

## **Experiences with Telemental Health at Massachusetts FQHCs**

## **Overview**

The Community Care Cooperative (C3) is a Medicaid Accountable Care Organization that consists of 18 federally qualified health centers (FQHCs) across Massachusetts. C3 FQHC serve a total patient volume of over 395,000. With the rapid shift to telehealth initiated by the COVID-19 pandemic, we sought to understand experiences with virtual behavioral health care and integrated behavioral health to inform future use of virtual and hybrid care in FQHCs. Semi-structured interviews were conducted across nine C3 FQHCs in 2021 with patients, primary care providers, behavioral health specialists, and clinic administrators.

## **Summary of Findings**

- Assessment and Treatment. Several themes emerged highlighting both treatments that are appropriate and inappropriate for virtual care. Informants indicate that specific treatments (depression, anxiety, stable bipolar disorder) are amenable to telehealth while acute and uncontrolled conditions are better suited to in-person care. When exploring either virtual or hybrid care, interviewees note a need to further consider privacy concerns for the patient.
- High Quality Care. Interviewees overwhelmingly indicated telemental health's ability to increase accessibility to behavioral health care as well as promoting continuity for patients already within their care. The options to maintain both in-person and virtual care modalities has increased uptake of mental health services. It has also promoted increased patient-provider trust through more frequent visits and increased comfort for patients who are able to take appointments from home. Several informants also note increased efficiency in their care by being able to work on a greater number of mental health goals through deploying creative virtual interventions, intentional communication, and enabling deeper engagement between patient and provider.
- Need for Guidance and Intervention. Clinician interviews helped underscore several improvement opportunities for delivering telemental health. Notably, there is a need to increase a clinic's ability to promote hybrid care, a mix of both virtual and in-person care. This is especially true when considering behavioral health integration to the primary care setting. Specifically, care coordination and warm handoffs between behavioral health providers and primary care practitioners emerged as areas requiring improvement.

## **Need for Hybrid Care**

The need for hybrid care and better guidance for care coordination and warm handoffs serves as the research foundation for the Telehealth Playbook integrated behavioral health module and resources. Through this module we aim to provide foundational tools to spur conversations related to quality improvement which are rooted in principles of high quality, coordinated care between providers. The resources included are:

- Hybrid Behavioral Health Integration Pathway
- Care delivery principles for key moments across the care pathway
- Patient experience discussion tool
- Process mapping tool

