
Fax: 1-415-458-2691

Bright Heart
Health



- Get help finding food, jobs, housing and other things you may need

Findhelp.org

Anthem
Community
Resource Link

findhelp.org



Patients receive comprehensive care, including:

- ✓ Medication Management
- ✓ Counseling
- ✓ Support Services



1 While supplies last.
CalHIPSO article - www.bit.ly/ABCkiosk

Shine Light On Depression

Shine Light on Depression is a web-based toolkit for school communities with free, ready-to-use resources to help raise awareness of depression and prevent suicide among youth.

ShineLightOnDepression.org

Create an account, www.erikaslighthouse.org/portal/, to gain access to free videos, print materials, and other resources.

GET IMMEDIATE HELP

Classroom Education

Family Engagement

Teen Empowerment

Complementary Resources

SLOD Friends

Best Practices

Classroom Education



Customizable classroom lessons to empower educators to lead effective depression awareness programs with middle and high school students.

Family Engagement



Family-community workshop materials to help adults and families talk about how to support teens.

Teen Empowerment



Teen club resources that empower students to lead activities and help each other by talking and listening.

What's Up With Opioids?



CLASSROOM PROGRAM

COMMUNITY WORKSHOP

LEARN (VIDEO)

COMMUNITY CONNECTOR

<http://www.WhatsUpWithOpioids.Org>



Questions

Thank you!

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