

Impact of COVID on Demand for and Access to Behavioral Healthcare

COVID Impact on Mental Health and SUD

Percent Reported	Anxiety	Depression	Serious SI
2019	8.1%	6.5%	4.3%
2020	25.5%	24.3%	10.7%
Increase	3X	4X	2X

- Symptoms of a trauma- and stressor-related disorder (TSRD) – 30.9%
- Started or increased substance - 13.3%
- Serious Suicide Considerations significantly higher among respondents
 - Unpaid caregivers for adults (30.7%)
 - Aged 18–24 years (25.5%),
 - Essential workers (21.7%)
 - Hispanic (18.6%)
 - Black (15.1%)

https://www.cdc.gov/mmwr/volumes/69/wr/mm6932a1.htm?s_cid=mm6932a1_x

Member Survey: Economic Impact of COVID-19 on Behavioral Health Organizations

Organizational Viability and Access to Care for Millions is at Stake

Without Congressional action, revenue shortfalls and service cuts will get worse.



On average, organizations have lost **22.6%** of their revenue during COVID-19.



39% believe they can only survive six months or less.



32% received funding from the first round of provider relief funding

Capacity is Diminishing:

Behavioral health organizations are struggling financially, resulting in reduced capacity to deliver services.

Laid off employees  **26%**

Furloughed employees  **24%**

Decreased hours for staff  **43%**

54%

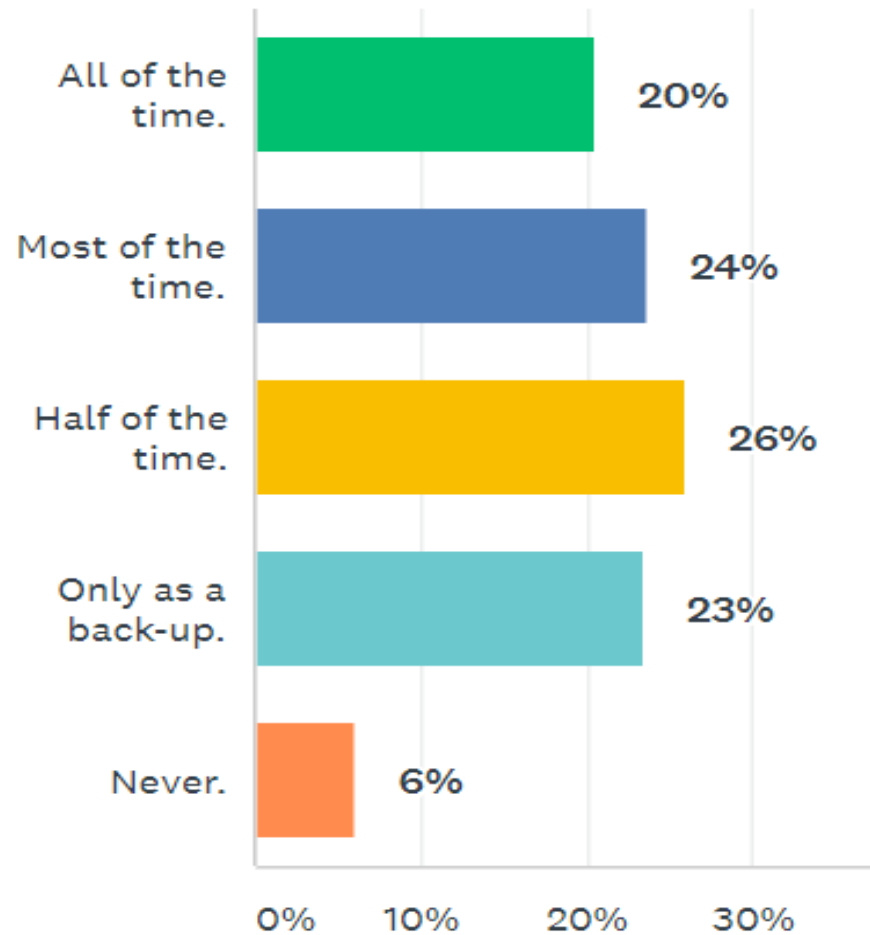
of organizations have closed programs.

65%

have had to cancel, reschedule or turn away patients.

Methodology: This poll was conducted between August 17-September 1, 2020 among a national sample of 343 NCBH Members. The interviews were conducted online. Results from the full survey have a margin of error of plus or minus 5%.

If telehealth remained available after the pandemic ends, would you prefer to continue using it instead of in-person visits?



**70% would use telehealth
for half or more of their
visits.**

“It hard to get to that office weekly. It takes about 2 hours out of my day just getting there and back.”

“I have a traumatic brain injury. I can’t remember appts and planning ahead to get to office is hard.”

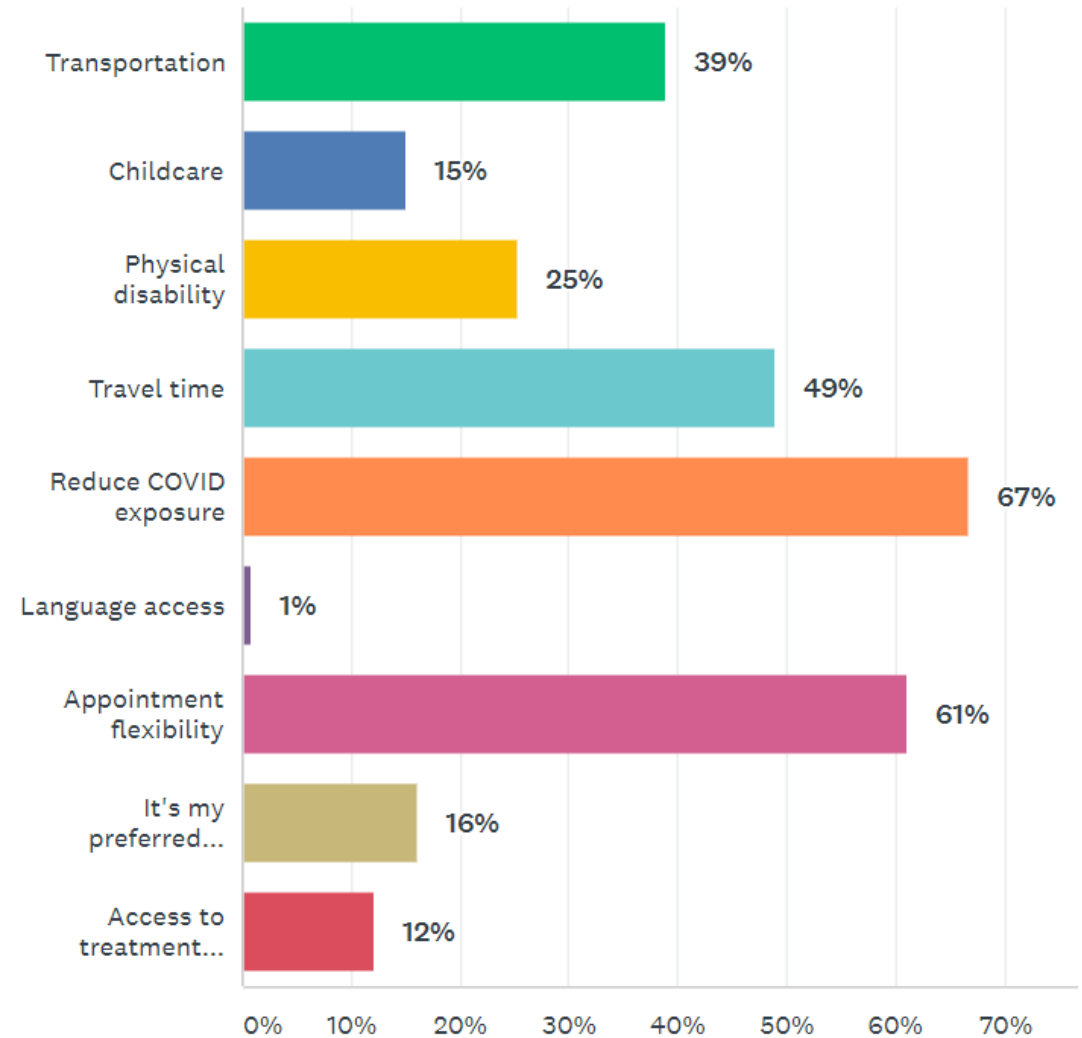
Please identify the reasons you may wish to continue with telehealth services.

“I work the nightshift. Better appointment times with telehealth.”

“It helps in my current job situation to access services without taking my day off.”

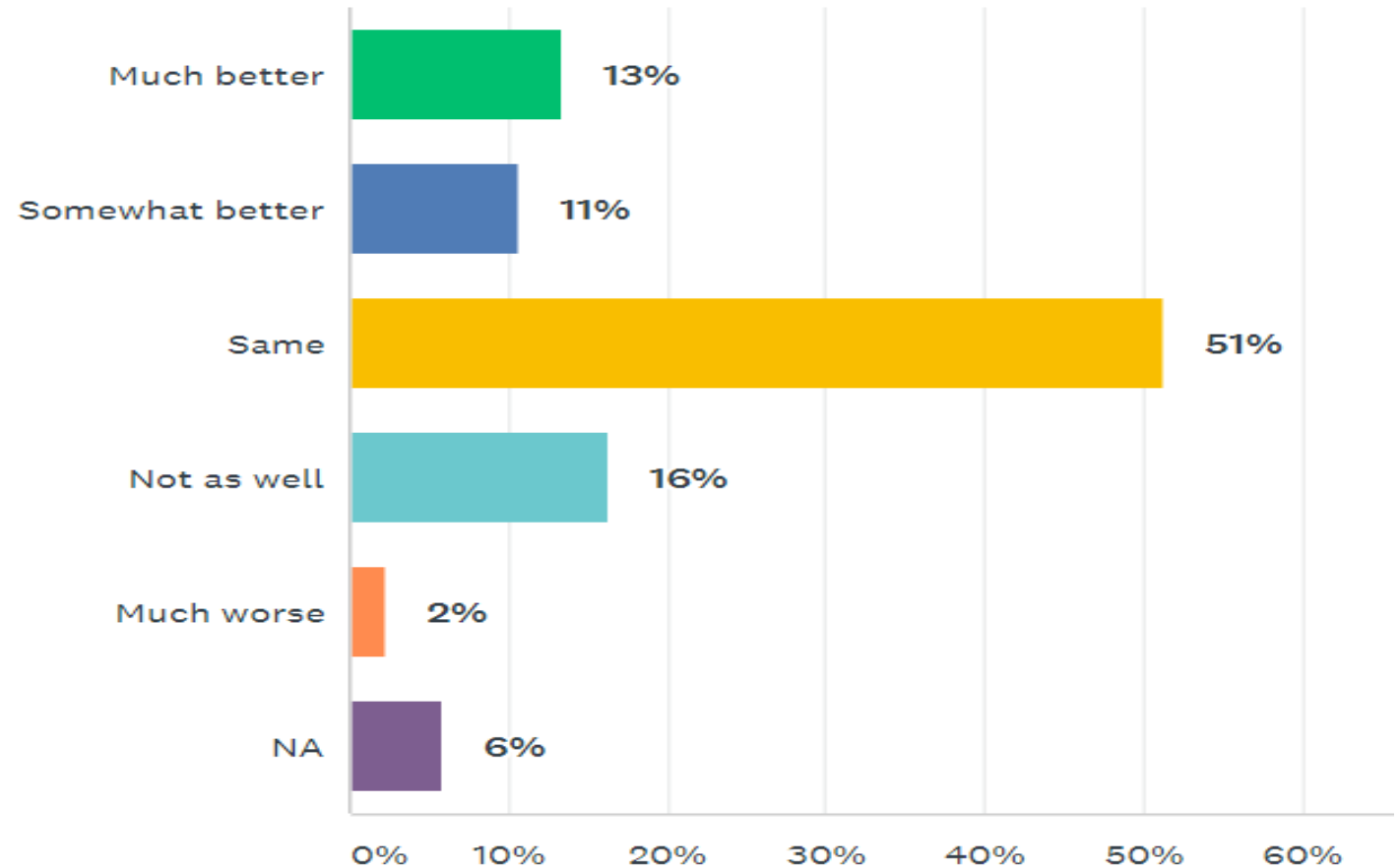
“With everything that happens with my illness (getting overwhelmed, going out. with my paranoia), it's just better to manage my stress and panic attacks. I have more panic attacks when I'm out. Other things that can trigger me .”

“I am more at ease in my home and more likely to share my thoughts in this environment. I suffer from anxiety and wherever I can increase my comfort level is what I am going to choose. This telehealth type of setting works for me.”



How connected do you feel to the therapist, case manager or other individual providing you services through telehealth?

75% report same or better therapeutic connection



Telehealth Updates and Allowances

- **October 2:** HHS Secretary Alex Azar renewed the Public Health Emergency through January 20, 2021. All telehealth allowances made by Medicare and state Medicaid agencies under this PHE are still in effect.
- **DEA** [waiving](#) the prior in-person medical evaluation requirement for the prescription of controlled substances. DEA [issued a letter](#) outlining temporary changes to requirement that practitioners register separately with DEA in every state where they prescribe controlled substances.
- **Medicare:** Telehealth permitted in homes. Site restrictions removes. “Established relationship” waived. Providers can bill for telehealth visits at the same rate as in-person visits. Now coverage for certain [audio-only interactions](#). Qualified providers list expanded during PHE.
- **Medicaid:** [CMS offers states broad flexibility](#) to cover telehealth including audio-only, telephonic, video technology commonly available on smart phones and other devices.
- **FCC Funding for Telehealth Services:** FCC established a [\\$200 million COVID-19 Telehealth Program](#) for eligible providers including BH orgs to apply for technology and equipment funding.

Learn more: <https://www.thenationalcouncil.org/covid19/>

Looking to the Future

- \$38.5 billion for direct relief to behavioral health providers and organizations
- Access to Opioid Use Disorder medication
- Long-term telehealth changes, including changes to tele-prescribing for OUD
- Increased reimbursement rates, FMAP bump and MH and SAPT Block Grant increases
- Certified Community Behavioral Health Clinics (CCBHCs)



NATIONAL COUNCIL
FOR BEHAVIORAL HEALTH

Resources for **COVID-19**

<https://www.thenationalcouncil.org/covid19/>

Questions?

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Download the [National Council's survey results](#).